Forms 990 / 990-EZ Return Summary

For calendar year 2017, or tax year beginning

, and ending

Prison Entrepreneurship Program, 20-1384253

Prison Inc.	Entrepreneurshi	p Program,	20-138425	3
Net Asset / Fund Balance at Begin	nning of Year		_	3,157,842
_				_
Revenue	2 2	E7 10E		
Contributions		57,185 26,093		
Program service revenue		0 200		
Investment income		8,288 4,983		
Capital gain / loss		4,903		
Fundraising / Gaming:				
Gross revenue				
Direct expenses				
Net income	-	22,706		
Other income			,519,255	
Total revenue			1,519,255	
Expenses	2 1	03 073		
Program services		93,973 37,879		
Management and general		73,640		
Fundraising			,705,492	
Total expenses			1,703,492	-186,237
Excess / (deficit)			_	-100,237
Changes			_	11,567
				2 002 172
Net Asset / Fund E	Balance at End of Year		=	2,983,172
Decemblistics of I	Daviere		Decembilistics of F	•
Reconciliation of		Tatal aumanaaa	Reconciliation of E	
Total revenue per financial statements	2,333,200		per financial statemen	Z,101,010
Less:		Less: Donated se	an ilaaa	
Unrealized gains Donated services				
Recoveries		Losses	adjustments	
Other	18,953	Other		13,953
Plus:	10,755	Plus:		13,755
			ovnoncos	
Investment expenses Other	5,000	Investment Other	expenses	
Total revenue per return	2,519,255		expenses per return	2,705,492
rotal revenue per return		rotal e	expenses per return	
		Balance Sheet		
	Beginning	Ending	Differences	
Assets	3,747,931	3,652,596	2	
Liabilities	590,089	669,424		
Net assets	3,157,842	2,983,172	-174,6	70
30000				
	Miscellaneous I	nformation		
	Amended return			
	Return / extended due date	11/15/18		
	Failure to file penalty _			

Form 8879-EO

IRS *e-file* Signature Authorization for an Exempt Organization

OMB	No.	1545-1878
CIVID	INO.	1343-1076

Department of the Treasury

For calendar year 2017, or fiscal year beginning _______, 2017, and ending ______, 20

u Do not send to the IRS. Keep for your records.

2017

Internal Revenue Service

Name of exempt organization

u Go to www.irs.gov/Form8879EO for the latest information.

Prison Entrepreneurship Program, Inc.

Employer identification number 20-1384253

Name and title of officer

Tim Hamilton

CFO

Part I Type of Return and Return Information (Whole Dollars	s Oniv	Dollars	(VVhole	Information	Return	and	Return	Type of	Part I
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Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a**, **2a**, **3a**, **4a**, or **5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, or **5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a	Form 990 check here Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	2,519,255
2a	Form 990-EZ check here ▶	2b	
За	Form 1120-POL check here b Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a	Form 8868 check here b b Balance Due (Form 8868, line 3c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

X	I authorize .	Carlos	Taboada	& Company	P.C.	to enter my PIN	77092 as my signature
			E	RO firm name		•	Enter five numbers, but do not enter all zeros
	being filed w	rith a state age	ncy(ies) regulatin	•	have indicated within the IRS Fed/State pro		py of the return is rize the aforementioned
	A (C	(()	- C 1 20 1	DIM		-1- 1	the standard and the Classic and the standard

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature } Date } 07/18/18

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

79275577077

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature } Carlos Taboada Date } 07/18/18

ERO Must Retain This Form — See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2017)

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

u Do not enter social security numbers on this form as it may be made public.

2017
Open to Public Inspection

u Go to www.irs.gov/Form990 for instructions and the latest information. For the 2017 calendar year, or tax year beginning , and ending D Employer identification number C Name of organization Check if applicable: Prison Entrepreneurship Program, Address change Inc. PEP 20-1384253 Doing business as Name change Number and street (or P.O. box if mail is not delivered to street address) 832-767-0928 4140 Directors Row, Suite B Initial return Final return/ City or town, state or province, country, and ZIP or foreign postal code terminated TX 77092 2,549,754 Houston **G** Gross receipts \$ Amended return Name and address of principal officer: H(a) Is this a group return for subordinates? Application pending Albert Smith 4140 Directors Row, Suite B H(b) Are all subordinates included? Houston TX 77092 If "No." attach a list, (see instructions) **X** 501(c)(3) 4947(a)(1) or Tax-exempt status: WWW.PEP.ORG Website: U H(c) Group exemption number U Year of formation: 2004 X Corporation Trust Form of organization: Association Other ${f u}$ M State of legal domicile: Summarv 1 Briefly describe the organization's mission or most significant activities: To unite executives and inmates through entrepreneurial passion and servant Governance leadership to transform lives, restore families and rebuild communities. 2 Check this box u if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) Activities & 4 Number of independent voting members of the governing body (Part VI, line 1b) 9 5 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 34 5 6 Total number of volunteers (estimate if necessary) 1000 7a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, line 34. Current Year 2,717,337 2,257,185 8 Contributions and grants (Part VIII, line 1h) Revenue 9 Program service revenue (Part VIII, line 2g) 217,688 226,093 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10,060 13,271 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 17,782 22,706 2,519,255 2,962,867 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 1,557,567 1,469,961 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) u 273,640 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 929,328 1,147,925 2,705,492 2,399,289 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 563,578 -186,237 **19** Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year End of Year ō 3,652,596 3,747,931 20 Total assets (Part X, line 16) 590,089 669,424 21 Total liabilities (Part X, line 26) 2,983,172 22 Net assets or fund balances. Subtract line 21 from line 20 157,842 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign Here Tim Hamilton **CFO** Type or print name and title Print/Type preparer's name Preparer's signature PTIN Check Paid 07/24/18 self-employed Carlos Taboada P01412660 Carlos Taboada **Preparer** Carlos Taboada & Company P.C. 45-2609906 Firm's EIN } Firm's name **Use Only** 1001 S Dairy Ashford Ste 370 Houston, TX 77077-2333 281-606-3011 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

Form	m 990 (2017) Prison Entrepreneurship Program, 20-1384253	Page 2
	Part III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>
	Briefly describe the organization's mission:	_
	To unite executives and inmates through entrepreneurial passion	
1	leadership to transform lives, restore families and rebuild com	munities.
	······	
	Did the experiention undertake any significant program consists during the year which were not listed on the	
2	3 - 1 - 3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Yes X No
	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	163 140
3		
Ū	services?	Yes X No
	If "Yes," describe these changes on Schedule O.	🗀 📇
4		
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	
	the total expenses, and revenue, if any, for each program service reported.	
4a	a (Code:) (Expenses \$ 1,831,013 including grants of \$) (Revenue \$	21,856)
F	Prison Entrepreneurship Program engages top business and academi	ic talent to
c	constructively redirect inmates' ambitions by equipping them wit	th values
	based training in entrepreneurship; thus enabling them to produc	
e	enter society. This includes a five month business plan compet:	ition in
ŗ	prison and a range of post-release programs, including housing	assistance,
	work readiness services, continuing education, executive mentori	
k	business start up assistance. During the current year, 987 ind	ividuals
F	participated in the program in Houston, Dallas, Cleveland, and '	Venus Texas.
	b (Code:) (Expenses \$ 362,960 including grants of \$) (Revenue \$	227,843)
C	Operation of Houston Caleb House, LLC, which owns and operates	
C	Operation of Houston Caleb House, LLC, which owns and operates property to be used as reliable housing available to ex-offender	rs upon
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	art IV Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
•••				
_	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	44.5	x	
	complete Schedule D, Part VI	11a		
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			37
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	440		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
		15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	····· ···		
.0	assistance to an few feeding in dividuals 2 If Was " seconds to Calcadida E. Dante III and IV	16		х
17				<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	4-7		Х
10	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			v
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			7.5
	If "Yes," complete Schedule G, Part III	19_		X) (201

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	. 21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	. 22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schoolule K. If "No." go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	245		
С		240		
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			37
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26	X	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	200		
D	Schedule L, Part IV	206		х
_		28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)		v	
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	. 31		_X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	. 32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?			Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
J	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
26		330		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			v
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O.		X	

Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 11 Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X 1c Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? X За If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 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 X 4a If "Yes," enter the name of the foreign country: ${f u}$ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Х 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the X organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b X Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? Х 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Form 990 (2017) Prison Entrepreneurship Program, 20-1384253 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part_VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 9 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? X 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? 8a Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Did the organization have local chapters, branches, or affiliates? 10a Х If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a Х b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed **u** None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records: u

4140 Directors Row Suite B

TX 77092

832-767-0928

Tim Hamilton

Houston

20

Form 990 (201	7) Prison	Entreprene	urship	Program,	20-1	384253	3		Page 7
Part VII	Compensati	on of Officers, D	irectors, Tr	rustees, Key	Employees,	Highest	Compensated	Employees,	and
	Independent	Contractors				_	-		_
	Check if Sch	edule O contains a	a response	or note to any	line in this P	art VII			Ш

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) Name and Title Average Position Reportable Reportable Estimated hours per (do not check more than one compensation compensation from amount of box, unless person is both an from week related other officer and a director/trustee) organizations compensation (list any organization (W-2/1099-MISC) hours for from the related ndividual nstitutional (W-2/1099-MISC) organization organizations employee and related organizations below dotted compensated line) trustee trustee (1) Mike Humphrey 2.00 1.00 Chairman X 0 0 (2) Dr. Gary Carini 2.00 Board Member 0.00 X 0 0 0 (3) Rober Barkley 2.00 0.00 X 0 0 Board Member (4) John Jackson 2.00 0 0.00 X 0 Board Member (5) Brandon Holcomb 2.00 0 Board Member 0.00 X 0 0 (6) Roger Manny 2.00 0.00 X 0 0 Board Member 0 (7) Britanie Olvera 2.00 Board Member 0.00 X 0 0 0 (8) Pat Gotcher 2.00 X Board Member 0.00 0 0 (9) Nancy White 2.00 Board Member 0.00 X 0 0 0 (10) Albert Smith 40.00 0 0.00 X 177,868 (11) William A. Mayer 40.00 0.00 0 CDO X 121,000

Forn	n 990 (20	17) Prison E	ntreprene	eur	rsh	ip	I	rog	gr	am, 20-138	4253			Р	age
Pa	rt VII	Section A. Officers	s, Directors, Tru	stee	s, K	ey E	mpl	loyees	s, a	nd Highest Compensated	Employees (continued)				
	٨	(A) Name and title	(B) Average hours per week (list any hours for	bo	x, unle icer a	Pos check ess pe nd a	erson directo	than or is both a	an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)		Estima amoul othe compen from	ated nt of er sation	
			related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)			organiz and re organiza	lated	
(1:	2) Pł	ni Tran													
COC			40.00			x				102,838	o				,
(1:		im Hamilton	0.00			^		H		102,030		+			
CF			40.00			x				98,292	0				(
	Sub-tot	tal							u	499,998		-			
С		rom continuation she		Sect	ion /	۸			u						
		add lines 1b and 1c)									A 400.000 (<u></u>			
2		umber of individuals (in ble compensation from				thos	e lis	ted at	OOV	e) who received more than	\$100,000 of				
_			-							and the second s				Yes	No
3	employ	organization list any t o ee on line 1a? <i>If "Yes,</i> "	ormer officer, dir " complete Sched	ectoi dule	r, or <i>J foi</i>	trust * <i>suc</i>	ee, h in	key e dividu	mpi al	oyee, or highest compensa	ated		3		х
4										on and other compensation complete Schedule J for su					
	individu	ıal											4	х	
5	Did any	person listed on line	1a receive or acc	crue	com	pens	atio	n from	n ar	ny unrelated organization of for such person	r individual		5		х
Sect		ndependent Contracto		00,	0011	prote	, 00	modun		TOT GUOTI POTOGIT					
1										actors that received more lar year ending with or with		ear			
			(A) d business address								(B) tion of services		Co	(C) ompensat	tion
				•											
2		umber of independent d more than \$100.000								se listed above) who	0				

Form 990 (2017) Prison Entrepreneurship Program, 20-1384253 Page 9 Statement of Revenue
Check if Schedule O contains a response or note to any line in this Part VIII Part VIII (A) (B) Related or

