

8002 05/14/2026 9:45 AM

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)

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2025

Open to Public Inspection

A For the 2025 calendar year, or tax year beginning, and ending

B Check if applicable:

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

PEOPLE PLACES INC

Doing business as PEOPLE PLACES, INCORPORATED

Number and street (or P.O. box if mail is not delivered to street address)1215 NORTH AUGUSTA STREET

Room/suite

City or town, state or province, country, and ZIP or foreign postal codeSTAUNTON VA 24401

D Employer identification number54-0959274

E Telephone number540-885-8841

F Name and address of principal officer:

LAURA FLINT

1215 N AUGUSTA ST

STAUNTON VA 24401

G Gross receipts\$9,561,275

H(a) Is this a group return for subordinates?

☐ Yes

☒ No

H(b) Are all subordinates included?

☐ Yes

☐ No

If "No," attach a list. See instructions.

H(c) Group exemption number

I Tax-exempt status:

☒ 501(c)(3)

☐ 501(c) () (insert no.)

☐ 4947(a)(1) or

☐ 527

J Website:WWW.PEOPLEPLACES.ORG

K Form of organization:

☒ Corporation

☐ Trust

☐ Association

☐ Other

L Year of formation:1973

M State of legal domicile:VA

Part I

Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:

OUR MISSION IS TO FOSTER RESILIENCE IN CHILDREN & FAMILIES SO THEY CAN THRIVE.

2 Check this box ☐ 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)36

4 Number of independent voting members of the governing body (Part VI, line 1b)46

5 Total number of individuals employed in calendar year 2025 (Part V, line 2a)575

6 Total number of volunteers (estimate if necessary)66

7a Total unrelated business revenue from Part VIII, column (C), line 127a0

7b Net unrelated business taxable income from Form 990-T, Part I, line 117b0

Revenue

8 Contributions and grants (Part VIII, line 1h)24,493

9 Program service revenue (Part VIII, line 2g)5,770,396

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)569,296

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)17,170

12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)6,364,1866,041,908

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)0

14 Benefits paid to or for members (Part IX, column (A), line 4)0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)3,782,7433,978,281

16a Professional fundraising fees (Part IX, column (A), line 11e)0

b Total fundraising expenses (Part IX, column (D), line 25)0

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)2,269,9332,220,714

18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)6,052,6766,198,995

19 Revenue less expenses. Subtract line 18 from line 12311,510-157,087

Net Assets or Fund Balances

20 Total assets (Part X, line 16)8,257,0338,107,998

21 Total liabilities (Part X, line 26)981,535980,928

22 Net assets or fund balances. Subtract line 21 from line 207,275,4987,127,070

Part II

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.

Sign Here

Signature of officer

LAURA FLINT

EXECUTIVE DIRECTOR

Date

Paid Preparer Use Only

Preparer's name

DUSTIN W DIDAWICK CPA

Preparer's signature

DUSTIN W DIDAWICK CPA

Date05/14/26

Check ☐ if self-employed

PTIN P01338204

Firm's name

DIDAWICK & COMPANY, P.C.

Firm's EIN54-1384711

Firm's address

P.O. BOX 2976

STAUNTON, VA 24402

Phone no.540-885-0855

May the IRS discuss this return with the preparer shown above? See instructions

☒ Yes

☐ No

For Paperwork Reduction Act Notice, see the separate instructions.
DAA

Form 990 (2025)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

**1** Briefly describe the organization's mission:**OUR MISSION IS TO FOSTER RESILIENCE IN CHILDREN & FAMILIES SO THEY CAN THRIVE.****2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code:) (Expenses \$ **3,645,245** including grants of \$) (Revenue \$ **5,027,815**)**FOSTER CARE AND CASE MANAGEMENT - PROVIDES A COMMUNITY BASED HOME-LIKE ATMOSPHERE FOR WARDS OF THE STATE, AS OPPOSED TO INSTITUTIONALIZING THOSE ENTRUSTED BY SOCIAL SERVICE AGENCIES AND COURT SYSTEMS FOR CARE AND TREATMENT.****4b** (Code:) (Expenses \$ **693,115** including grants of \$) (Revenue \$ **503,727**)**FAMILY SUPPORT SERVICE FAMILY MENTORING - COMMUNITY BASED SERVICE THAT PROVIDES SKILLED MENTORS TRAINED AND SUPERVISED IN THE TEACHING AND MODELING OF PRACTICAL PARENTING AND FAMILY MANAGEMENT SKILLS****4c** (Code:) (Expenses \$ including grants of \$) (Revenue \$)**N/A****4d** Other program services (Describe on Schedule O.)(Expenses \$ **71,941** including grants of \$) (Revenue \$ **16,398**)**4e** Total program service expenses **4,410,301**

Part 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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		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? <i>If "Yes," complete Schedule C, Part II</i>		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 Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		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? <i>If "Yes," complete Schedule D, Part I</i>		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? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>	X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
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)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	X	
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		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? <i>If "Yes," complete Schedule J</i>		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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	9	
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	75
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	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?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	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.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17	

Part VI 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 on 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**

	1a	6	1b	6	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 on Schedule O.						
b Enter the number of voting members included on line 1a, above, who are independent						
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
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?						X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?						X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?						X
6 Did the organization have members or stockholders?						X
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?						X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?						X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:						
a The governing body?					X	
b Each committee with authority to act on behalf of the governing body?					X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O						X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?		X
b 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?		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		X
b Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done		X
13 Did the organization have a written whistleblower policy?	X	
14 Did the organization have a written document retention and destruction policy?	X	
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?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization		X
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
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

17 List the states with which a copy of this Form 990 is required to be filed **NONE**

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, 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 ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on 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.

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

**LAURA FLINT
STAUNTON****1215 N AUGUSTA ST****VA 24401****540-885-8841**

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CHRISTINA BOSSERMAN	40.00									
REGIONAL DIRECTOR	0.00					X		128,593	0	0
(2) LAURA FLINT	40.00									
EXECUTIVE DIRECTOR	0.00			X				125,544	0	0
(3) HOLLY EDWARDS	40.00									
DIRECTOR OF HR	0.00					X		108,642	0	0
(4) DOUGLAS JOHNSON	40.00									
REGIONAL DIRECTOR	0.00					X		106,883	0	0
(5) CARMEN BOSCH	1.00									
SECRETARY	0.00	X						0	0	0
(6) LAURA DESPORTES	1.00									
CHAIR	0.00	X		X				0	0	0
(7) HANNA FOSTER	1.00									
DIRECTOR	0.00	X						0	0	0
(8) ELIZABETH HEDDLESTON	1.00									
DIRECTOR	0.00	X						0	0	0
(9) JEFFREY LOWN	1.00									
VICE CHAIR	0.00	X		X				0	0	0
(10) JANNEKE WOLKEN	1.00									
TREASURER	0.00	X		X				0	0	0
(11)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (*continued*)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
1b Subtotal								469,662		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								469,662		

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **4**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	22,870				
	g Noncash contributions included in lines 1a-1f	1g	\$ 7,042				
	h Total. Add lines 1a-1f			22,870			
	Program Service Revenue			Business Code			
2a GOVERNMENT FEE				5,547,940	5,547,940		
b							
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f				5,547,940			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			162,486			162,486
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
		6a					
		6b					
	b Less: rental expenses	6b					
	c Rental inc. or (loss)	6c					
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		7a	3,797,726	23,083			
		7b	3,516,137	3,230			
	b Less: cost or other basis and sales exps.	7b					
	c Gain or (loss)	7c	281,589	19,853			
	d Net gain or (loss)			301,442	301,442		
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a					
		8b					
b Less: direct expenses							
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities. See Part IV, line 19	9a						
	9b						
b Less: direct expenses							
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	10a						
	10b						
b Less: cost of goods sold							
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
	11a MISCELLANEOUS INCOME			7,170	7,170		
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			7,170			
12 Total revenue. See instructions			6,041,908	5,856,552	0	162,486	