						Total Tevenue	exempt function revenue	business revenue	excluded from tax under sections 512-514
nts nts	1a	Federated car	mpaigns	1a					
ira our	b	Membership o	lues	1b					
s, (Am		Fundraising e		1c					
ift: ar		Related organ		1d					
s, iii,		Government grants		1e					
Sign	_	All other contribution							
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts		1f	2,257,185				
g	g	Noncash contribution	ns included in lines 1a	-1f: \$	90,982				
	h	Total. Add line	es 1a-1f		u	2,257,185			
Jue					Busn. Code				
Service Revenue	2a	Rental	income-parti	cipants	531110	226,093	226,093		
e R	b								
γİĊ	С								
Sel	d								
Program	е								
rogi	f	All other progr	am service reve	enue					
Ь	g	Total. Add line	es 2a–2f		u	226,093			
	3		come (including						
			ilar amounts) $_{\dots}$			8,288			8,288
	4				ond proceeds ${f u}$				
	5	Royalties		<u></u>	u				
			(i) Real		(ii) Personal				
	6a	Gross rents							
	b	Less: rental exps.							
	С	Rental inc. or (loss)							
	d 7a	Net rental inco	ome or (loss)						
		sales of assets	(i) Securities		(ii) Other				
	_	other than inventory	29	,482	6,000				
	b	Less: cost or other		400	1 000				
		basis & sales exps.	29,	,499 -17	1,000				
		Gain or (loss)	L		5,000	4 000	4 002		
			oss)		u	4,983	4,983		
ne	ва		om fundraising eve	ents					
Revenue		(not including \$							
Re			reported on line 1c						
ЭĒ	L		18	a					
Other		Less: direct ex		D	ents u				
					enis u				
	Эd	See Part IV, line	om gaming activitie	_					
	h	Less: direct ex		a					
				" 🖵	es u				
			f inventory, less		es u				
	IVa		lowances						
	h	Less: cost of		a					
			(loss) from sale	"	ory u				
			cellaneous Revenue	3 OI IIIVEIII	Busn. Code				
	11a				611710	22,706	22,706		
	b	*				,	,		
	C								
	d		 nue						
			es 11a-11d			22,706			
			e. See instructio			2,519,255	253,782	0	8,288

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (A) (B) Do not include amounts reported on lines 6b, Program service Total expenses Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 499,998 284,720 95,004 120,274 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 814,240 691,741 62,021 60,478 Pension plan accruals and contributions (include 27,596 20,502 3,299 3,795 section 401(k) and 403(b) employer contributions) 88,712 Other employee benefits 119,409 14,276 16,421 71,561 13,247 96,324 11,516 Payroll taxes 10 Fees for services (non-employees): Management 600 600 8,550 8,550 Accounting Professional fundraising services. See Part IV, line 17 Investment management fees **g** Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 12 Advertising and promotion 55,822 41,471 6,674 7,677 13 Office expenses 2,778 Information technology 30,577 24,603 3,196 14 Royalties 357,262 332,364 11,579 13,319 16 Occupancy 53,720 4,354 63,083 5,009 Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 24,925 24,925 20 Interest Payments to affiliates 21 110,550 102,819 3,595 4,136 Depreciation, depletion, and amortization 22 23,345 23,345 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 168,745 12,718 Other contractual 131,562 24,465 125,581 125,581 Business plan competition Re-entry & development 98,368 98,368 Family programs 32,259 32,259 e All other expenses 48,258 45,120 1,515 1,623 2,705,492 2,193,973 237,879 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here u following SOP 98-2 (ASC 958-720)

	Check if Schedule O contains a response or not	te to any lin	e in this Part X			
				(A)		(B)
				Beginning of year		End of year
1	Cash—non-interest bearing			295,519	1	321,714
2	Savings and temporary cash investments			1,564,542	2	1,582,384
3	Pledges and grants receivable, net			845,319	3	673,144
4	A a a a constant a a a a boca balance a a a t				4	
5	Loans and other receivables from current and former	officers, dire	ectors,			
	Complete Part II of Schedule L				5	
6	Loans and other receivables from other disqualified pe	ersons (as o	defined under section			
			6			
7	Notes and loans receivable, net	36,904	7	59,824		
8	Inventories for sale or use				8	
9	Prepaid expenses and deferred charges	p		26,282	9	40,537
10a	Land, buildings, and equipment: cost or					
	other basis. Complete Part VI of Schedule D	. 10a	1,295,115			
b	Less: accumulated depreciation	10b	337,463	961,334	10c	957,652
11	Investments—publicly traded securities				11	
12	Investments—other securities. See Part IV, line 11			17,031	12	16,341
13					13	
14					14	
15						1,000
16					_	3,652,596
17				62,884	17	85,843
18	Grants payable			18		
19	Deferred revenue			19		
	Tax-exempt bond liabilities					
					21	
22			5,			
		yees, and		140 (50		142 442
						143,442
				327,695		319,410
					24	
25						
				40 053	0.5	120 720
26	Total liabilities Add lines 47 through 25					120,729 669,424
20				390,009	20	009,424
			A and			
27				2 312 523	27	2,310,028
	Temperarily restricted not assets		·····			673,144
	Permanently restricted net assets			043,313		0/5/144
29	Organizations that do not follow SEAS 117 (ASC 9		horo II		29	
		Joj, CHECK	nere u 🔲 anu			
30	Comital atomic on twint maintain an accomment from de			20		
		ent fund				
32 33				3,157,842	33	2,983,172
JJ	Total net assets or fund balances Total liabilities and net assets/fund balances			3,747,931	34	3,652,596
	4 5 6 7 8 9 10a b 11 12 13 14 15 16 17 18	Accounts receivable, net Loans and other receivables from current and former trustees, key employees, and highest compensated en Complete Part II of Schedule L Loans and other receivables from other disqualified per 4958(f)(1)), persons described in section 4958(c)(3)(B sponsoring organizations of section 501(c)(9) voluntar organizations (see instructions). Complete Part II of S Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments—publicly traded securities Investments—other securities. See Part IV, line 11 Investments—program-related. See Part IV, line 11 Intangible assets Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line) Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV Loans and other payables to current and former office trustees, key employees, highest compensated emplor disqualified persons. Complete Part II of Schedule L Secured mortgages and notes payable to unrelated the Unsecured notes and loans payable to unrelated the Unsecured notes and loans payable to unrelated third Unsecured notes and loans payable to unrelated third Other liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), che complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 968), che complete lines 30 through 34. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipm	4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directivates, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as of 4958(f)(1)), persons described in section 4958(c)(3)(B), and continuous sponsoring organizations of section 501(c)(9) voluntary employed organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 11 Investments—publicly traded securities 12 Investments—publicly traded securities 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule L 22 Loans and other payables to current and former officers, directors trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related parties, and other liabilities not included on lines 17-24). Complete of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here used to the service of the sessets 26 Permanently restricted net assets 27 Permanently restricted net assets 28 Permanently restricted net assets 29 Permanently restricted net assets 30 Capital stock or	4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 10b 3337,463 11 Investments—publicity traded securities 12 Investments—publicity traded securities 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other payables and other payables to currelated third parties 26 Organizations that follow SFAS 117 (ASC 958), check here u	4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(c)(3)(8)), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 26,282 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 1,295,11.5 10b 337,463 961,334 1 Investments—publicly traded securities 11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11 13 Investments—publicly traded securities 14 Intangible assets 15 Other assets. See Part IV, line 11 1 Intangible assets 16 Other assets. See Part IV, line 11 1 Accounts payable and accrued expenses 16 Grants payable and accrued expenses 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 17 Exexempt bond liabilities 18 Escrov or custodial account liability. Complete Part IV of Schedule D 19 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 20 Loans and other payables to unrelated thirid parties 21 Descured notes and loans payable to unrelated thirid parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 21 Loans and other payables to related thirid parties 22 Other liabilities (including federal income tax, payables to related thirid parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 22 Loans and other payables to truncated thirid parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 24 Pa,852 25 Total liabilities. A	4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f(1)), persons described in section 4958(c(3)(8), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Notes and loans receivable, net 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 10b 337, 463 961, 334 10c 11 Investments—publicly traded securities 11 Investments—publicly traded securities 12 Investments—program-felated. See Part IV, line 11 13 Investments—program-felated. See Part IV, line 11 14 Investments—program-felated. See Part IV, line 11 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Garans payable 19 Deferred revenue 10 Deferred revenue 10 Deferred revenue 10 Deferred

Form **990** (2017)

If the organization changed either its oversight process or selection process during the tax year, explain in

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form **990** (2017)

3a

X

Schedule O.

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Prison

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.

u Attach to Form 990 or Form 990-EZ.

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

Program,

Open to Public Inspection

Employer identification number

Inc. 20-1384253 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 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 section 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 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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. 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. 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. 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. 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. 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. Enter the number of supported organizations 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))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Schedule A (Form 990 or 990-EZ) 2017 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 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.)

Sec	tion A. Public Support						
Caler	dar year (or fiscal year beginning in) u	(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.")	1,611,356	2,955,185	1,884,114	2,717,337	2,257,185	11,425,177
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 5	Total. Add lines 1 through 3 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)	1,611,356	2,955,185	1,884,114	2,717,337	2,257,185	11,425,177
6	Public support. Subtract line 5 from line 4.						11,425,177
	tion B. Total Support						
Caler	dar year (or fiscal year beginning in) u	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	1,611,356	2,955,185	1,884,114	2,717,337	2,257,185	11,425,177
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	77,941	75,240	176,145	224,133	234,381	787,840
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10 11	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	31,678	10,046	14,153	17,782	23,706	97,365 12,310,382
12	Gross receipts from related activities, etc.	(coo instructions)				12	248,799
13	First five years. If the Form 990 is for the			urth or fifth tax you			240,/99
13	organization, check this box and stop her	•		•			▶ □
Sec	tion C. Computation of Public Su						
14	Public support percentage for 2017 (line 6,	• •		o (f))		14	92.81 %
15							93.74 %
16a	Public support percentage from 2016 Sche 33 1/3% support test—2017. If the organi	ization did not chec	k the hov on line 1			hack this	93.74 /0
IVa	box and stop here. The organization quali			tion			▶ X
b	33 1/3% support test—2016. If the organi					ore check	🏲 🛅
	this box and stop here. The organization of						▶ □
17a	10%-facts-and-circumstances test—201						
	10% or more, and if the organization meets Part VI how the organization meets the "fa	ts the "facts-and-ci	cumstances" test,	check this box and	d stop here. Expla	ain in	
b	10%-facts-and-circumstances test—201 15 is 10% or more, and if the organization	6. If the organization meets the "facts-a	on did not check a and-circumstances"	box on line 13, 16 test, check this be	a, 16b, or 17a, and ox and stop here.	d line	▶ ∐
	Explain in Part VI how the organization me			•	•	•	▶ □
18	Private foundation. If the organization did	I not check a box of	n line 13, 16a, 16b	o, 17a, or 17b, che	ck this box and se		
	Instructions					Schedule A (Form 9	F L

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.)

S	tion A Dublic Support	quality under ti	ne tests listed t	below, please c	ompiete Part i	1.)	
	tion A. Public Support dar year (or fiscal year beginning in) u	(a) 2012	(b) 2014	(a) 201E	(4) 2016	(a) 2017	(f) Total
	Gifts, grants, contributions, and membership	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с 8	Add lines 7a and 7b Public support. (Subtract line 7c from						
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in) u	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	(0) 2010	(0, =0 * *	(0, 2010	(0, 2010	(0, =0.1)	(7 : 5 : 5 : 5
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						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the	•				` ' ' '	
	organization, check this box and stop here	<u> </u>					▶
Sec	tion C. Computation of Public Su	• •					
15	Public support percentage for 2017 (line 8,						
16 Coo	Public support percentage from 2016 Sche					16	<u>%</u>
	tion D. Computation of Investmen) line (0)		11	
17 40	Investment income percentage for 2017 (li		III II: 47			40	<u>%</u>
18 100	Investment income percentage from 2016						<u>%</u>
19a	33 1/3% support tests—2017. If the organ						▶ □
b	17 is not more than 33 1/3%, check this bo 33 1/3% support tests—2016. If the organ		=				▶ ⊔
IJ	line 18 is not more than 33 1/3%, check thi						▶ □
20	Private foundation. If the organization did		=			=	. —

Supporting Organizations

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

Section A. All Supporting Organizations

- 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.
- Did the organization have any supported organization that does not have an IRS determination of status 2 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).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- 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.
- 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.
- 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.
- 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.
- 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)
- 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).
- 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?
- С Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to 6 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.
- 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).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? 8 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more 9a 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.
- 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.
- 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.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 10a 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - 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.)

		Yes	No
	1		
	2		
	3a		
	3b		
	20		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5с		
	6		
	7		
	8		
	9a		
	0.		
	9b		
	9с		
	10a		
	10b		
A (Fo	orm 99	0 or 990-	EZ) 2017

Schedu	le A (Form 990 or 990-EZ) 2017 Prison Entrepreneurship Program, 20-138	4253		Page 5
Par	t IV Supporting Organizations (continued)		ı	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	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		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			T
			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,			
Cooti	supervised, or controlled the supporting organization.	2		
Secu	on C. Type II Supporting Organizations			
	Many a majority of the approximation of discassing an enterest devices the territories of the discassing		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	1		
Secti	the supported organization(s). on D. All Type III Supporting Organizations			
Jecu	on B. All Type III Supporting Organizations	1	Voc	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
'	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	<u> </u>		
-	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			
3	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		
Secti	on E. Type III Functionally-Integrated Supporting Organizations		l	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruc-	tions).		
a	The organization satisfied the Activities Test. Complete line 2 below.	,.		
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instructions).		
		,		
2 /	Activities Test. Answer (a) and (b) below.		Yes	No
а	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.			
а	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 "Vas " describe in Part VI the role played by the organization in this regard	3h	ĺ	1

eme	erge	ency temporary reduction	(see	instructions).		6		
7		Check here if the current	year	s the organization's first as a non-	functionally integrated Ty	ype II	I supporting organization (see
		instructions).						

5

Schedule A (Form 990 or 990-EZ) 2017

Income tax imposed in prior year

Distributable Amount. Subtract line 5 from line 4, unless subject to

Schedule A (Form 990 or 990-EZ) 2017

c Remainder. Subtract lines 4a and 4b from 4.

b Excess from 2014

Part VI. See instructions.

and 4c.

8 Breakdown of line 7: a Excess from 2013

c Excess from 2015 d Excess from 2016 e Excess from 2017

Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in

Excess distributions carryover to 2018. Add lines 3j

Schedule A (Form 990 or 990-EZ) 2017

Part VI	III, line 12; Part IV, B, lines 1 and 2; Pa 3a and 3b; Part V,	Section A, lines 1, 2, art IV, Section C, line line 1; Part V, Section	, 3b, 3c, 4b, 4c, 5a 1; Part IV, Section n B, line 1e; Part V	, 6, 9a, 9b, 9c, 11a, 11b n D, lines 2 and 3; Part l'	Part II, line 17a or 17b; Part , and 11c; Part IV, Section V, Section E, lines 1c, 2a, 2b, and 8; and Part V, Section E, actions.)
Part I	I, Line 10 -	Other Income	e Detail		
Other			\$	97,365	
•					
•					
•					
•					
•					
•					
• • • • • • • • • • • • • • • • • • • •					

Prison Entrepreneurship Program,

20-1384253

Page 8

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements u Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. u Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization Employer identification number Prison Entrepreneurship Program, 20-1384253 Inc. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a **b** Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located $u\ \dots$ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 u \$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 u \$ **b** Assets included in Form 990, Part X

Sche	dule D (Form 990) 2017 Prison I	Entrepreneur	ship Progr	ram,	20-13842	53		Page 2
Pa	rt III Organizations Maintainin	g Collections of	Art, Historical T	reasures, or	Other Simil	ar Assets	(continu	ed)
3	Using the organization's acquisition, access collection items (check all that apply):	sion, and other records	s, check any of the fo	llowing that are	a significant use	of its		
а	Public exhibition	d 🗌	Loan or exchange pr	ograms				
b	Scholarly research	<u> </u>	Other	•				
С	Preservation for future generations							
4	Provide a description of the organization's	collections and explain	how they further the	organization's e	exempt purpose	in Part		
•	XIII.	concollerio ana explan	Thom they further the	organization o	skompt parpood	iii i uit		
5	During the year, did the organization solici	t or receive donations	of art historical treasu	ires or other sir	milar			
	assets to be sold to raise funds rather than						. Yes	No
Pa	rt IV Escrow and Custodial A							
	Complete if the organization 990, Part X, line 21.	on answered "Yes"	on Form 990, Pa	art IV, line 9,	or reported a	n amount	on Form	
1a	Is the organization an agent, trustee, custo		•					
	included on Form 990, Part X?						. L Yes	i 📙 No
b	If "Yes," explain the arrangement in Part X	III and complete the fo	llowing table:		1			
							Amount	
С	Beginning balance					1c		
d	Additions during the year					1d		
	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount on	Form 990, Part X, line	e 21, for escrow or cu	stodial account	liability?		Yes	No
	If "Yes," explain the arrangement in Part X							. П
Pa	rt V Endowment Funds.							
	Complete if the organization	on answered "Yes"	on Form 990, Pa	art IV, line 10).			
	·	(a) Current year	(b) Prior year	(c) Two years	back (d) Thr	ee years back	(e) Four	years back
1a	Beginning of year balance							
	Contributions							
	Net investment earnings, gains, and							
•	losses							
ч	Grants or scholarships							
	Other expenditures for facilities and							
C	•							
	programs							
	Administrative expenses						-	
	End of year balance			<u> </u>				
2	Provide the estimated percentage of the cu		e (line 1g, column (a)) held as:				
	Board designated or quasi-endowment \boldsymbol{u}							
	Permanent endowment u %							
С	Temporarily restricted endowment ${f u}$							
	The percentages on lines 2a, 2b, and 2c s							
3a	Are there endowment funds not in the pos-	session of the organiza	ation that are held and	d administered for	or the		_	
	organization by:						`	Yes No
	(i) unrelated organizations						3a(i)	
	(ii) related organizations						3a(ii)	
b	If "Yes" on line 3a(ii), are the related organ	nizations listed as requi	red on Schedule R?				3b	
	Describe in Part XIII the intended uses of							
	rt VI Land, Buildings, and Eq							
	Complete if the organization	•	on Form 990. Pa	art IV, line 11	a. See Form	990, Part 2	X, line 10).
	Description of property	(a) Cost or other		other basis	(c) Accumulate		(d) Book v	
	,	(investment)	''	ner)	depreciation			
12	Land	,	`	213,570			21	3,570
		• •		86,619	130	,123		7,496
Ď	Buildings				109	,	J- <u>T</u>	. , . ,
	Leasehold improvements		-	97 206	150	101	1 2	<u>/ 205</u>
	Equipment			287,296		,491		4,805
	Other			07,630		,849		$\frac{1,781}{7,652}$
ı otal	. Add lines 1a through 1e. (Column (d) mus	t equai ⊢orm 990, Par	τ x, column (Β), line 1	UC.)		u	95	7 , 652

Part VII	Investments—Other Securities.	iip Program,	20-1364253	Page 3
i dit vii	Complete if the organization answered "Yes" on	Form 990, Part IV, line	e 11b. See Form 990, P	art X, line 12.
	(a) Description of security or category	(b) Book value	(c) Method of	
	(including name of security)		Cost or end-of-year	r market value
(1) Financial	derivatives			
/-· - ·	eld equity interests			
/ LI\				
	n (b) must equal Form 990, Part X, col. (B) line 12.) ${f u}$			
Part VIII	Investments—Program Related.	•		
	Complete if the organization answered "Yes" on	Form 990, Part IV, line	11c. See Form 990, P	art X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of	valuation:
			Cost or end-of-year	ır market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
	n (b) must equal Form 990, Part X, col. (B) line 13.) u			
Part IX	Other Assets.			
	Complete if the organization answered "Yes" on	Form 990, Part IV, line	e 11d. See Form 990, P	art X, line 15.
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
	n (b) must equal Form 990, Part X, col. (B) line 15.)		u	
Part X	Other Liabilities.		u	
	Complete if the organization answered "Yes" on	Form 990, Part IV, line	11e or 11f. See Form	990, Part X,
	line 25.			
1.	(a) Description of liability	(b) Book value		
(1) Federal	income taxes			
(2) Accru	med salaries and payroll taxes	120,729		
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	n (h) must oqual Form 000. Part V. col. (P) line 25 \	120,729		
i Jiai. (Colulli	n (b) must equal Form 990, Part X, col. (B) line 25.) u	120,123		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2017 Prison Entrepreneurship Progr	am,	20-1384253	3	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme		•	turn.	
	Complete if the organization answered "Yes" on Form 990, Pa	rt IV, line	12a.		
1	Total revenue, gains, and other support per audited financial statements			1	2,533,208
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1			
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
С.	Recoveries of prior year grants	2c	10 052		
	Add Page On the state of	2d	18,953	0.	10 053
	Add lines 2a through 2d			2e	18,953 2,514,255
	Subtract line 2e from line 1			3	Z,514,255
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	4a			
	Investment expenses not included on Form 990, Part VIII, line 7b	4a 4b	5,000		
	Other (Describe in Part XIII.) Add lines 4a and 4b		-	4c	5,000
	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)			5	2,519,255
	rt XII Reconciliation of Expenses per Audited Financial Stateme		•	-	
ıu	Complete if the organization answered "Yes" on Form 990, Pa			Cluiii	•
1	Total expenses and losses per audited financial statements			1	2,707,878
	Amounts included on line 1 but not on Form 990, Part IX, line 25:			•	2,,0,,0,0
	Donated services and use of facilities	2a			
		2b			
	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	13,953		
	Add lines 2a through 2d			2e	13,953
	Subtract line 2e from line 1			3	2,693,925
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	·····			, ,
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIII.)	4b	11,567		
	Add lines 4a and 4b		-	4c	11,567
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	2,705,492
Pa	rt XIII Supplemental Information.				
2; Pa Pa	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a part XII, Line 2d - Revenue Amounts Included Effect of unconsolidating a subsidiary that	any addition in Fi	al information. nancials -	Othe	r
	art XI, Line 4b - Revenue Amounts Included				10,755
Ta	ax gain on asset disposition		\$		5,000
Pa	art XII, Line 2d - Expense Amounts Included	in F	inancials -	Oth	er
			_		
Ef	ffect of unconsolidating a subsidiary that	files	an 1120 \$		18,953
Bo	ook gain on asset disposition		\$		-5,000
_					
Pa	art XII, Line 4b - Expense Amounts Included	on Re	eturn - Oth	er	
_	1 /		1.		11
В	ook / Tax Depreciation Difference		\$		11,567

Schedule D (Fo	orm 990) 2017	Prison	Entrepreneurship	Program,	20-1384253	Page 5
Part XIII	Supplementa	al Informat	Entrepreneurship tion (continued)			
•						
•						

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

u Complete if the organization answered "Yes" on Form 990, Part IV, line 23. u Attach to Form 990. uGo to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Prison Entrepreneurship Program,

Inc.

Employer identification number 20-1384253

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
	одраш	1.0		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
_	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line			
		,		
	1a?	2		
•	Indicate which if any of the fellowing the filter agreement or would be establish the accompanying of the			
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
_	For necessary listed on Form 200 Part VIII Costion A line to did the arrestication and arrangement			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			3.7
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
•		7		х
0		_		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			v
	in Part III	8		X
•	If "Voo" on line 9 did the organization also follow the rehuttable programation procedure described in			
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations, section, 53,4958-6(c)?	9		
	DELINATION SELECTION (1) AND OFFICE (i	•

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title			W-2 and/or 1099-N	IISC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported	
(A) Name and Title		Base ensation	compensation	(iii) Other reportable compensation	compensation	bonomo		as deferred on prior Form 990	
Albert Smith	(i) <u>1</u>	54,868	23,000	C	0	0	177,868	c	
1 CEO	(ii)	0	0	C	0	0	0	C	
	(i)								
2	(ii)								
	(i)								
3	(ii)								
	(i)								
4	(ii)								
	(i)								
5	(ii)								
	(i)								
6	(ii)								
	(i)								
7	(ii)								
	(i)								
8	(ii)								
	(i)								
9	(ii)								
	(i)								
0	(ii)								
	(i)								
1	(ii)								
	(i)								
2	(ii)								
	(i)								
3	(ii)								
	(i)								
4	(ii)								
	(i)								
5	(ii)								
	(i)								
6	(ii)								

Schedule J (Form 990) 2017 Prison Entrepreneurship Program,	20-1384253	Page 3
Part III	Supplemental Information		
Provide the for any ad	e information, explanation, or descriptions required for Part I, lines 1a, 1b, Iditional information.	3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part	
• • • • • • • • • • • • • • • • • • • •			
•			
• • • • • • • • • • • • • • • • • • • •			
• • • • • • • • • • • • • • • • • • • •			
•			
• • • • • • • • • • • • • • • • • • • •			

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons u Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

u Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Inspection Employer identification number

Name of the organization Prison Entrepreneurship Program, Inc. 20-1384253 Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (b) Relationship between disqualified person and (d) Corrected? 1 (a) Name of disqualified person (c) Description of transaction organization (1) (2) (3)(4) (5)(6) Enter the amount of tax incurred by the organization managers or disqualified persons during the year Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \mathbf{u} \$ _____ Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22. (b) Relationship (a) Name of interested person (g) In default? (i) Written (c) Purpose of (d) Loan to (h) Approved (e) Original (f) Balance due with organization or from the by board or agreement? loan principal amount org.? committee? To From Yes Nο Yes No Yes No PEP Noteholdings, LLC Officer X Х X X WORKING CAPITAL 174,000 143,442 (10)Total 143,442 Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested (c) Amount of assistance (d) Type of assistance (e) Purpose of assistance person and the organization (1) (2)(3)(4) (5) (6)

(7) (8) (9)

SCHEDULE M (Form 990)

Noncash Contributions

u Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

OMB No. 1545-0047 2017

Open To Public Inspection

Department of the Treasury Internal Revenue Service

u Attach to Form 990. u Go to www.irs.gov/Form990 for the latest information.