Form 990 (2025)

PEOPLE PLACES INC**54-0959274**Page **10****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 ☐*Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.*

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,894,440	2,059,812	834,628	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	845,817	600,530	245,287	
10 Payroll taxes	238,024	168,997	69,027	
11 Fees for services (nonemployees):				
a Management				
b Legal	720		720	
c Accounting	14,500		14,500	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	18,850		18,850	
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	110,105	5,383	104,722	
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	210,865		210,865	
17 Travel	133,064	103,170	29,894	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	81,894		81,894	
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a FEES & CONTINGENT PAY	1,349,831	1,349,831		
b EQUIPMENT & SUPPLIES	107,099	10,839	96,260	
c STAFF/TP DEVELOPMENT	70,642	45,166	25,476	
d COMMUNICATION EXP.	39,184	17,082	22,102	
e All other expenses	83,960	49,491	34,469	
25 Total functional expenses. Add lines 1 through 24e	6,198,995	4,410,301	1,788,694	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	181,478	1	196,646
	2 Savings and temporary cash investments	1,219,505	2	870,789
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	1,017,753	4	798,655
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	112,598	9	258,622
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,892,061		
	b Less: accumulated depreciation	10b 921,524	10c	1,970,537
	11 Investments—publicly traded securities	1,932,557	11	3,337,679
	12 Investments—other securities. See Part IV, line 11	2,874,898	12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	918,244	15	675,070
16 Total assets. Add lines 1 through 15 (must equal line 33)	8,257,033	16	8,107,998	
Liabilities	17 Accounts payable and accrued expenses	618,795	17	618,188
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	362,740	25	362,740
	26 Total liabilities. Add lines 17 through 25	981,535	26	980,928
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	7,270,565	27	7,125,786
	28 Net assets with donor restrictions	4,933	28	1,284
	Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	7,275,498	32	7,127,070
33 Total liabilities and net assets/fund balances	8,257,033	33	8,107,998	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,041,908
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,198,995
3	Revenue less expenses. Subtract line 2 from line 1	3	-157,087
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	7,275,498
5	Net unrealized gains (losses) on investments	5	12,429
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-3,770
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	7,127,070

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____		X
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 on Schedule O and describe any steps taken to undergo such audits _____		

Name of the organization

PEOPLE PLACES INC

Employer identification number

54-0959274

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).)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9

☐

An agricultural research organization described in **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 university:
- 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).**
- 12

☐

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

☐

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

☐

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

☐

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

☐

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

☐

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

☐

Enter the number of supported organizations
- g

☐

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

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

Part II 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) **12****13 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐**Section C. Computation of Public Support Percentage****14** Public support percentage for 2025 (line 6, column (f), divided by line 11, column (f)) **14** %**15** Public support percentage from 2024 Schedule A, Part II, line 14 **15** %**16a 33 1/3% support test — 2025.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐**b 33 1/3% support test — 2024.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐**17a 10%-facts-and-circumstances test — 2025.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here**. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐**b 10%-facts-and-circumstances test — 2024.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here**. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐**18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	15,192	54,784	19,061	24,493	22,870	136,400
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	5,931,385	5,131,675	5,802,284	5,770,397	5,555,110	28,190,851
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	5,946,577	5,186,459	5,821,345	5,794,890	5,577,980	28,327,251
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						28,327,251

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(f) Total
9 Amounts from line 6	5,946,577	5,186,459	5,821,345	5,794,890	5,577,980	28,327,251
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	39,594	32,370	74,011	111,904	162,486	420,365
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	39,594	32,370	74,011	111,904	162,486	420,365
11 Net income from unrelated business activities not included on 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.)	5,986,171	5,218,829	5,895,356	5,906,794	5,740,466	28,747,616
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2025 (line 8, column (f), divided by line 13, column (f))	15	98.54 %
16 Public support percentage from 2024 Schedule A, Part III, line 15	16	98.96 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2025 (line 10c, column (f), divided by line 13, column (f))	17	1 %
18 Investment income percentage from 2024 Schedule A, Part III, line 17	18	1 %

- 19a 33 1/3% support tests — 2025.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☒
- b 33 1/3% support tests — 2024.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described on line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a ☐ The organization satisfied the Activities Test. Complete line 2 below.			
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c ☐ The organization supported a governmental supported organization. Describe in Part VI how you supported a governmental supported organization (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of its supported organization(s)? 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 each of its supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		Yes	No
2a			
b Did the activities described on line 2a, above, 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 lines 3a, 3b, and 3c below.			
a Are the organization and its supported organization(s) part of an integrated system (for example, a hospital system)? If "Yes," provide details in Part VI.			
3a			
b Did the organization direct the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
3b			
c Did the organization have the power to regularly appoint or elect (and remove) a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.			
3c			

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

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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

Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

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

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

Section D – Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	5
6	Total annual distributions. Add lines 1 through 5.	6
7	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	7
8	Distributable amount for 2025 from Section C, line 6	8
9	Line 7 amount divided by line 8 amount	9

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2025	(iii) Distributable Amount for 2025
1 Distributable amount for 2025 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2025 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2025			
a From 2020			
b From 2021			
c From 2022			
d From 2023			
e From 2024			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2025 distributable amount			
i Carryover from 2020 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2025 from Section D, line 6: \$			
a Applied to underdistributions of prior years			
b Applied to 2025 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2025, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2025. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2026. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2021			
b Excess from 2022			
c Excess from 2023			
d Excess from 2024			
e Excess from 2025			

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, 3b, and 3c; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5 and 7; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Name of the organization	Employer identification number
PEOPLE PLACES INC	54-0959274

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	☒ 501(c)(3) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	☐ 527 political organization
Form 990-PF	☐ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization
PEOPLE PLACES INC

Employer identification number
54-0959274

Part I

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 8,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
2		\$ 5,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
3	MARTHA GLASS 476 GREEN HILL LN CHURCHVILLE VA 24421	\$ 7,062	Person ☐ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions.)
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
			Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization

PEOPLE PLACES INC

Employer identification number

54-0959274

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

[illegible]

Name of the organization	Employer identification number
PEOPLE PLACES INC	54-0959274

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	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?	☐ Yes ☐ No
6	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?	☐ Yes ☐ No

Part II

Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	☐ Preservation of land for public use (for example, recreation or education)	☐ Preservation of a historically important land area
	☐ Protection of natural habitat	☐ Preservation of a certified historic structure
	☐ Preservation of open space	
2	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.	
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 on line 2a	2c
d	Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	\$
8	Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	☐ Yes ☐ No
9	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 FASB 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 FASB 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	\$
(ii)	Assets included in Form 990, Part X	\$
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 FASB ASC 958 relating to these items.	
a	Revenue included on Form 990, Part VIII, line 1	\$
b	Assets included in Form 990, Part X	\$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange program

e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table.

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V Endowment Funds

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment %

b Permanent endowment %

c Term endowment %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations?

(ii) Related organizations?