Employer identification number

Name of the organization Prison Entrepreneurship Program, Inc.

20-1384253 Part I Types of Property (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art — Works of art Art — Historical treasures 2 Art — Fractional interests 3 Books and publications 4 Clothing and household 5 goods Cars and other vehicles 7,200 **FMV** X 2 6 7 Boats and planes Intellectual property 8 29,602 X 6 **FMV** 9 Securities — Publicly traded Securities — Closely held stock 10 Securities — Partnership, LLC, 11 or trust interests Securities — Miscellaneous 12 13 Qualified conservation contribution — Historic structures 14 Qualified conservation contribution — Other Real estate — Residential 15 Real estate — Commercial 16 Real estate — Other 17 Collectibles 18 Food inventory 19 Drugs and medical supplies 20 21 Taxidermy 22 Historical artifacts Scientific specimens 23 Archeological artifacts 24 54,180 Other $\mathbf{u}($ Goods/services)138 FMV 25 X 26 Other **u**(______) 27 Other **u**(_____) Other **u**(28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through			
	28, that it must hold for at least three years from the date of the initial contribution, and which isn't required			
	to be used for exempt purposes for the entire holding period?	30a		X
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard			
	contributions?	31		X
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash			
	contributions?	32a	X	
b	If "Yes," describe in Part II.			
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,			
	describe in Part II			

Schedule M (Forn	·	Prison	<u>Entrep</u> i	reneurship	Program,	20-138		Page 2
Part II							, 32b, and 33, and	
							e number of items i	eceived,
	or a con	nbination of	both. Also co	omplete this pa	rt for any addition	onal information.		
Daret '	T Tino	32h -	Third D	arty Hand	to Progo	ag Nongagh	Contribution	v a
Part.	T 1 TITLE	- 3 <u>2</u> D -		arcy used	CO PLOCE	ss Noncasii	COLLETTORCIO	15
The O	rganiza	tion us	ses lice	nsed secu	rities bro	kers to se	ll publicly	traded
			T.T.T					
stocks	s.							
The O	raanisa	tion us	202 3 40	mnany tha	t provides	an online	donation pl	atform
111E O	rganrza	cion us	ses a co	mpany cha	c provides	an ontine	donacton p.	Lacrorm.
The c	ompany	collect	s and d	elivers t	o the Orga	anization i	n-kind goods	,
• •••••								
donate	ed to t	he Orga	anization	n for a fe	ee equal t	o a 20% ma	rkup over th	e cost
			_	_			221	
of the	e in-ki	nd iter	n. A mai	nager of	the compan	y is also	an officer o	of the
Organ:	ization							
Organi	LZaCIOII	.•						

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 **2017**

Department of the Treasury Internal Revenue Service

u Attach to Form 990 or 990-EZ. u Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection

Inc.	20-1384253
Form 990, Part VI, Line 11b - Organization's Proce	ss to Review Form 990
The Organization's Audit Committee and tax prepare	r discuss the Form 990.
A PDF copy of the Form 990 is given to the Board f	for their review prior to
being filed.	
•	
Form 990, Part VI, Line 12c - Enforcement of Confl	icts Policy
The Board of Directors approves all major contract	s and agreements. Any
conflict of interest situation would be addressed	by the Directors before a
contract is executed.	
Form 990, Part VI, Line 15a - Compensation Process	for Top Official
The human resource manager prepares a comprehensiv	re compensation report
that is provided to the Board of Directors. The r	eport is based on several
sources including the US government, nonprofit sal	ary surveys and local
resources. The report provides compensation level	s for different positions
including upper management and key staff. The Bo	pard approves compensation
amounts using this report and other performance me	easures.
Form 990, Part VI, Line 15b - Compensation Process	for Officers

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

The Organization makes the Form 990 available to the public via a PDF file

See explanation above.

upon request.

Schedule O Name of the	(Form 9	90 or 990-	EZ) (201	7)									Page 2
					_						1	ntification number	
Priso	n Er	ıtrepr	eneu:	rsnip	Pro	gram,					20-138	4253	
Form	990,	Part	XI,	Line	9 -	Other	Changes	in	Net	Assets	Explana	ation	
Book/	/tax	depre	ciat	ion d	liffe	rence					\$	11,567	
													
											Page 1	of 1	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

u Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

u Attach to Form 990. u Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury Internal Revenue Service Name of the organization

Part I

Inc.

Prison Entrepreneurship Program,

Employer identification number

OMB No. 1545-0047

Open to Public

Inspection

(f)

20-1384253

Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) Houston Caleb House LLC 4140 Directors Row Suite B 27-2573168 Houston TX 77092 Rental ΤX 227,843 777,084 PEP (2) (3) (4) (5) Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had Part II one or more related tax-exempt organizations during the tax year. (g) Section 512(b)(13) Legal domicile (state Public charity status Direct controlling Name, address, and EIN of related organization Primary activity Exempt Code section controlled entity? or foreign country) (if section 501(c)(3)) Yes No (1) (2) (3) (4) (5)

Schedule R (Form 990) 2017 Prison Entreprenet	irsnip Pro	gran	n, 20-1	384 <i>2</i> 53									Page 2
Part III Identification of Related Organization because it had one or more related or	ons Taxable	as a	Partnership.	Complete if the	e organization tax vear.	on answered "Yes	on F	orm 9	990, Pa	rt IV, line	34		-
Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of tota income	(g) al Share of end- year assets	p	(h) Dispro- portionate alloc.?	Code amoun of Sch	(i) V—UBI t in box 20 edule K-1 m 1065)	General manag partn	or Per ing ow er?	(k) rcentage nership
(1)		,,,		,			ľ	res No			res	NO	
(2)													
(3)													
(4)													
Part IV Identification of Related Organization of Rela	ons Taxable	as a	Corporation	or Trust. Com	plete if the	organization answ	/ered "	Yes"	on Forr	n 990, Pa	art I\	<u> </u>	
line 34 because it had one or more re	elated organiza	ations	s treated as a	corporation or	trust during	the tax year.		(g)		(h)			(i)
Name, address, and EIN of related organization	Primary activit	у	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	end	Share of		Percenta		512 cor	ection ?(b)(13) ntrolled ntity?
												Yes	No
1)Communitas Ventures, Inc. 4140 Directors Row Ste A Houston TX 77092 30-0778264	Cuppost		TX	NT / D		10.053			0 450	100.00			
2)	Support		17	N/A	С	18,953) 	•	0,430	100.00	1000	+	X
· · · · · · · · · · · · · · · · · · ·													
3)													
A													
4)													

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Not	: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No
	During the tax year, did the organization engage in any of the following transactions with one or more rela						
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		X
b	Gift, grant, or capital contribution to related organization(s)				1b		X
С	Sift, grant, or capital contribution from related organization(s)				1c		X
d	oans or loan guarantees to or for related organization(s)				1d		X
е	Loans or loan guarantees by related organization(s)				1e		x
f	Dividends from related organization(s)				1f		_X_
g	Sale of assets to related organization(s)				1g		X
h	Purchase of assets from related organization(s)				1h		X
i	exchange of assets with related organization(s)				1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		X
ı	Performance of services or membership or fundraising solicitations for related organization(s)				11		Х
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m		Х
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Х	
0	Sharing of paid employees with related organization(s)				10		Х
р	Reimbursement paid to related organization(s) for expenses				1p		Х
q	Reimbursement paid by related organization(s) for expenses				1q		Х
r	Other transfer of cash or property to related organization(s)				1r		Х
s	Other transfer of cash or property from related organization(s)				1s		Х
2	f the answer to any of the above is "Yes," see the instructions for information on who must complete this	line, including covered	relationships and transacti	on thresholds.			
	(a)	(b)	(c)	(d)			
	Name of related organization	Transaction type (a-s)	Amount involved	Method of determining amo	unt involv	ed	
		type (a=s)					
(1)	Communitas Ventures	n	18,460	Cost			
(2)							
(3)							
(4)							
(5)							
(6)							

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under	sec	partners tion c)(3)	(f) Share of total income	(g) Share of end-of-year assets	Disprop	h) ortionate itions?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana parti	ral or aging	(k) Percentage ownership
		country)	sections 512-514)	Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
]
(11)													
]

Schedule R (F	orm 990) 2017	Prison	Entrepre	neurship	Program,	20-1384253	Page 5
Part VII	Supplemei	ntal Informat	tion.			e R. See Instructions.	
• • • • • • • • • • • • • • • • • • • •							

Form **4562**

Department of the Treasury

Depreciation and Amortization

(Including Information on Listed Property)

u Attach to your tax return.

u Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172
2017

Internal Revenue Service

Name(s) shown on return

Prison Entrepreneurship Program,

Identifying number 20-1384253

20-1384253 Inc. Business or activity to which this form relates Indirect Depreciation Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 510,000 1 1 Maximum amount (see instructions) Total cost of section 179 property placed in service (see instructions) 2 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,030,000 3 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 4 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions ... (a) Description of property (b) Cost (business use only) Listed property. Enter the amount from line 29 7 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the **smaller** of line 5 or line 8 9 Carryover of disallowed deduction from line 13 of your 2016 Form 4562 10 11 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 Carryover of disallowed deduction to 2018. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Don't include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 during the tax year (see instructions) 49,763 Property subject to section 168(f)(1) election 15 15 Other depreciation (including ACRS) MACRS Depreciation (Don't include listed property.) (See instructions.) Section A 40,175 MACRS deductions for assets placed in service in tax years beginning before 2017 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2017 Tax Year Using the General Depreciation System (c) Basis for depreciation (h) Month and year (d) Recovery (business/investment use (a) Classification of property placed in (e) Convention (f) Method (a) Depreciation deduction period only-see instructions) 19a 3-year property 5,731 28,658 200DB 5.0 HY b 5-year property 7.0 5,411 200DB С 7-year property HY 10-year property 11,466 15.0 HY 150DB 574 e 15-year property 20-year property S/I 25-year property 25 yrs. S/L Residential rental 27.5 yrs. MM property MM S/L 27.5 yrs. NANANonresidential real 39 yrs. S/L property MM S/L Section C-Assets Placed in Service During 2017 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs. S/I S/L 40-year 40 yrs. NMMSummary (See instructions.) Listed property. Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter

here and on the appropriate lines of your return. Partnerships and S corporations—see instructions