3a(i)

3a(ii)

3b

Yes

No

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		640,062		640,062
b Buildings		235,220	67,470	167,750
c Leasehold improvements				
d Equipment		36,848	33,423	3,425
e Other		1,979,931	820,631	1,159,300
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				1,970,537

Schedule D (Form 990) (Rev. 12-2024)

DAA

Part VII

Investments – Other Securities

Complete if the organization answered “Yes” on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, line 12, col. (B))		

Part VIII

Investments – Program Related

Complete if the organization answered “Yes” on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX

Other Assets

Complete if the organization answered “Yes” on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) ANNUITY CONTRACTS	333,586
(2) CLAIMS FUND	285,853
(3) UST FUND	55,631
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	675,070

Part X

Other Liabilities

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) HRA RETIREE LIABILITY	362,740
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	362,740

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ☐

Part XI	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return
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Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	6,295,244
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	272,165	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	272,165
3	Subtract line 2e from line 1		3	6,023,079
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	18,829	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	18,829
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	6,041,908

Part XII	Reconciliation of Expenses per Audited Financial Statements With Expenses per Return
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Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1 Total expenses and losses per audited financial statements			1	6,180,166
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a Donated services and use of facilities	2a			
b Prior year adjustments	2b			
c Other losses	2c			
d Other (Describe in Part XIII.)	2d			
e Add lines 2a through 2d			2e	
3 Subtract line 2e from line 1			3	6,180,166
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	18,829		
b Other (Describe in Part XIII.)	4b			
c Add lines 4a and 4b			4c	18,829
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	6,198,995

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE E

(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Schools

Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or
Form 990-EZ, Part VI, line 48.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization

PEOPLE PLACES INC

Employer identification number

54-0959274

Part I

	YES	NO
1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	X	
2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	X	
3 Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II. ALL EMPLOYMENT NOTICES, PUBLICATIONS OR OTHER NEWSPAPER ADS FOR TRAINING DO COMPLY.	X	
4 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	X	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	X	
d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. If you need more space, use Part II.	X	
5 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		X
b Admissions policies?		X
c Employment of faculty or administrative staff?		X
d Scholarships or other financial assistance?		X
e Educational policies?		X
f Use of facilities?		X
g Athletic programs?		X
h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.		X
6a Does the organization receive any financial aid or assistance from a governmental agency?		X
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" on either line 6a or line 6b, explain in Part II.		X
7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering racial nondiscrimination? If "No," explain in Part II.	X	

Part II

Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable.

Also provide any other additional information. See instructions.

SCHEDULE O
(Form 990)
(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization

PEOPLE PLACES INC

Employer identification number

54-0959274

FORM 990, PART I, LINE 6

VOLUNTEERS OF THE ORGANIZATION CONSIST SOLELY OF VOLUNTEER MEMBERS OF THE BOARD OF DIRECTORS.

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS

OTHER PROGRAMS PROVIDED INCLUDE THERAPEUTIC MENTORING, COUNSELING SERVICES FOR YOUTH AND FAMILIES, AND YOUTH THERAPEUTIC GROUPS.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
REVIEWED BY CHIEF OPERATING OFFICER PRIOR TO FILING

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
ALL SALARIES ARE SUBJECT TO BOARD REVIEW AND APPROVAL.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
AVAILABLE FOR INSPECTION AT BUSINESS ADDRESS.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION
BOOK/TAX DIFFERENCE

\$ -3,770

Part I Election To Expense Certain Property Under Section 179
Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	2,500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	4,000,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	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	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	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	
10	Carryover of disallowed deduction from line 13 of your 2024 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2026. Add lines 9 and 10, less line 12	13	

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	40,726

Part III MACRS Depreciation (Don't include listed property. See instructions.)
Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2025	17	38,910
18	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 2025 Tax Year Using the General Depreciation System

(a) Classification of property (see instructions)	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h 50-year property			50 yrs.	MM	S/L	
i Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
j Nonresidential real property	03/26/25	18,051	39 yrs.	MM	S/L	366
	VARIOUS	53,245	39.0	MM	S/L	1,134

Section C— Assets Placed in Service During 2025 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	
e 50-year			50 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	
22 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	22	81,136
23a For assets shown in Part III that are placed in service during the current tax year, and have costs capitalized under section 263A, enter the amount of the basis attributable to interest costs capitalized under section 263A(f)	23a	
b For assets shown in Part III that are placed in service during the current tax year, and have costs capitalized under section 263A, enter the amount of the basis attributable to costs capitalized under section 263A other than interest costs capitalized under section 263A(f)	23b	

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed?	☒ Yes	☐ No
b If "Yes," is the evidence written?	☐ Yes	☒ No
c Do you own, lease, or charter an aircraft? Check all that apply. See instructions	☐ Own	☐ Lease ☐ Charter

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions					25			

26 Property used more than 50% in a qualified business use:

2007 TOYOTA SIENNA CE VAN	05/15/07	100.00 %	23,198	23,198	5.0	200DBHY		
2015 HYUNDAI SONATA	11/08/18	100.00 %	15,500	15,500	5.0	200DBMQ		

27 Property used 50% or less in a qualified business use :

		%				S/L-		
		%				S/L-		

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21**29** Add amounts in column (i), line 26. Enter here and on line 7**Section B—Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (don't include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Part V **Listed Property** (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.) *(continued)*

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **aren't** more than 5% owners or related persons. See instructions.

37	Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No X
38	Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		X
39	Do you treat all use of vehicles by employees as personal use?		X
40	Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		X
41	Do you meet the requirements concerning qualified automobile demonstration use? See instructions		X
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.			

Part VI Amortization					
(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2025 tax year (see instructions):					
43 Amortization of costs that began before your 2025 tax year				43	
44 Total. Add amounts in column (f). See the instructions for where to report				44	