For assets shown above and placed in service during the current year, enter the

110,550

23

PRIS4253 Prison Entrepreneurship Program,
20-1384253 Federal Asset Report Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	PerConv Meth	Prior Current
<u>5-year</u> 154 155 156	GDS Property: Chairs for Cleveland (room and lab) Camera equipment Computer for Laura	3/01/17 7/10/17 10/04/17	10,325 2,185 830	X X X	5,162 1,092 0	5 HY 200DB 5 HY 200DB 5 HY 200DB	0 6,195 0 1,311 0 830
157 158 159 160 161 162	Computer for Gami DJ computer for CLE Computer lab Computer for Marc 2015 Toyota Seinna, Red 2015 Toyota Sionna, White	10/04/17 10/26/17 10/03/17 10/19/17 7/12/17 8/05/17	830 600 750 672 19,409	X X X X X	0 0 0 9,704 9,719	5 HY 200DB 5 HY 200DB 5 HY 200DB 5 HY 200DB 5 HY 200DB 5 HY 200DB	0 830 0 600 0 750 0 672 0 11,646 0 11.664
163	2015 Toyota Sienna, White 1998 Honda Civic Sold/Scrapped: 3/10/17	3/10/17	19,439 1,000	X X	1,000	5 HY 200DB	0 0
167 168	Austin electronics Computer	5/31/17 10/31/17 _ =	5,962 540 62,542	XX	2,981 0 29,658	5 HY 200DB 5 HY 200DB	$\begin{array}{c} 0 & 3,577 \\ 0 & 540 \\ \hline 0 & 38,615 \end{array}$
7-year 169 170	GDS Property: Austin new furniture Refrigerator	5/31/17 7/31/17 _	9,915 909 10,824	XX	4,957 454 5,411	7 HY 200DB 7 HY 200DB	0 5,666 0 519 0 6,185
164	r GDS Property: Caleb Ac units	3/16/17	6,770	X	3,385	15 HY 150DB	0 3,554
165 166	Columbia bathroom remodel Caleb replace exterior wood	4/30/17 6/22/17 — =	14,582 1,580 22,932	X X	7,291 790 11,466	15 HY 150DB 15 HY 150DB	0 7,656 0 830 0 12,040
<u>Prior</u> 44	MACRS: Kit Lane	10/06/08	145,450		145,450		43,415 5,289
73 74 75 76	600 Used chairs Canon D5 Mark III camera Avayo VOIP Module 20 Desktop Dell Optiplex	6/01/13 6/07/13 8/01/13 12/20/13	3,698 3,300 2,076 5,540	X X X X	1,849 1,650 1,038 2,770	5 MQ200DB 3 MQ200DB 3 MQ200DB 3 MQ200DB	3,409 210 3,300 0 2,076 0 5,540 0
77 79 81 82	Electric lock and keypad CRV 11 Beds TV Stand and Dresser	12/27/13 10/01/13 8/01/14 8/01/14	2,830 13,861 10,488 540	X X X X	1,415 6,931 5,244 270	3 MQ200DB 5 MQ200DB 7 HY 200DB 7 HY 200DB	2,830 0 12,439 758 8,194 656 422 34
83 84 85 86	Dresser Cameras TV TV	8/01/14 8/01/14 8/01/14 8/01/14	1,899 1,657 778 740	X X X X	950 828 389 370	7 HY 200DB 5 HY 200DB 5 HY 200DB 5 HY 200DB	1,484 118 1,419 95 666 45 633 43
90 91 93 94 95	Washer and Dryer Washer and Dryer CU Desktop Dallas eSchool Furniture Microsoft Surface	8/01/14 12/01/14 1/01/14 9/01/14 11/24/14	3,252 3,798 1,710 3,233 1,620	X X X X X	1,626 1,899 855 1,616 810	7 HY 200DB 7 HY 200DB 3 HY 200DB 5 HY 200DB 3 HY 200DB	2,541 203 2,968 237 1,646 64 2,768 186 1,560 60
96 97 98 99	Dell E5440 CU Dividers CU Bookcases CU Server Dell	12/04/14 7/01/14 7/01/14 7/22/14	1,210 4,579 4,170 5,322	X X X X	605 2,290 2,085 2,661	5 HY 200DB 5 HY 200DB 5 HY 200DB 5 HY 200DB	1,036 69 3,919 264 3,570 240 4,556 306
103	EU Dell Server EU Computer 101 EU portable dividers EU furniture EU PA System	7/15/14 7/03/14 7/29/14 7/29/14 8/05/14	3,103 13,017 2,227 12,468 1,980	X X X X X	1,551 6,508 1,113 6,234 990	5 HY 200DB 5 HY 200DB 5 HY 200DB 7 HY 200DB 5 HY 200DB	2,656 179 11,143 749 1,906 129 9,741 779 1,695 114
104 105 106 107 108	EU PA System EU Armless Chairs Roof House remodel Furniture	8/03/14 11/18/14 9/22/15 9/01/15 9/01/15	1,980 6,202 10,725 74,982 7,266	X X X X X	3,101 5,362 37,491 3,633	5 HY 200DB 5 HY 200DB 15 HY 150DB 15 HY 150DB 7 HY 200DB	1,695 114 5,309 357 6,864 386 42,927 3,206 5,042 635
108 109 110 111 112 113	Remodel of suite C Remodel of suite B Dallas office painting Cubicles Portable dividers for gym	6/22/15 6/01/15 8/05/15 6/22/15 2/03/15	7,200 24,013 46,787 1,880 1,800 9,020	X X X X X X		15 HY 150DB 15 HY 150DB 15 HY 150DB	13,747 1,027 26,786 2,000 1,076 81 1,031 76 6,855 866

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20-1384253 FYE: 12/31/2017 Federal Asset Report Form 990, Page 1

Bus Sec Date Basis Cost In Service % 179 Bonus for Depr Asset Description Prior Current PerConv Meth 114 Steel Mobile bookcase 2/09/15 4,039 2,020 5 HY 200DB 3,069 388 2/10/15 5,768 2,884 5 HY 200DB 4,384 554 115 Portable PA system and upgrade 5 HY 200DB Epson Projector wall 2/10/15 821 410 624 79 5 117 2 Epson projectors 2/20/15 6.094 3.047 HY 200DB 4,631 585 5 4,204 HY 200DB 118 Ebooks and video 3/02/15 2,102 3,195 404 Set of Crime and Punishment books 5 HY 200DB 3/09/15 9,626 4.813 7.316 924 14 Delll MOniters and ADV Exch 5 HY 200DB 6,089 120 3/13/15 8,012 4,006 770 121 120 Entre Books 3/16/15 10,543 5,272 5 HY 200DB 8,012 1,013 5 HY 200DB 5 HY 200DB 122 Furniture of Estes Unit 2/28/15 4,062 2,031 3,087 390 PA System upgrade for Gym 123 5/01/15 2,118 1,059 1,610 203 5 5 HY 200DB 124 Monitor 5/18/15 82 41 62 8 5 HY 200DB 5 HY 200DB AV Upgrade 1,831 2,783 351 125 5/27/15 3,662 126 New Sound Mic & Speakers 6/13/15 2,176 1,088 1,654 209 18 Dell Optiplex 780 Core i5 Windows 5 HY 200DB 9,540 127 6/16/15 4,770 7,250 916 HY 200DB Black Grid stools and 2 DJ tables 1,763 1,340 128 6/19/15 882 169 5 7 129 Graduation gowns 7/31/15 3,369 1,684 HY 200DB 2,560 324 2,949 Stage and case 4,250 2,125 HY 200DB 130 8/06/15 371 5 HY 200DB 131 Projector board, tables podium 8/17/15 2,258 1,129 1,716 217 3,050 HY 200DB 132 Epson projector 8/20/15 1,525 2.318 293 HY 200DB 975 133 E School Tables 8/28/15 1,950 1,482 187 8,083 HY 200DB 134 2011 Honda CRV 2/06/15 16,165 5 5 5 5 5 12,285 1,552 HY 200DB 2013 Toyota Highlander 11/10/15 14,740 135 19,395 9,698 1,862 MQ200DB CASA House cameras 6/30/16 798 399 499 119 136 MQ200DB 137 500 Folding Chairs Estes 1/05/16 6,775 3,388 4,573 881 MQ200DB 1/22/16 2,525 138 Sound system Estes 5,049 3,408 656 1/23/16 650 325 MQ200DB 84 139 DJ Speakers with wheels 439 5 5 MQ200DB 140 Gig case with wheels 1/24/16 858 429 579 112 751 141 Table, base, cabinet Estes 2/05/16 1,502 MQ200DB 1,014 195 40 armless stacking chairs 5 142 2/05/16 3.101 1.551 MO200DB 2.093 403 5 4 Dell 21.5 Monitor & ADV Exch 1,497 MQ200DB 143 4/13/16 2,993 1,871 448 723 362 MQ200DB 144 Lap Top 4/27/16 5 5 5 452 108 MQ200DB 145 Computer video editing Estes 7/12/16 585 293 336 100 146 8/08/16 950 475 MQ200DB 546 Lap Top 162 5 7 MQ200DB 147 Computer Lab Cabinets & Lights 9/09/16 1.726 863 992 294 148 IKEA Cabinets for CLE 9/06/16 4,133 2,066 MQ200DB 2,288 527 5 9/09/16 1,127 MQ200DB 191 149 IKEA Cabinets for CLE 564 648 5 5 223 MQ200DB 150 IKEA Cabinets for CLE 9/12/16 111 128 38 151 9/13/16 1,102 551 MQ200DB 634 187 2,005 2,105 152 Tables and barstools 10/26/16 4,010 MO200DB 762 5 MQ200DB 153 19,361 9,681 3,678 Toyota Highlander 12/20/16 10,165 40,175 380,645 373,095 615,834 Other Depreciation: 10/06/08 40,000 40,000 0 -- Land 0 49 Land 2008 Honda Accord 8/19/11 16,153 16,153 4 MO S/L 16,153 0 Sold/Scrapped: 5/25/17 0 Desks and Chairs - CV 4/30/11 6,272 6,272 5 MO S/L 6,272 63 Avava - Phones add in 7/26/11 4.221 4.221 5 MO S/L 4.221 0 Xerox Phaser 5 MO S/L 8/01/11 1,874 1,874 1,874 0 68 Caleb House Land 1/01/09 29,913 29,913 0 Land 0 Caleb House Building 1/01/09 105.944 105,944 27 MO S/L 25,313 69 3,853 Foundation 3/02/12 9,330 9,330 15 MO S/L 3,006 622 87 Columbia Land 2/03/14 143,657 143,657 0 Land 0 27 MO S/L 19,950 8,550 Columbia Building 9/01/14 88 235,125 235,125 8/01/14 7,650 15 MO S/L 510 Kit Lane roof 7,650 1,233 **Total Other Depreciation** 600,139 600,139 78,022 13,535 **Total ACRS and Other Depreciation** 600,139 600,139 78,022 13,535 **Grand Totals** 1,312,271 1,027,319 451,117 110,550 Less: Dispositions and Transfers 17,153 17.153 16,153 0 Less: Start-up/Org Expense 0 0 0 0 **Net Grand Totals** 1,295,118 1,010,166 434,964 110,550