54-0959274

Federal Asset Report

FYE: 12/31/2025

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
<u>Non-Residential Real Property:</u>												
407	Foundation Repair	3/26/2025	18,051				18,051	39	MM	S/L	0	366
408	HVAC Installation	2/28/2025	33,206				33,206	39	MM	S/L	0	745
409	Gutter Installation	2/10/2025	14,389				14,389	39	MM	S/L	0	323
410	Steps Installation	7/15/2025	5,650				5,650	39	MM	S/L	0	66
			<u>71,296</u>				<u>71,296</u>				<u>0</u>	<u>1,500</u>
<u>Prior MACRS:</u>												
347	HVAC - CHARLOTTESVILLE	5/16/2012	7,613				7,613	39	MM	S/L	2,465	195
382	BOILER 1205 N AUGUSTA	10/18/2016	15,383			X	7,691	15	MQ	150DB	12,261	56
	Sold/Scrapped: 2/28/2025											
383	FOUNDERS ROOM	10/22/2016	6,093				6,093	39	MM	S/L	1,282	157
384	PARTITION WALL	11/04/2016	4,354				4,354	39	MM	S/L	907	112
385	SIDING 1002 E JEFFERSON	11/11/2016	28,558				28,558	39	MM	S/L	5,950	732
386	GUTTER GAURDS	11/07/2016	1,850				1,850	39	MM	S/L	385	48
389	ADA BATHROOM UPGRADE	11/09/2017	8,500				8,500	39	MM	S/L	1,553	218
390	ADA RAMP AND MARKINGS	12/27/2017	9,636			X	0	15	MQ	150DB	9,636	0
393	Land Improvements - Harrisonburg	9/30/2020	333,385				333,385	15	HY	150DB	125,588	20,779
394	SIGN - HARRISONBURG	9/30/2020	9,028				9,028	7	HY	200DB	7,014	805
395	3201 PEOPLES DR HARRISONBURG	9/30/2020	608,329				608,329	39	MM	S/L	66,942	15,598
401	1215 N. Augusta Improvements	10/02/2024	8,209				8,209	39	MM	S/L	44	210
			<u>1,040,938</u>				<u>1,023,610</u>				<u>234,027</u>	<u>38,910</u>
<u>Other Depreciation:</u>												
1	LAND	1/09/1987	48,310				48,310	0	--	Land	0	0
3	LAND 1205 N. AUGUSTA	8/30/1996	34,224				34,224	0	--	Land	0	0
4	BUILDING	1/09/1987	82,966				82,966	30	MO	S/L	82,966	0
5	IMPROVEMENTS	5/01/1987	18,748				18,748	30	MO	S/L	18,748	0
10	OFFICE IMPROVEMENTS	9/01/1993	5,327				5,327	30	MO	S/L	5,327	0
11	STORM WINDOWS	12/07/1994	6,341				6,341	39	MO	S/L	4,884	163
12	NEW STORM WINDOWS AND DOORS	8/21/1995	3,983				3,983	40	MO	S/L	2,921	100
13	BUILDING 1205 N AUGUSTA	8/30/1996	136,898				136,898	40	MO	S/L	96,969	3,423
14	IMPROVEMENTS TO 1205 N AUGUSTA	10/31/1996	12,426				12,426	40	MO	S/L	8,750	311
15	ROOF REPAIRS	11/18/1996	1,935				1,935	20	MO	S/L	1,935	0
16	PARKING LOT LIGHT	11/18/1996	217				217	10	MO	S/L	217	0
19	REWIRING DAHL HOUSE	3/15/2001	3,610				3,610	15	MO	S/L	3,610	0
20	WIRING AC UNITS	5/18/2001	1,507				1,507	15	MO	S/L	1,507	0
21	INSTALL AC IN DAHL HOUSE	7/23/2001	10,100				10,100	15	MO	S/L	10,100	0
22	INSTALL NEW CARPET	9/17/2001	10,106				10,106	10	MO	S/L	10,106	0
67	CEILING FANS	6/02/1987	352				352	5	MO	S/L	352	0
73	DRAPERIES	12/31/1987	1,866				1,866	10	MO	S/L	1,866	0
74	OAK DESK	3/07/1988	425				425	7	MO	S/L	425	0
138	FURNITURE 1205 N AUGUSTA	10/31/1996	6,566				6,566	7	MO	S/L	6,566	0
147	BOOKCASE	8/27/1997	356				356	7	MO	S/L	356	0
150	13 STORAGE FILES	3/03/1999	1,820				1,820	7	MO	S/L	1,820	0
151	FILING CABINET AND FOLDING CHAI	7/08/1999	970				970	7	MO	S/L	970	0
207	COMPUTER CAVLEING	1/04/2001	1,662				1,662	5	MO	S/L	1,662	0
213	DATA OUTLET	5/21/2001	424				424	5	MO	S/L	424	0
230	LAND - CHRLOTTESVILLE	4/28/1995	89,123				89,123	0	--	Land	0	0
231	BUILDING - CHARLOTTESVILLE	4/28/1995	152,129				152,129	40	MO	S/L	112,829	3,803
235	LAND - 922 E JEFFERSON ST CHARLO	4/01/2002	210,684				210,684	0	--	Land	0	0
236	BUILDING 922 E JEFFERSON	4/01/2002	56,681				56,681	39	MO	S/L	33,064	1,453
237	BUILDING IMPROVEMENTS 922 E JEF	4/01/2002	48,306				48,306	39	MO	S/L	28,179	1,238
238	ADDITIONAL COST OF REMODELING	4/01/2002	76,203				76,203	39	MO	S/L	44,452	1,954
239	PARKING LOT IMPROVEMENTS	9/07/2004	3,699				3,699	15	MO	S/L	3,699	0
244	OFFICE FURNITURE	3/20/1995	1,646				1,646	7	MO	S/L	1,646	0
245	OAK DESK	4/11/1995	540				540	7	MO	S/L	540	0
251	FILING CABINET, DESK & CHAIR	6/15/1995	221				221	7	MO	S/L	221	0
252	FILING CABINET, DESK & CHAIR	6/15/1995	285				285	7	MO	S/L	285	0
257	OFFICE FURNITURE	10/24/1996	350				350	7	MO	S/L	350	0
264	FURNITURE	6/14/2002	1,065				1,065	7	MO	S/L	1,065	0
274	NETWORK INSTALLATION	6/21/1999	1,589				1,589	5	MO	S/L	1,589	0
322	DESK - TINA	1/18/2007	353				353	7	MO	S/L	353	0
323	DESK - TINA	1/22/2007	437				437	7	MO	S/L	437	0
325	Office Furniture-Desk & Chair	1/23/2008	1,827				1,827	7	MO	S/L	1,827	0
327	2 Wood Desks	9/08/2008	1,390				1,390	7	MO	S/L	1,390	0

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
328	Gas logs	10/23/2008	421				421	7	MO S/L	421	0
329	Range	11/24/2008	510				510	10	MO S/L	510	0
333	Network equipment	3/17/2008	1,289				1,289	3	MO S/L	1,289	0
336	Land-Harrisonburg (Raw)	3/17/2008	227,524				227,524	0	-- Land	0	0
341	GUTTERING - 1205 BUILDING - STAUN	10/14/2010	3,680				3,680	15	MO S/L	3,496	20
	Sold/Scrapped: 2/10/2025										
342	SNOW GUARDS - BUILDING - STAUN	10/14/2010	1,532				1,532	15	MO S/L	1,455	77
348	CARPET	11/14/2012	2,058				2,058	15	MO S/L	1,670	137
353	VINYL FLOORING 1215 N AUGUSTA	5/10/2013	1,335				1,335	15	MO S/L	1,038	89
355	HVAC - C'VILLE-1002 E JEFFERSON	5/15/2013	8,803				8,803	39	MO S/L	2,633	226
359	BUILDING-1109 N AUGUSTA ST	1/01/2015	147,432				147,432	39	MO S/L	37,803	3,780
360	LAND-1107 N AUGUSTA STREET	6/26/2013	30,197				30,197	0	-- Land	0	0
362	BUILDING IMPROVEMENTS-1107 N AI	1/01/2015	77,650				77,650	39	MO S/L	19,910	1,991
368	HVAC - C'VILLE	6/13/2014	8,673				8,673	39	MO S/L	2,354	222
377	Air Conditioner Dahl House	4/22/2015	7,970				7,970	39	MO S/L	1,975	205
378	Replacement Windows	12/15/2015	11,754				11,754	39	MO S/L	2,738	301
388	2014 HYUNDAI SONATA	3/21/2017	14,000				14,000	3	MO S/L	14,000	0
	Sold/Scrapped: 1/02/2025										
392	2017 TOYOTA SIENNA	12/31/2019	24,264				24,264	5	MO S/L	24,264	0
	Sold/Scrapped: 8/25/2025										
396	SERVER (1014S-WTRT)	2/23/2022	6,450				6,450	5	MO S/L	3,655	1,290
397	SERVER (1014S-WTRT)	5/11/2022	7,200				7,200	5	MO S/L	3,840	1,440
398	AC INSTALLATION	10/31/2023	7,744				7,744	7	MO S/L	1,291	1,106
399	METAL ROOF	2/22/2023	59,400				59,400	40	MO S/L	2,723	1,485
400	2024 KIA CARNIVAL	5/30/2024	40,038				40,038	5	MO S/L	4,671	8,008
403	DRYWALL IMPR	12/23/2024	10,050				10,050	39	MO S/L	0	258
404	BATHROOM RENOVATIONS	7/01/2024	5,239				5,239	39	MO S/L	67	135
405	2022 Honda Odyssey	1/02/2025	33,950				33,950	5	MO S/L	0	6,790
406	2024 Nissan Kicks	10/17/2025	21,626				21,626	5	MO S/L	0	721
Total Other Depreciation			<u>1,798,456</u>				<u>1,798,456</u>			<u>626,210</u>	<u>40,726</u>
Total ACRS and Other Depreciation			<u>1,798,456</u>				<u>1,798,456</u>			<u>626,210</u>	<u>40,726</u>
Listed Property:											
365	2007 TOYOTA SIENNA CE VAN	5/15/2007	23,198				23,198	5	HY 200DB	23,198	0
391	2015 HYUNDAI SONATA	11/08/2018	15,500				15,500	5	MQ 200DB	15,500	0
			<u>38,698</u>				<u>38,698</u>			<u>38,698</u>	<u>0</u>
Grand Totals			2,949,388				2,932,060			898,935	81,136
Less: Dispositions and Transfers			57,327				49,635			54,021	76
Less: Start-up/Org Expense			0				0			0	0
Less: Domestic R & E Expense			0				0			0	0
Net Grand Totals			<u>2,892,061</u>				<u>2,882,425</u>			<u>844,914</u>	<u>81,060</u>

54-0959274

VA Asset Report

FYE: 12/31/2025

Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	VA Prior	VA Current	Federal Current	Difference Fed - VA
<u>Non-Residential Real Property:</u>								
407	Foundation Repair	3/26/2025	18,051	18,051	0	366	366	0
408	HVAC Installation	2/28/2025	33,206	33,206	0	745	745	0
409	Gutter Installation	2/10/2025	14,389	14,389	0	323	323	0
410	Steps Installation	7/15/2025	5,650	5,650	0	66	66	0
			<u>71,296</u>	<u>71,296</u>	<u>0</u>	<u>1,500</u>	<u>1,500</u>	<u>0</u>
<u>Prior MACRS:</u>								
347	HVAC - CHARLOTTESVILLE	5/16/2012	7,613	7,613	2,465	195	195	0
382	BOILER 1205 N AUGUSTA	10/18/2016	15,383	15,383	9,138	114	56	-58
	Sold/Scrapped: 2/28/2025							
383	FOUNDERS ROOM	10/22/2016	6,093	6,093	1,282	157	157	0
384	PARTITION WALL	11/04/2016	4,354	4,354	907	112	112	0
385	SIDING 1002 E JEFFERSON	11/11/2016	28,558	28,558	5,950	732	732	0
386	GUTTER GAURDS	11/07/2016	1,850	1,850	385	48	48	0
389	ADA BATHROOM UPGRADE	11/09/2017	8,500	8,500	1,553	218	218	0
390	ADA RAMP AND MARKINGS	12/27/2017	9,636	9,636	5,155	569	0	-569
393	Land Improvements - Harrisonburg	9/30/2020	333,385	333,385	125,588	20,779	20,779	0
394	SIGN - HARRISONBURG	9/30/2020	9,028	9,028	7,014	805	805	0
395	3201 PEOPLES DR HARRISONBURG	9/30/2020	608,329	608,329	66,942	15,598	15,598	0
401	1215 N. Augusta Improvements	10/02/2024	8,209	8,209	44	210	210	0
			<u>1,040,938</u>	<u>1,040,938</u>	<u>226,423</u>	<u>39,537</u>	<u>38,910</u>	<u>-627</u>
<u>Other Depreciation:</u>								
1	LAND	1/09/1987	48,310	48,310	0	0	0	0
3	LAND 1205 N. AUGUSTA	8/30/1996	34,224	34,224	0	0	0	0
4	BUILDING	1/09/1987	82,966	82,966	82,966	0	0	0
5	IMPROVEMENTS	5/01/1987	18,748	18,748	18,748	0	0	0
10	OFFICE IMPROVEMENTS	9/01/1993	5,327	5,327	5,327	0	0	0
11	STORM WINDOWS	12/07/1994	6,341	6,341	4,891	163	163	0
12	NEW STORM WINDOWS AND DOORS	8/21/1995	3,983	3,983	2,921	100	100	0
13	BUILDING 1205 N AUGUSTA	8/30/1996	136,898	136,898	96,969	3,423	3,423	0
14	IMPROVEMENTS TO 1205 N AUGUSTA	10/31/1996	12,426	12,426	8,750	311	311	0
15	ROOF REPAIRS	11/18/1996	1,935	1,935	1,935	0	0	0
16	PARKING LOT LIGHT	11/18/1996	217	217	217	0	0	0
19	REWIRING DAHL HOUSE	3/15/2001	3,610	3,610	3,610	0	0	0
20	WIRING AC UNITS	5/18/2001	1,507	1,507	1,507	0	0	0
21	INSTALL AC IN DAHL HOUSE	7/23/2001	10,100	10,100	10,100	0	0	0
22	INSTALL NEW CARPET	9/17/2001	10,106	10,106	10,106	0	0	0
67	CEILING FANS	6/02/1987	352	352	352	0	0	0
73	DRAPERIES	12/31/1987	1,866	1,866	1,866	0	0	0
74	OAK DESK	3/07/1988	425	425	425	0	0	0
138	FURNITURE 1205 N AUGUSTA	10/31/1996	6,566	6,566	6,566	0	0	0
147	BOOKCASE	8/27/1997	356	356	356	0	0	0
150	13 STORAGE FILES	3/03/1999	1,820	1,820	1,820	0	0	0
151	FILING CABINET AND FOLDING CHAI	7/08/1999	970	970	970	0	0	0
207	COMPUTER CAVLEING	1/04/2001	1,662	1,662	1,662	0	0	0
213	DATA OUTLET	5/21/2001	424	424	424	0	0	0
230	LAND - CHRLOTTESVILLE	4/28/1995	89,123	89,123	0	0	0	0
231	BUILDING - CHARLOTTESVILLE	4/28/1995	152,129	152,129	112,829	3,803	3,803	0
235	LAND - 922 E JEFFERSON ST CHARLO	4/01/2002	210,684	210,684	0	0	0	0
236	BUILDING 922 E JEFFERSON	4/01/2002	56,681	56,681	33,064	1,453	1,453	0
237	BUILDING IMPROVEMENTS 922 E JEF	4/01/2002	48,306	48,306	28,179	1,238	1,238	0
238	ADDITIONAL COST OF REMODELING	4/01/2002	76,203	76,203	44,452	1,954	1,954	0
239	PARKING LOT IMPROVEMENTS	9/07/2004	3,699	3,699	3,699	0	0	0
244	OFFICE FURNITURE	3/20/1995	1,646	1,646	1,646	0	0	0
245	OAK DESK	4/11/1995	540	540	540	0	0	0
251	FILING CABINET, DESK & CHAIR	6/15/1995	221	221	221	0	0	0
252	FILING CABINET, DESK & CHAIR	6/15/1995	285	285	285	0	0	0
257	OFFICE FURNITURE	10/24/1996	350	350	350	0	0	0
264	FURNITURE	6/14/2002	1,065	1,065	1,065	0	0	0
274	NETWORK INSTALLATION	6/21/1999	1,589	1,589	1,589	0	0	0
322	DESK - TINA	1/18/2007	353	353	353	0	0	0
323	DESK - TINA	1/22/2007	437	437	437	0	0	0
325	Office Furniture-Desk & Chair	1/23/2008	1,827	1,827	1,827	0	0	0
327	2 Wood Desks	9/08/2008	1,390	1,390	1,390	0	0	0