PRIS4253 Prison Entrepreneurship Program,
20-1384253 AMT Asset Report Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
5-year 154 155 156 157 158 159 160 161 162 163	Chairs for Cleveland (room and lab) Camera equipment Computer for Laura Computer for Gami DJ computer for CLE Computer lab Computer for Marc 2015 Toyota Seinna, Red 2015 Toyota Sienna, White 1998 Honda Civic Sold/Scrapped: 3/10/17	3/01/17 7/10/17 10/04/17 10/04/17 10/26/17 10/03/17 10/19/17 7/12/17 8/05/17 3/10/17	10,325 2,185 830 830 600 750 672 19,409 19,439 1,000	X X X X X X X X X X	5,162 1,092 0 0 0 0 0 9,704 9,719 1,000	5 HY 200DB 5 HY 200DB	0 0 0 0 0 0 0 0 0	6,195 1,311 830 830 600 750 672 11,646 11,664
167 168	Austin electronics Computer	5/31/17 10/31/17 _	5,962 540 62,542	X X	2,981 0 29,658	5 HY 200DB 5 HY 200DB	0 0	3,577 540 38,615
7-yea 169 170	r GDS Property: Austin new furniture Refrigerator	5/31/17 7/31/17 =	9,915 909 10,824	X X	4,957 454 5,411	7 HY 200DB 7 HY 200DB	0 0	5,666 519 6,185
15-ye 164 165 166	ar GDS Property: Caleb AC units Columbia bathroom remodel Caleb replace exterior wood	3/16/17 4/30/17 6/22/17	6,770 14,582 1,580 22,932	X X X	3,385 7,291 790 11,466	15 HY 150DB	0 0 0	3,554 7,656 830 12,040
Prior 70 73 74 75 76 77 79 81 82 83 84 85 86 88 89 90 91 93 94 95 96 97 98 99 100 101 102 103 104 105 106 107 108 109 110 111	MACRS: Foundation 600 Used chairs Canon D5 Mark III camera Avayo VOIP Module 20 Desktop Dell Optiplex Electric lock and keypad CRV 11 Beds TV Stand and Dresser Dresser Cameras TV Columbia Building Kit Lane roof Washer and Dryer Washer and Dryer Washer and Dryer CU Desktop Dallas eSchool Furniture Microsoft Surface Dell E5440 CU Dividers CU Bookcases CU Server Dell EU Dell Server EU Computer 101 EU portable dividers EU furniture EU PA System EU Armless Chairs Roof House remodel Furniture Remodel of suite C Remodel of suite C Remodel of suite B Dallas office painting	3/02/12 6/01/13 6/07/13 8/01/13 12/20/13 12/27/13 10/01/13 8/01/14 8/01/14 8/01/14 8/01/14 8/01/14 8/01/14 8/01/14 12/01/14 1/01/14 1/01/14 1/01/14 1/20/14 1/20/14 1/20/14 1/20/14 1/20/14 1/20/14 1/20/14 1/20/14 1/20/14 1/20/14 1/20/14 1/20/14 1/20/14 1/20/14 1/20/14 1/20/14 1/20/14 1/20/14 1/20/15 9/01/15 9/01/15 9/01/15 6/22/15 6/01/15 8/05/15	9,330 3,698 3,300 2,076 5,540 2,830 13,861 10,488 540 1,899 1,657 778 740 235,125 7,650 3,252 3,798 1,710 3,233 1,620 1,210 4,579 4,170 5,322 3,103 13,017 2,227 12,468 1,980 6,202 10,725 74,982 7,266 24,013 46,787 1,880	X X X X X X X X X X X X X X X X X X X	3,633	5 MQ 200DB 3 MQ 200DB 3 MQ 200DB 3 MQ 200DB 5 MQ 200DB 5 MQ 200DB 7 HY 200DB 7 HY 200DB 6 HY 200DB 5 HY 200DB 5 HY 200DB 6 HY 200DB 7 HY 200DB 7 HY 200DB 8 HY 200DB 9 HY 200DB	6,422 3,409 3,300 2,076 5,540 2,830 12,439 8,194 422 1,484 1,419 666 633 21,553 4,707 2,541 2,968 1,646 2,560 1,560 1,036 3,919 3,570 4,556 2,656 11,143 1,906 10,672 1,695 5,309 6,864 42,927 5,042 13,747 26,786 1,076	291 210 0 0 0 0 758 656 34 118 95 45 43 9,405 294 203 237 64 269 60 69 264 240 306 179 749 129 718 114 357 386 3,206 635 1,027 2,000 81

PRIS4253 Prison Entrepreneurship Program, 20-1384253 AMT Asset Report Form 990, Page 1

		Date		Bus Sec	Basis			
Asset	Description	In Service	Cost	<u>%</u> 179 Bonus	for Depr	PerConv Meth	Prior	Current
112	Cubicles	6/22/15 2/03/15	1,800	X X	900	15 HY 150DB	1,031	76 866
113 114	Portable dividers for gym Steel Mobile bookcase	2/03/13	9,020 4,039	X	4,510 2,020	5 HY 200DB 5 HY 200DB	6,855 3,069	866 388
	Portable PA system and upgrade	2/10/15	5,768	X	2,884	5 HY 200DB	4,384	554
116 117	Epson Projector wall 2 Epson projectors	2/10/15 2/20/15	821 6,094	X X	410 3,047	5 HY 200DB 5 HY 200DB	624 4,631	79 585
	Ebooks and video	3/02/15	4,204	X	2,102	5 HY 200DB	3,195	404
119	Set of Crime and Punishment books	3/09/15	9,626	X	4,813	5 HY 200DB	7,316	924
120 121	14 Delll MOniters and ADV Exch 120 Entre Books	3/13/15 3/16/15	8,012 10,543	X X	4,006 5,272	5 HY 200DB 5 HY 200DB	6,089 8,012	770 1,013
	Furniture of Estes Unit	2/28/15	4,062	X	2,031	5 HY 200DB	3,087	390
123	PA System upgrade for Gym	5/01/15	2,118	X	1,059	5 HY 200DB	1,610	203
124 125	Monitor AV Upgrade	5/18/15 5/27/15	82 3,662	X X	41 1,831	5 HY 200DB 5 HY 200DB	62 2,783	8 351
126	New Sound Mic & Speakers	6/13/15	2,176	X	1,088	5 HY 200DB	1,654	209
127	18 Dell Optiplex 780 Core i5 Windows	6/16/15	9,450	X	4,725	5 HY 200DB	7,182	907
128 129	Black Grid stools and 2 DJ tables Graduation gowns	6/19/15 7/31/15	1,763 3,369	X X	882 1,684	5 HY 200DB 5 HY 200DB	1,340 2,560	169 324
130	Stage and case	8/06/15	4,250	X	2,125	7 HY 200DB	2,949	371
131	Projector board, tables podium	8/17/15	2,258	X	1,129	5 HY 200DB	1,716	217
132 133	Epson projector E School Tables	8/20/15 8/28/15	3,050 1,950	X X	1,525 975	5 HY 200DB 5 HY 200DB	2,318 1,482	293 187
	2011 Honda CRV	2/06/15	16,165	X	8,083	5 HY 200DB	12,285	1,552
135	2013 Toyota Highlander	11/10/15	19,395	X	9,698	5 HY 200DB	14,740	1,862
136 137	CASA House cameras 500 Folding Chairs Estes	6/30/16 1/05/16	798 6,775	X X	399 3,388	5 MQ200DB5 MQ200DB	499 4,573	119 881
138	Sound system Estes	1/22/16	5,049	X	2,525	5 MQ200DB	3,408	656
139	DJ Speakers with wheels	1/23/16	650	X	325	5 MQ200DB	439	84
140 141	Gig case with wheels Table, base, cabinet Estes	1/24/16 2/05/16	858 1,502	X X	429 751	5 MQ200DB 5 MQ200DB	579 1,014	112 195
142	40 armless stacking chairs	2/05/16	3,101	X	1,551	5 MQ200DB	2,093	403
143	4 Dell 21.5 Monitor & ADV Exch	4/13/16	2,993	X	1,497	5 MQ200DB	1,871	448
144 145	Lap Top Computer video editing Estes	4/27/16 7/12/16	723 585	X X	362 293	5 MQ200DB 5 MQ200DB	452 336	108 100
146	Lap Top	8/08/16	950	X	475	5 MQ200DB	546	162
147	Computer Lab Cabinets & Lights	9/09/16	1,726	X	863	5 MQ200DB	992	294
148 149	IKEA Cabinets for CLE IKEA Cabinets for CLE	9/06/16 9/09/16	4,133 1,127	X X	2,066 564	7 MQ200DB 5 MQ200DB	2,288 648	527 191
150	IKEA Cabinets for CLE	9/12/16	223	X	111	5 MQ200DB	128	38
151	Dell Tables and barstools	9/13/16	1,102	X X	551	5 MQ200DB 5 MQ200DB	634 2,105	187
152 153	Toyota Highlander	10/26/16 12/20/16	4,010 19,361	X	2,005 9,681	5 MQ200DB	10,165	762 3,678
	,		722,399	,	478,765		363,017	44,889
			722,377	:	170,703		203,017	11,009
Other	Depreciation:							
44	Kit Lane	10/06/08	145,450		′ -	27 MO S/L	43,635	5,289
49 59	Land 2008 Honda Accord	10/06/08 8/19/11	0		0		0	0
39	Sold/Scrapped: 5/25/17	0/17/11	U		U	0 111	U	U
62	Desks and Chairs - CV	4/30/11	0		0	0 HY	0	0
63 64	Avaya - Phones add in Xerox Phaser	7/26/11 8/01/11	0		0	0 HY 0 HY	0	$\begin{array}{c} 0 \\ 0 \end{array}$
68	Caleb House Land	1/01/09	0		0	0 HY	0	0
69	Caleb House Building	1/01/09	0		0	0 HY	0	0
87	Columbia Land	2/03/14	0		0	0 HY	0	0
	Total Other Depreciation		145,450		145,450		43,635	5,289
	Total ACRS and Other Deprec	ciation	145,450	:	145,450		43,635	5,289
	Grand Totals		064 147		670,750		106 650	107.010
	Less: Dispositions and Transfe	rs	964,147 1,000		1,000		406,652 0	107,018 0
	Net Grand Totals		963,147		669,750		406,652	107,018
	THE STATE TOWNS		200,117	:	302,730			- 57,010

PRIS4253 Prison Entrepreneurship Program, 20-1384253 Bonus Depreciation Report

FYE: 12/31/2017

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
<u>Activit</u>	y: Form 990, Page 1							
73	600 Used chairs	6/01/13	3,698		0	0	1,849	1,849
74	Canon D5 Mark III camera	6/07/13	3,300		0	0	1,650	1,650
	Avayo VOIP Module 20 Desktop Dell Optiplex	8/01/13 12/20/13	2,076 5,540		$0 \\ 0$	$0 \\ 0$	1,038 2,770	1,038 2,770
77	Electric lock and keypad	12/27/13	2,830		0	0	1,415	1,415
79	CRV 11	10/01/13	13,861		0	0	6,930	6,931
	Beds	8/01/14	10,488		0	0	5,244	5,244
	TV Stand and Dresser Dresser	8/01/14 8/01/14	540 1,899		$0 \\ 0$	$0 \\ 0$	270 949	270 950
	Cameras	8/01/14	1,657		0	0	829	828
85	TV	8/01/14	778		0	0	389	389
	TV	8/01/14	740		0	0	370	370
	Washer and Dryer Washer and Dryer	8/01/14 12/01/14	3,252 3,798		$0 \\ 0$	$0 \\ 0$	1,626 1,899	1,626 1,899
	CU Desktop	1/01/14	1,710		0	0	855	855
94	Dallas eSchool Furniture	9/01/14	3,233		0	0	1,617	1,616
	Microsoft Surface	11/24/14	1,620		0	0	810	810
	Dell E5440 CU Dividers	12/04/14 7/01/14	1,210 4,579		$0 \\ 0$	$0 \\ 0$	605 2,289	605 2,290
	CU Bookcases	7/01/14	4,170		0	0	2,085	2,085
	CU Server Dell	7/22/14	5,322		0	0	2,661	2,661
	EU Dell Server	7/15/14	3,103		0	0	1,552	1,551
101 102	EU Computer 101 EU portable dividers	7/03/14 7/29/14	13,017 2,227		0	$0 \\ 0$	6,509 1,114	6,508 1,113
	EU furniture	7/29/14	12,468		0	0	6,234	6,234
	EU PA System	8/05/14	1,980		0	0	990	990
	EU Armless Chairs	11/18/14	6,202		0	0	3,101	3,101
	Roof House remodel	9/22/15 9/01/15	10,725 74,982		$0 \\ 0$	$0 \\ 0$	5,363 37,491	5,362 37,491
	Furniture	9/01/15	7,266		0	0	3,633	3,633
109	Remodel of suite C	6/22/15	24,013		0	0	12,006	12,007
	Remodel of suite B	6/01/15	46,787		0	0	23,394	23,393
	Dallas office painting Cubicles	8/05/15 6/22/15	1,880 1,800		$0 \\ 0$	$0 \\ 0$	940 900	940 900
	Portable dividers for gym	2/03/15	9,020		0	0	4,510	4,510
114	Steel Mobile bookcase	2/09/15	4,039		0	0	2,019	2,020
	Portable PA system and upgrade	2/10/15	5,768		0	0	2,884	2,884
116 117	Epson Projector wall 2 Epson projectors	2/10/15 2/20/15	821 6,094		$0 \\ 0$	$0 \\ 0$	411 3,047	410 3,047
	Ebooks and video	3/02/15	4,204		0	0	2,102	2,102
119	Set of Crime and Punishment books	3/09/15	9,626		0	0	4,813	4,813
	14 Delll MOniters and ADV Exch	3/13/15	8,012		0	0	4,006	4,006
	120 Entre Books Furniture of Estes Unit	3/16/15 2/28/15	10,543 4,062		0	0	5,271 2,031	5,272 2,031
123	PA System upgrade for Gym	5/01/15	2,118		0	ő	1,059	1,059
124	Monitor	5/18/15	82		0	0	41	41
	AV Upgrade	5/27/15	3,662		0	0	1,831	1,831
	New Sound Mic & Speakers 18 Dell Optiplex 780 Core i5 Windows	6/13/15 6/16/15	2,176 9,540		$0 \\ 0$	$0 \\ 0$	1,088 4,770	1,088 4,770
	Black Grid stools and 2 DJ tables	6/19/15	1,763		ő	ő	881	882
	Graduation gowns	7/31/15	3,369		0	0	1,685	1,684
	Stage and case	8/06/15	4,250		0	0	2,125	2,125
	Projector board, tables podium Epson projector	8/17/15 8/20/15	2,258 3,050		$0 \\ 0$	$0 \\ 0$	1,129 1,525	1,129 1,525
	E School Tables	8/28/15	1,950		ő	ő	975	975
134	2011 Honda CRV	2/06/15	16,165		0	0	8,082	8,083
	2013 Toyota Highlander	11/10/15	19,395	100	0	0	9,697	9,698
	CASA House cameras 500 Folding Chairs Estes	6/30/16 1/05/16	798 6,775		$0 \\ 0$	$0 \\ 0$	399 3,387	399 3,388
	Sound system Estes	1/22/16	5,049		0	0	2,524	2,525
139	DJ Speakers with wheels	1/23/16	650		0	0	325	325
	Gig case with wheels	1/24/16	858		0	0	429	429
	Table, base, cabinet Estes 40 armless stacking chairs	2/05/16 2/05/16	1,502 3,101		0	$0 \\ 0$	751 1,550	751 1,551
	4 Dell 21.5 Monitor & ADV Exch	4/13/16	2,993		0	0	1,496	1,331 1,497
144	Lap Top	4/27/16	723		0	0	361	362
	Computer video editing Estes	7/12/16	585		0	0	292	293
	Lap Top Computer Lab Cabinets & Lights	8/08/16 9/09/16	950 1,726		$0 \\ 0$	$0 \\ 0$	475 863	475 863
14/	Computer Luo Cuometo & Ligitto	2/02/10	1,720		U	J	603	603