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VA Asset Report

FYE: 12/31/2025

Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	VA Prior	VA Current	Federal Current	Difference Fed - VA
328	Gas logs	10/23/2008	421	421	421	0	0	0
329	Range	11/24/2008	510	510	510	0	0	0
333	Network equipment	3/17/2008	1,289	1,289	1,289	0	0	0
336	Land-Harrisonburg (Raw)	3/17/2008	227,524	227,524	0	0	0	0
341	GUTTERING - 1205 BUILDING - STAUN	10/14/2010	3,680	3,680	3,496	20	20	0
	Sold/Scrapped: 2/10/2025							
342	SNOW GUARDS - BUILDING - STAUN	10/14/2010	1,532	1,532	1,455	77	77	0
348	CARPET	11/14/2012	2,058	2,058	1,670	137	137	0
353	VINYL FLOORING 1215 N AUGUSTA	5/10/2013	1,335	1,335	1,038	89	89	0
355	HVAC - C'VILLE-1002 E JEFFERSON	5/15/2013	8,803	8,803	2,633	226	226	0
359	BUILDING-1109 N AUGUSTA ST	1/01/2015	147,432	147,432	37,803	3,780	3,780	0
360	LAND-1107 N AUGUSTA STREET	6/26/2013	30,197	30,197	0	0	0	0
362	BUILDING IMPROVEMENTS-1107 N AI	1/01/2015	77,650	77,650	19,910	1,991	1,991	0
368	HVAC - C'VILLE	6/13/2014	8,673	8,673	2,354	222	222	0
377	Air Conditioner Dahl House	4/22/2015	7,970	7,970	1,975	205	205	0
378	Replacement Windows	12/15/2015	11,754	11,754	2,738	301	301	0
388	2014 HYUNDAI SONATA	3/21/2017	14,000	14,000	14,000	0	0	0
	Sold/Scrapped: 1/02/2025							
392	2017 TOYOTA SIENNA	12/31/2019	24,264	24,264	24,264	0	0	0
	Sold/Scrapped: 8/25/2025							
396	SERVER (1014S-WTRT)	2/23/2022	0	0	0	0	1,290	1,290
397	SERVER (1014S-WTRT)	5/11/2022	7,200	7,200	3,840	1,440	1,440	0
398	AC INSTALLATION	10/31/2023	7,744	7,744	1,291	1,106	1,106	0
399	METAL ROOF	2/22/2023	59,400	59,400	2,723	1,485	1,485	0
400	2024 KIA CARNIVAL	5/30/2024	40,038	40,038	4,671	8,008	8,008	0
403	DRYWALL IMPR	12/23/2024	10,050	10,050	0	258	258	0
404	BATHROOM RENOVATIONS	7/01/2024	5,239	5,239	67	135	135	0
405	2022 Honda Odyssey	1/02/2025	33,950	33,950	0	6,790	6,790	0
406	2024 Nissan Kicks	10/17/2025	21,626	21,626	0	721	721	0
Total Other Depreciation			<u>1,792,006</u>	<u>1,792,006</u>	<u>622,562</u>	<u>39,436</u>	<u>40,726</u>	<u>1,290</u>
Total ACRS and Other Depreciation			<u>1,792,006</u>	<u>1,792,006</u>	<u>622,562</u>	<u>39,436</u>	<u>40,726</u>	<u>1,290</u>
Listed Property:								
365	2007 TOYOTA SIENNA CE VAN	5/15/2007	23,198	23,198	23,198	0	0	0
391	2015 HYUNDAI SONATA	11/08/2018	15,500	15,500	15,500	0	0	0
			<u>38,698</u>	<u>38,698</u>	<u>38,698</u>	<u>0</u>	<u>0</u>	<u>0</u>
Grand Totals			2,942,938	2,942,938	887,683	80,473	81,136	663
Less: Dispositions			57,327	57,327	50,898	134	76	-58
Less: Start-up/Org Expense			0	0	0	0	0	0
Less: Domestic R & E Expense			0	0	0	0	0	0
Net Grand Totals			<u>2,885,611</u>	<u>2,885,611</u>	<u>836,785</u>	<u>80,339</u>	<u>81,060</u>	<u>721</u>

Bonus Depreciation Report**Form 990, Page 1**

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
382	BOILER 1205 N AUGUSTA	10/18/2016	15,383		0	0	7,692	7,691
390	ADA RAMP AND MARKINGS	12/27/2017	9,636		0	0	9,636	0
394	SIGN - HARRISONBURG	9/30/2020	9,028		0	0	0	9,028
Grand Total			34,047		0	0	17,328	16,719
Less: Dispositions and Transfers			15,383		0	0	7,692	7,691
Net Grand Total			18,664		0	0	9,636	9,028

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Depreciation Adjustment Report

All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT</u> <u>Adjustments/</u> <u>Preferences</u>
There are no assets that meet the criteria of this report						

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Future Depreciation Report**FYE: 12/31/2026**

FYE: 12/31/2025

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
Prior MACRS:					
347	HVAC - CHARLOTTESVILLE	5/16/2012	7,613	195	0
383	FOUNDERS ROOM	10/22/2016	6,093	156	0
384	PARTITION WALL	11/04/2016	4,354	111	0
385	SIDING 1002 E JEFFERSON	11/11/2016	28,558	732	0
386	GUTTER GAURDS	11/07/2016	1,850	47	0
389	ADA BATHROOM UPGRADE	11/09/2017	8,500	218	0
390	ADA RAMP AND MARKINGS	12/27/2017	9,636	0	0
393	Land Improvements - Harrisonburg	9/30/2020	333,385	19,686	0
394	SIGN - HARRISONBURG	9/30/2020	9,028	806	0
395	3201 PEOPLES DR HARRISONBURG	9/30/2020	608,329	15,599	0
401	1215 N. Augusta Improvements	10/02/2024	8,209	211	0
407	Foundation Repair	3/26/2025	18,051	463	0
408	HVAC Installation	2/28/2025	33,206	851	0
409	Gutter Installation	2/10/2025	14,389	369	0
410	Steps Installation	7/15/2025	5,650	145	0
			<u>1,096,851</u>	<u>39,589</u>	<u>0</u>

Other Depreciation:

1	LAND	1/09/1987	48,310	0	0
3	LAND 1205 N. AUGUSTA	8/30/1996	34,224	0	0
4	BUILDING	1/09/1987	82,966	0	0
5	IMPROVEMENTS	5/01/1987	18,748	0	0
10	OFFICE IMPROVEMENTS	9/01/1993	5,327	0	0
11	STORM WINDOWS	12/07/1994	6,341	163	0
12	NEW STORM WINDOWS AND DOORS	8/21/1995	3,983	99	0
13	BUILDING 1205 N AUGUSTA	8/30/1996	136,898	3,422	0
14	IMPROVEMENTS TO 1205 N AUGUSTA	10/31/1996	12,426	310	0
15	ROOF REPAIRS	11/18/1996	1,935	0	0
16	PARKING LOT LIGHT	11/18/1996	217	0	0
19	REWIRING DAHL HOUSE	3/15/2001	3,610	0	0
20	WIRING AC UNITS	5/18/2001	1,507	0	0
21	INSTALL AC IN DAHL HOUSE	7/23/2001	10,100	0	0
22	INSTALL NEW CARPET	9/17/2001	10,106	0	0
67	CEILING FANS	6/02/1987	352	0	0
73	DRAPERIES	12/31/1987	1,866	0	0
74	OAK DESK	3/07/1988	425	0	0
138	FURNITURE 1205 N AUGUSTA	10/31/1996	6,566	0	0
147	BOOKCASE	8/27/1997	356	0	0
150	13 STORAGE FILES	3/03/1999	1,820	0	0
151	FILING CABINET AND FOLDING CHAIRS	7/08/1999	970	0	0
207	COMPUTER CAVLEING	1/04/2001	1,662	0	0
213	DATA OUTLET	5/21/2001	424	0	0
230	LAND - CHRLOTTESVILLE	4/28/1995	89,123	0	0
231	BUILDING - CHARLOTTESVILLE	4/28/1995	152,129	3,803	0
235	LAND - 922 E JEFFERSON ST CHARLOTTE	4/01/2002	210,684	0	0
236	BUILDING 922 E JEFFERSON	4/01/2002	56,681	1,454	0
237	BUILDING IMPROVEMENTS 922 E JEFFERS	4/01/2002	48,306	1,239	0
238	ADDITIONAL COST OF REMODELING NEW	4/01/2002	76,203	1,954	0
239	PARKING LOT IMPROVEMENTS	9/07/2004	3,699	0	0
244	OFFICE FURNITURE	3/20/1995	1,646	0	0
245	OAK DESK	4/11/1995	540	0	0
251	FILING CABINET, DESK & CHAIR	6/15/1995	221	0	0
252	FILING CABINET, DESK & CHAIR	6/15/1995	285	0	0
257	OFFICE FURNITURE	10/24/1996	350	0	0
264	FURNITURE	6/14/2002	1,065	0	0
274	NETWORK INSTALLATION	6/21/1999	1,589	0	0
322	DESK - TINA	1/18/2007	353	0	0
323	DESK - TINA	1/22/2007	437	0	0
325	Office Furniture-Desk & Chair	1/23/2008	1,827	0	0
327	2 Wood Desks	9/08/2008	1,390	0	0
328	Gas logs	10/23/2008	421	0	0
329	Range	11/24/2008	510	0	0
333	Network equipment	3/17/2008	1,289	0	0
336	Land-Harrisonburg (Raw)	3/17/2008	227,524	0	0

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
342	SNOW GUARDS - BUILDING - STAUNTON	10/14/2010	1,532	0	0
348	CARPET	11/14/2012	2,058	137	0
353	VINYL FLOORING 1215 N AUGUSTA	5/10/2013	1,335	89	0
355	HVAC - C'VILLE-1002 E JEFFERSON	5/15/2013	8,803	226	0
359	BUILDING-1109 N AUGUSTA ST	1/01/2015	147,432	3,781	0
360	LAND-1107 N AUGUSTA STREET	6/26/2013	30,197	0	0
362	BUILDING IMPROVEMENTS-1107 N AUGUSTA	1/01/2015	77,650	1,991	0
368	HVAC - CVILLE	6/13/2014	8,673	222	0
377	Air Conditioner Dahl House	4/22/2015	7,970	204	0
378	Replacement Windows	12/15/2015	11,754	301	0
396	SERVER (1014S-WTRT)	2/23/2022	6,450	1,290	0
397	SERVER (1014S-WTRT)	5/11/2022	7,200	1,440	0
398	AC INSTALLATION	10/31/2023	7,744	1,106	0
399	METAL ROOF	2/22/2023	59,400	1,485	0
400	2024 KIA CARNIVAL	5/30/2024	40,038	8,007	0
403	DRYWALL IMPR	12/23/2024	10,050	257	0
404	BATHROOM RENOVATIONS	7/01/2024	5,239	134	0
405	2022 Honda Odyssey	1/02/2025	33,950	6,790	0
406	2024 Nissan Kicks	10/17/2025	21,626	4,325	0
Total Other Depreciation			<u>1,756,512</u>	<u>44,229</u>	<u>0</u>
Total ACRS and Other Depreciation			<u><u>1,756,512</u></u>	<u><u>44,229</u></u>	<u><u>0</u></u>
Listed Property:					
365	2007 TOYOTA SIENNA CE VAN	5/15/2007	23,198	0	0
391	2015 HYUNDAI SONATA	11/08/2018	15,500	0	0
			<u>38,698</u>	<u>0</u>	<u>0</u>
Grand Totals			<u><u>2,892,061</u></u>	<u><u>83,818</u></u>	<u><u>0</u></u>

54-0959274 **VA Future Depreciation Report** **FYE: 12/31/2026**

FYE: 12/31/2025

Form 990, Page 1

Asset	Description	Date In Service	Cost	VA
Prior MACRS:				
347	HVAC - CHARLOTTESVILLE	5/16/2012	7,613	195
383	FOUNDERS ROOM	10/22/2016	6,093	156
384	PARTITION WALL	11/04/2016	4,354	111
385	SIDING 1002 E JEFFERSON	11/11/2016	28,558	732
386	GUTTER GAURDS	11/07/2016	1,850	47
389	ADA BATHROOM UPGRADE	11/09/2017	8,500	218
390	ADA RAMP AND MARKINGS	12/27/2017	9,636	569
393	Land Improvements - Harrisonburg	9/30/2020	333,385	19,686
394	SIGN - HARRISONBURG	9/30/2020	9,028	806
395	3201 PEOPLES DR HARRISONBURG	9/30/2020	608,329	15,599
401	1215 N. Augusta Improvements	10/02/2024	8,209	211
407	Foundation Repair	3/26/2025	18,051	463
408	HVAC Installation	2/28/2025	33,206	851
409	Gutter Installation	2/10/2025	14,389	369
410	Steps Installation	7/15/2025	5,650	145
			<u>1,096,851</u>	<u>40,158</u>

Other Depreciation:

1	LAND	1/09/1987	48,310	0
3	LAND 1205 N. AUGUSTA	8/30/1996	34,224	0
4	BUILDING	1/09/1987	82,966	0
5	IMPROVEMENTS	5/01/1987	18,748	0
10	OFFICE IMPROVEMENTS	9/01/1993	5,327	0
11	STORM WINDOWS	12/07/1994	6,341	162
12	NEW STORM WINDOWS AND DOORS	8/21/1995	3,983	99
13	BUILDING 1205 N AUGUSTA	8/30/1996	136,898	3,422
14	IMPROVEMENTS TO 1205 N AUGUSTA	10/31/1996	12,426	310
15	ROOF REPAIRS	11/18/1996	1,935	0
16	PARKING LOT LIGHT	11/18/1996	217	0
19	REWIRING DAHL HOUSE	3/15/2001	3,610	0
20	WIRING AC UNITS	5/18/2001	1,507	0
21	INSTALL AC IN DAHL HOUSE	7/23/2001	10,100	0
22	INSTALL NEW CARPET	9/17/2001	10,106	0
67	CEILING FANS	6/02/1987	352	0
73	DRAPERIES	12/31/1987	1,866	0
74	OAK DESK	3/07/1988	425	0
138	FURNITURE 1205 N AUGUSTA	10/31/1996	6,566	0
147	BOOKCASE	8/27/1997	356	0
150	13 STORAGE FILES	3/03/1999	1,820	0
151	FILING CABINET AND FOLDING CHAIRS	7/08/1999	970	0
207	COMPUTER CAVLEING	1/04/2001	1,662	0
213	DATA OUTLET	5/21/2001	424	0
230	LAND - CHRLOTTESVILLE	4/28/1995	89,123	0
231	BUILDING - CHARLOTTESVILLE	4/28/1995	152,129	3,803
235	LAND - 922 E JEFFERSON ST CHARLOTTE	4/01/2002	210,684	0
236	BUILDING 922 E JEFFERSON	4/01/2002	56,681	1,454
237	BUILDING IMPROVEMENTS 922 E JEFFERS	4/01/2002	48,306	1,239
238	ADDITIONAL COST OF REMODELING NEW	4/01/2002	76,203	1,954
239	PARKING LOT IMPROVEMENTS	9/07/2004	3,699	0
244	OFFICE FURNITURE	3/20/1995	1,646	0
245	OAK DESK	4/11/1995	540	0
251	FILING CABINET, DESK & CHAIR	6/15/1995	221	0
252	FILING CABINET, DESK & CHAIR	6/15/1995	285	0
257	OFFICE FURNITURE	10/24/1996	350	0
264	FURNITURE	6/14/2002	1,065	0
274	NETWORK INSTALLATION	6/21/1999	1,589	0
322	DESK - TINA	1/18/2007	353	0
323	DESK - TINA	1/22/2007	437	0
325	Office Furniture-Desk & Chair	1/23/2008	1,827	0
327	2 Wood Desks	9/08/2008	1,390	0
328	Gas logs	10/23/2008	421	0
329	Range	11/24/2008	510	0
333	Network equipment	3/17/2008	1,289	0
336	Land-Harrisonburg (Raw)	3/17/2008	227,524	0