PRIS4253 Prison Entrepreneurship Program, 20-1384253 Bonus Depreciation Report

FYE: 12/31/2017

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
<u>Activi</u>	ty: Form 990, Page 1 (continued)							
149 150	IKEA Cabinets for CLE IKEA Cabinets for CLE IKEA Cabinets for CLE	9/06/16 9/09/16 9/12/16	4,133 1,127 223		0 0 0	0 0 0	2,067 563 112	2,066 564 111
151 152 153 154	Dell Tables and barstools Toyota Highlander Chairs for Cleveland (room and lab)	9/13/16 10/26/16 12/20/16 3/01/17	1,102 4,010 19,361 10,325		0 0 0 0	0 0 0 5,163	551 2,005 9,680 0	551 2,005 9,681 5,162
155 156 157 158	Computer for Laura Computer for Gami	7/10/17 10/04/17 10/04/17 10/26/17	2,185 830 830 600		0 0 0	1,093 830 830 600	0 0 0	1,092 0 0
158 159 160 161	DJ computer for CLE Computer lab Computer for Marc 2015 Toyota Seinna, Red	10/26/17 10/03/17 10/19/17 7/12/17	750 672 19,409		0 0 0	750 672 9,705	0 0 0	0 0 0 9,704
162 163 164 165	2015 Toyota Sienna, White 1998 Honda Civic Caleb AC units Columbia bathroom remodel	8/05/17 3/10/17 3/16/17 4/30/17	19,439 1,000 6,770		0 0 0	9,720 0 3,385	0 0 0	9,719 1,000 3,385
163 166 167 168	Caleb replace exterior wood Austin electronics Computer	6/22/17 5/31/17 10/31/17	14,582 1,580 5,962 540		0 0 0	7,291 790 2,981 540	0 0 0	7,291 790 2,981 0
169 170	Austin new furniture Refrigerator	5/31/17 7/31/17	9,915 909		0	4,958 455	0 0	4,957 454
	*Less: Dispositions and	00, Page 1 Transfers	566,682 1,000		0	49,763 0	235,189 0	281,730 1,000
	Net Form 99	90, Page 1	565,682		0	49,763	235,189	280,730
	Gr Less: Dispositions and	and Total Transfers	566,682 1,000		0 0	49,763 0	235,189 0	281,730 1,000
	Net Gr	and Total	565,682		0	49,763	235,189	280,730

PRIS4253 Prison Entrepreneurship Program, 20-1384253 Depreciation Adjustment Report

All Business Activities

<u>Form</u>	<u>Unit</u>	Asset	Description	Tax	AMT	AMT Adjustments/ Preferences
MACR	S Adj	ustments:				
Page 1	S Adj 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	## 105	Kit Lane 600 Used chairs Canon D5 Mark III camera Avayo VOIP Module 20 Desktop Dell Optiplex Electric lock and keypad CRV 11 Beds TV Stand and Dresser Dresser Cameras TV TV Washer and Dryer Washer and Dryer CU Desktop Dallas eSchool Furniture Microsoft Surface Dell E5440 CU Dividers CU Bookcases CU Server Dell EU Dell Server EU Computer 101 EU portable dividers EU furniture EU PA System EU Armless Chairs Roof House remodel Furniture Remodel of suite C Remodel of suite B Dallas office painting Cubicles Portable dividers for gym Steel Mobile bookcase Portable dividers for gym Steel Mobile bookcase Portable PA system and upgrade Epson Projector wall 2 Epson projectors Ebooks and video Set of Crime and Punishment books 14 Delll MOniters and ADV Exch 120 Entre Books Furniture of Estes Unit PA System upgrade for Gym Monitor AV Upgrade	5,289 210 0 0 0 0 758 656 34 118 95 45 43 203 237 64 186 60 69 264 240 306 179 749 129 779 114 357 386 3,206 635 1,027 2,000 81 76 866 388 554 79 585 404 924 770 1,013 390 203 8	5,289 210 0 0 0 0 758 656 34 118 95 45 43 203 237 64 269 60 69 264 240 306 179 749 129 718 114 357 386 3,206 635 1,027 2,000 81 76 866 388 554 79 585 404 924 770 1,013 390 203 8 351	Adjustments/ Preferences 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Page 1		125 126 127 128 129 130 131 132 133 134 135 136 137 138 139 140 141 142 143	New Sound Mic & Speakers 18 Dell Optiplex 780 Core i5 Windows Black Grid stools and 2 DJ tables Graduation gowns Stage and case Projector board, tables podium Epson projector E School Tables 2011 Honda CRV 2013 Toyota Highlander CASA House cameras 500 Folding Chairs Estes Sound system Estes DJ Speakers with wheels Gig case with wheels Gig case with wheels Table, base, cabinet Estes 40 armless stacking chairs 4 Dell 21.5 Monitor & ADV Exch	351 209 916 169 324 371 217 293 187 1,552 1,862 119 881 656 84 112 195 403 448	351 209 907 169 324 371 217 293 187 1,552 1,862 119 881 656 84 112 195 403 448	0 0 9 0 0 0 0 0 0 0 0 0 0 0 0 0

PRIS4253 Prison Entrepreneurship Program, 20-1384253 Depreciation Adjustment Report All Business Activities

Form	Unit	Asset	Description	Tax	AMT	AMT Adjustments/ Preferences
Page 1	1	144	Lap Top	108	108	0
Page 1	1	145	Computer video editing Estes	100	100	0
Page 1	ī	146	Lap Top	162	162	0
Page 1	1	147	Computer Lab Cabinets & Lights	294	294	0
Page 1	1	148	IKEA Cabinets for CLE	527	527	0
Page 1	1	149	IKEA Cabinets for CLE	191	191	0
Page 1	1	150	IKEA Cabinets for CLE	38	38	0
Page 1	1	151	Dell	187	187	0
Page 1	1	152	Tables and barstools	762	762	0
Page 1	1	153	Toyota Highlander	3,678	3,678	0
Page 1	1	154	Chairs for Cleveland (room and lab)	6,195	6,195	0
Page 1	1	155	Camera equipment	1,311	1,311	0
Page 1	1	156	Computer for Laura	830	830	0
Page 1	1	157	Computer for Gami	830	830	0
Page 1	1	158	DJ computer for CLE	600	600	0
Page 1	1	159	Computer lab	750	750	0
Page 1	1	160	Computer for Marc	672	672	0
Page 1	1	161	2015 Toyota Seinna, Red	11,646	11,646	0
Page 1	1	162	2015 Toyota Sienna, White	11,664	11,664	0
Page 1	1	163	1998 Honda Civic	0	0	0
Page 1	1	164	Caleb AC units	3,554	3,554	0
Page 1	1	165	Columbia bathroom remodel	7,656	7,656	0
Page 1	1	166	Caleb replace exterior wood	830	830	0
Page 1	1	167	Austin electronics	3,577	3,577	0
Page 1	1	168	Computer	540	540	0
Page 1	1	169	Austin new furniture	5,666	5,666	0
Page 1	1	170	Refrigerator	519	519	0
				97,015	97,028	-13

PRIS4253 Prison Entrepreneurship Program,
20-1384253 Future Depreciation Report FYE: 12/31/18

Form 990, Page 1 FYE: 12/31/2017

Agggt	Docarintian	Date In	Coct	Tox	ANAT	
<u>Asset</u>	Description	Service_	Cost	Tax	AMT	
Prior M	IACRS:					
44	Kit Lane	10/06/08	145,450	5,289	5,289	
73 74	600 Used chairs Canon D5 Mark III camera	6/01/13 6/07/13	3,698 3,300	79 0	79 0	
75	Avayo VOIP Module	8/01/13	2,076	ő	ő	
76	20 Desktop Dell Optiplex	12/20/13	5,540	0	0	
77 79	Electric lock and keypad	12/27/13	2,830	0	0	
81	CRV 11 Beds	10/01/13 8/01/14	13,861 10,488	664 468	664 468	
82	TV Stand and Dresser	8/01/14	540	24	24	
83	Dresser	8/01/14	1,899	85	85	
84	Cameras	8/01/14	1,657	96 45	96 45	
85 86	TV TV	8/01/14 8/01/14	778 740	45 43	45 43	
90	Washer and Dryer	8/01/14	3,252	145	145	
91	Washer and Dryer	12/01/14	3,798	169	169	
93	CU Desktop	1/01/14	1,710	0	0	
94 95	Dallas eSchool Furniture Microsoft Surface	9/01/14 11/24/14	3,233 1,620	186 0	270 0	
96	Dell E5440	12/04/14	1,210	70	70	
97	CU Dividers	7/01/14	4,579	264	264	
98 99	CU Bookcases	7/01/14	4,170 5,222	240 307	240 307	
100	CU Server Dell EU Dell Server	7/22/14 7/15/14	5,322 3,103	307 179	307 179	
101	EU Computer 101	7/03/14	13,017	750	750	
102	EU portable dividers	7/29/14	2,227	128	128	
103 104	EU furniture	7/29/14 8/05/14	12,468	557 114	719 114	
104	EU PA System EU Armless Chairs	11/18/14	1,980 6,202	357	357	
106	Roof	9/22/15	10,725	348	348	
107	House remodel	9/01/15	74,982	2,885	2,885	
108 109	Furniture Remodel of suite C	9/01/15 6/22/15	7,266 24,013	454 924	454 924	
110	Remodel of suite B	6/01/15	46,787	1,800	1,800	
111	Dallas office painting	8/05/15	1,880	72	72	
112	Cubicles	6/22/15	1,800	70 520	70 7 20	
113 114	Portable dividers for gym Steel Mobile bookcase	2/03/15 2/09/15	9,020 4,039	520 233	520 233	
114	Portable PA system and upgrade	2/10/15	5,768	332	332	
116	Epson Projector wall	2/10/15	821	47	47	
117	2 Epson projectors	2/20/15	6,094	351	351	
118 119	Ebooks and video Set of Crime and Punishment books	3/02/15 3/09/15	4,204 9,626	242 555	242 555	
120	14 Delll MOniters and ADV Exch	3/13/15	8,012	461	461	
121	120 Entre Books	3/16/15	10,543	607	607	
122	Furniture of Estes Unit	2/28/15	4,062	234	234	
123 124	PA System upgrade for Gym Monitor	5/01/15 5/18/15	2,118 82	122 5	122 5	
125	AV Upgrade	5/27/15	3,662	211	211	
126	New Sound Mic & Speakers	6/13/15	2,176	125	125	
127	18 Dell Optiplex 780 Core i5 Windows	6/16/15	9,540	550	545 102	
128 129	Black Grid stools and 2 DJ tables Graduation gowns	6/19/15 7/31/15	1,763 3,369	102 194	102 194	
130	Stage and case	8/06/15	4,250	266	266	
131	Projector board, tables podium	8/17/15	2,258	130	130	
132	Epson projector	8/20/15 8/28/15	3,050	175	175	
133 134	E School Tables 2011 Honda CRV	8/28/15 2/06/15	1,950 16,165	113 931	113 931	
135	2013 Toyota Highlander	11/10/15	19,395	1,117	1,117	
136	CASA House cameras	6/30/16	798	72	72	
137 138	500 Folding Chairs Estes	1/05/16	6,775 5,049	528 394	528 394	
138	Sound system Estes DJ Speakers with wheels	1/22/16 1/23/16	5,049 650	594 51	51	
140	Gig case with wheels	1/24/16	858	67	67	
141	Table, base, cabinet Estes	2/05/16	1,502	117	117	
142 143	40 armless stacking chairs 4 Dell 21.5 Monitor & ADV Exch	2/05/16 4/13/16	3,101	242 270	242 270	
143 144	Lap Top	4/13/16 4/27/16	2,993 723	65	65	
	·rr	., 2., 10	, 23	0.5	0.5	

PRIS4253 Prison Entrepreneurship Program, 20-1384253 Future Depreciation Report FYE: 12/31/18

Form 990, Page 1 FYE: 12/31/2017

		Date In			
Asset	Description	Service	Cost	Tax	AMT
145	Computer video editing Estes	7/12/16	585	59	59
146	Lap Top	8/08/16	950	97	97
147	Computer Lab Cabinets & Lights	9/09/16	1,726	176	176
148	IKEA Cabinets for CLE	9/06/16	4,133	377	377
149	IKEA Cabinets for CLE	9/09/16	1,127	115	115
150	IKEA Cabinets for CLE	9/12/16	223	23	23
151	Dell	9/13/16	1,102	112	112
152	Tables and barstools	10/26/16	4,010	457	457
153 154	Toyota Highlander	12/20/16 3/01/17	19,361	2,207	2,207
154	Chairs for Cleveland (room and lab) Camera equipment	7/10/17	10,325 2,185	1,652 350	1,652 350
156	Computer for Laura	10/04/17	830	0	0
157	Computer for Gami	10/04/17	830	0	0
158	DJ computer for CLE	10/26/17	600	ő	ő
159	Computer lab	10/03/17	750	0	0
160	Computer for Marc	10/19/17	672	0	0
161	2015 Toyota Seinna, Red	7/12/17	19,409	3,105	3,105
162	2015 Toyota Sienna, White	8/05/17	19,439	3,110	3,110
164	Caleb AC units	3/16/17	6,770	322	322
165	Columbia bathroom remodel	4/30/17	14,582	692	692
166	Caleb replace exterior wood	6/22/17	1,580	75	75
167 168	Austin electronics Computer	5/31/17 10/31/17	5,962 540	954 0	954 0
169	Austin new furniture	5/31/17	9.915	1,214	1,214
170	Refrigerator	7/31/17	909	112	112
170	Renigerator	7731717			
			711,132	41,450	41,691
Other 1	Depreciation:				
49	T J	10/07/09	40,000	0	0
62	Land Desks and Chairs - CV	10/06/08 4/30/11	40,000 6,272	$0 \\ 0$	0
63	Avaya - Phones add in	7/26/11	4.221	0	0
64	Xerox Phaser	8/01/11	1,874	ő	ŏ
68	Caleb House Land	1/01/09	29,913	0	0
69	Caleb House Building	1/01/09	105,944	3,852	0
70	Foundation	3/02/12	9,330	622	276
87	Columbia Land	2/03/14	143,657	0	0
88	Columbia Building	9/01/14	235,125	8,550	9,405
89	Kit Lane roof	8/01/14	7,650	510	265
	Total Other Depreciation		583,986	13,534	9,946
	Total ACRS and Other Depreciation		583,986	13,534	9,946
	Grand Totals		1,295,118	54,984	51,637

Name

33. Number of volunteers

Form 990 Two Year Comparison Report

2016 & 2017

For calendar year 2017, or tax year beginning

, ending

Taxpayer Identification Number

T	rison Entrepreneurship Program,			1.00	.puj c	Tachimodich Hamber
	inc.			20)-1	.384253
			2016	2017		Differences
	1. Contributions, gifts, grants	1.	2,717,337	2,257,1	85	-460,152
	2. Membership dues and assessments	2.				
	3. Government contributions and grants	3.				
n e	4. Program service revenue	4.	217,688	226,0	93	8,405
⊆	5. Investment income	5.	6,445	8,2	88	1,843
>	6. Proceeds from tax exempt bonds	6.				
R e	7. Net gain or (loss) from sale of assets other than inventory	7.	3,615	4,9	83	1,368
	8. Net income or (loss) from fundraising events	8.				
	9. Net income or (loss) from gaming	9.				
	10. Net gain or (loss) on sales of inventory	10.				
	11. Other revenue	11.	17,782	22,7	06	4,924
	12. Total revenue. Add lines 1 through 11	12.	2,962,867	2,519,2	55	-443,612
	13. Grants and similar amounts paid	13.				
	14. Benefits paid to or for members	14.				
S	15. Compensation of officers, directors, trustees, etc.	15.	453,268	499,9	98	46,730
S	16. Salaries, other compensation, and employee benefits	16.	1,016,693	1,057,5	69	40,876
e	17. Professional fundraising fees	17.				
σ	18. Other professional fees	18.	8,200	9,1	50	950
ш	19. Occupancy, rent, utilities, and maintenance	19.	254,245	357,2	62	103,017
	20. Depreciation and Depletion	20.	92,491	110,5	50	18,059
	21. Other expenses	21.	574,392	670,9	63	96,571
	22. Total expenses. Add lines 13 through 21	22.	2,399,289	2,705,4	92	306,203
	23. Excess or (Deficit). Subtract line 22 from line 12	23.	563 , 578	-186,2	37	-749,815
	24. Total exempt revenue	24.	2,962,867	2,519,2		-443,612
	25. Total unrelated revenue	25.				
io	26. Total excludable revenue	26.	245,530	262,0	70	16,540
nat	27. Total assets	27.	3,747,931	3,652,5	96	-95,335
ρ	28. Total liabilities	28.	590,089	669,4	24	79,335
=	29. Retained earnings	29.	3,157,842	2,983,1	72	-174,670
her	30. Number of voting members of governing body	30.	9	9		
ŏ	31. Number of independent voting members of governing body	31.	9	9		
	32. Number of employees	32.	36	34		

1005

33.

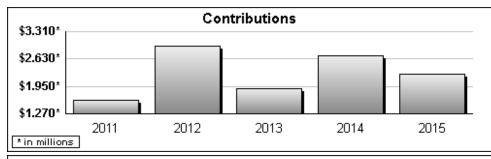
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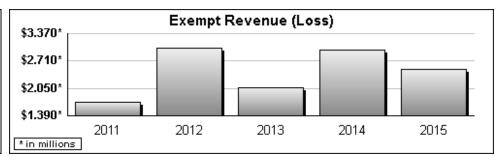
Form 990	Form 990 Tax Return History			
Name	Prison Entrepreneurship Program, Inc.	Employer Id	entification Number 84253	

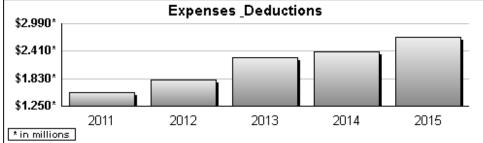
_	2013	2014	2015	2016	2017	2018
Contributions, gifts, grants	1,611,356	2,955,185	1,884,114	2,717,337	2,257,185	
Membership dues						
Program service revenue _	77,500	74,849	175,012	217,688	226,093	
Capital gain or loss	4,476	-13,098	480	3,615	4,983	
Investment income	441	391	1,133	6,445	8,288	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue	31,678	10,046	14,153	17,782	22,706	
Total revenue	1,725,451	3,027,373	2,074,892	2,962,867	2,519,255	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.	328,667	253,858	379,989	453,268	499,998	
Other compensation	604,839	823,711	885,987	1,016,693	1,057,569	
Professional fees	40,667	40,850	7,750	8,200	9,150	
Occupancy costs	101,517	79,827	208,939	254,245	357,262	
Depreciation and depletion	53,098	91,135	212,363	92,491	110,550	
Other expenses	418,002	522,315	584,445	574,392	670,963	
Total expenses	1,546,790	1,811,696	2,279,473	2,399,289	2,705,492	
Excess or (Deficit)	178,661	1,215,677	-204,581	563,578	-186,237	
_						
Total exempt revenue	1,725,451	3,027,373	2,074,892	2,962,867	2,519,255	
Total unrelated revenue						
Total excludable revenue	114,095	72,188	190,778	245,530	262,070	
Total Assets	1,624,932	3,254,930	3,186,137	3,747,931	3,652,596	
Total Liabilities	219,904	592,153	596,478	590,089	669,424	
Net Fund Balances	1,405,028	2,662,777	2,589,659	3,157,842	2,983,172	

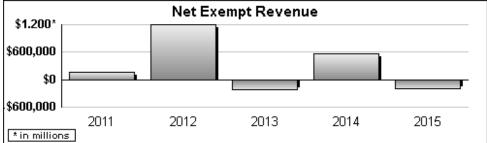
Form 990T	Tax Return History		2017
Name	Prison Entrepreneurship Program, Inc.	Employer Ide	entification Number 84253

	2013	2014	2015	2016	2017	2018
Business activity profit/loss						
Capital gains/losses						
Partner and S Corp gain/loss						
Rental income*						
Debt-financed income*						
Controlled organizations income/interest*						
nvestment income, specific organizations*						
Exploited exempt activity income*						
Other income						
otal trade or business income.						
Compensation of officers, ect.						
Other salaries and wages						
Repairs and maintenance						
Bad debts						
nterest						
axes and licenses						
Charitable contributions						
Depreciation and Depletion						
Deferred compensation plans						
Employee benefit programs			_			





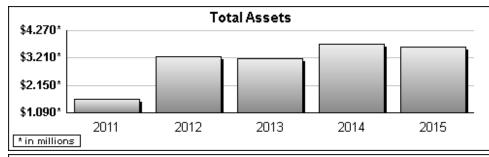


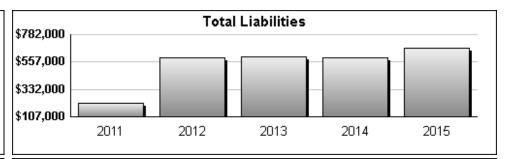


Form 990T	Tax Return History	2017
Name	Prison Entrepreneurship Program, Inc.	Employer Identification Number 20-1384253

	2013	2014	2015	2016	2017	2018
Other deductions						
Net operating loss deduction						
Specific deduction	1,000 -1,000					
ncome after expense and deductions	-1,000					
ncome tax (corporate or trust)						
Other taxes						
Total taxes						
General business credit						
Other credits						
Net tax after credits						
Estimated tax payments						
Other payments						
Balance due/Overpayment						

^{*} Income shown net of expenses









PRIS4253 Prison Entrepreneurship Program,
20-1384253 Frison Entrepreneurship Program,
Federal Statements FYE: 12/31/2017 **Taxable Interest on Investments** Description Unrelated Exclusion Postal Acquired after Business Code Code Code 6/30/75 US Obs (\$ or %) Amount 8,288 14 8,288 Total

PRIS4253 Prison Entrepreneurship Program,

20-1384253 EVE: 42/24/204 **Federal Statements**

FYE: 12/31/2017

Form 990, Part IX, Line 24e - All Other Expenses

Description	E	Total Expenses	 Program Service	agement & General	 Fund Raising
Educational Other expenses Participant events	\$	26,943 11,900 9,415	\$ 26,943 8,762 9,415	\$ 1,515	\$ 1,623
Total	\$	48,258	\$ 45,120	\$ 1,515	\$ 1,623

PRIS4253 Prison Entrepreneurship Program,

20-1384253 EVE: 43/24/2043

Federal Statements

FYE: 12/31/2017

Schedule A, Part II, Line 12 - Current year

Description	 Amount
Rental income-participants Other income	\$ 226,093 22,706
Total	\$ 248,799