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>VA</u>
342	SNOW GUARDS - BUILDING - STAUNTON	10/14/2010	1,532	0
348	CARPET	11/14/2012	2,058	137
353	VINYL FLOORING 1215 N AUGUSTA	5/10/2013	1,335	89
355	HVAC - C'VILLE-1002 E JEFFERSON	5/15/2013	8,803	226
359	BUILDING-1109 N AUGUSTA ST	1/01/2015	147,432	3,781
360	LAND-1107 N AUGUSTA STREET	6/26/2013	30,197	0
362	BUILDING IMPROVEMENTS-1107 N AUGUS	1/01/2015	77,650	1,991
368	HVAC - CVILLE	6/13/2014	8,673	222
377	Air Conditioner Dahl House	4/22/2015	7,970	204
378	Replacement Windows	12/15/2015	11,754	301
396	SERVER (1014S-WTRT)	2/23/2022	0	0
397	SERVER (1014S-WTRT)	5/11/2022	7,200	1,440
398	AC INSTALLATION	10/31/2023	7,744	1,106
399	METAL ROOF	2/22/2023	59,400	1,485
400	2024 KIA CARNIVAL	5/30/2024	40,038	8,007
403	DRYWALL IMPR	12/23/2024	10,050	257
404	BATHROOM RENOVATIONS	7/01/2024	5,239	134
405	2022 Honda Odyssey	1/02/2025	33,950	6,790
406	2024 Nissan Kicks	10/17/2025	21,626	4,325
Total Other Depreciation			<u>1,750,062</u>	<u>42,938</u>
Total ACRS and Other Depreciation			<u><u>1,750,062</u></u>	<u><u>42,938</u></u>

Listed Property:

365	2007 TOYOTA SIENNA CE VAN	5/15/2007	23,198	0
391	2015 HYUNDAI SONATA	11/08/2018	15,500	0
			<u>38,698</u>	<u>0</u>
Grand Totals			<u><u>2,885,611</u></u>	<u><u>83,096</u></u>

Form 990 Two Year Comparison Report 2024 & 2025																																																																																																																																									
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PEOPLE PLACES INC Taxpayer Identification Number 54-0959274																																																																																																																																									
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Net income or (loss) from gaming				10. Net gain or (loss) on sales of inventory				11. Other revenue	1	7,170	7,169	12. Total revenue. Add lines 1 through 11	6,364,186	6,041,908	-322,278	13. Grants and similar amounts paid				14. Benefits paid to or for members				15. Compensation of officers, directors, trustees, etc.	121,890		-121,890	16. Salaries, other compensation, and employee benefits	3,660,853	3,978,281	317,428	17. Professional fundraising fees				18. Other professional fees	28,057	34,070	6,013	19. Occupancy, rent, utilities, and maintenance	192,248	210,865	18,617	20. Depreciation and Depletion	77,329	81,894	4,565	21. Other expenses	1,972,299	1,893,885	-78,414	22. Total expenses. Add lines 13 through 21	6,052,676	6,198,995	146,319	23. Excess or (Deficit). Subtract line 22 from line 12	311,510	-157,087	-468,597	24. Total exempt revenue	6,364,186	6,041,908	-322,278	25. Total unrelated revenue				26. Total excludable revenue	6,339,693	6,019,038	-320,655	27. 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Form 990	Tax Return History	2025
Name PEOPLE PLACES INC		Employer Identification Number 54-0959274

	2021	2022	2023	2024	2025	2026
Contributions, gifts, grants	15,192	54,784	19,061	24,493	22,870	
Membership dues						
Program service revenue	5,930,491	5,130,878	5,800,784	5,770,396	5,547,940	
Capital gain or loss	128,830	353,656	-139,193	457,392	301,442	
Investment income	39,594	32,370	74,011	111,904	162,486	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue	894	797	1,500	1	7,170	
Total revenue	6,115,001	5,572,485	5,756,163	6,364,186	6,041,908	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.	302,599	311,302	400,362	121,890		
Other compensation	3,383,121	3,431,408	3,710,669	3,660,853	3,978,281	
Professional fees	25,774	21,280	33,744	28,057	34,070	
Occupancy costs	196,862	235,128	228,555	192,248	210,865	
Depreciation and depletion	84,068	78,219	75,859	77,329	81,894	
Other expenses	1,925,005	1,656,711	1,857,748	1,972,299	1,893,885	
Total expenses	5,917,429	5,734,048	6,306,937	6,052,676	6,198,995	
Excess or (Deficit)	197,572	-161,563	-550,774	311,510	-157,087	
Total exempt revenue	6,115,001	5,572,485	5,756,163	6,364,186	6,041,908	
Total unrelated revenue						
Total excludable revenue	6,099,809	5,517,701	5,737,102	6,339,693	6,019,038	
Total Assets	8,658,654	8,295,874	8,015,041	8,257,033	8,107,998	
Total Liabilities	388,096	711,199	884,527	981,535	980,928	
Net Fund Balances	8,270,558	7,584,675	7,130,514	7,275,498	7,127,070	

Federal Statements

Taxable Interest on Investments

Description							
	Amount	Unrelated Business	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs (\$ or %)	
INTEREST	\$ 111,446		14				
TOTAL	\$ 111,446						

Taxable Dividends from Securities

Description							
	Amount	Unrelated Business	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs (\$ or %)	
DIVIDENDS	\$ 51,040		14				
TOTAL	\$ 51,040						

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

Description	Total Expenses	Program Service	Management & General	Fund Raising
BAD DEBT	\$ 30,473	\$ 30,473	\$	\$
SPECIFIC CLIENT ASSIST.	19,018	19,018		
AGENCY LICENSE	14,149		14,149	
BANK FEES	9,327		9,327	
OTHER EXPENSES	5,823		5,823	
DONATIONS	5,170		5,170	
TOTAL	\$ 83,960	\$ 49,491	\$ 34,469	\$ 0

Federal Statements**Schedule A, Part III, Line 1(e)**

Description	Amount
CONTRIBUTIONS	\$ 7,042
CONTRIBUTIONS	15,828
TOTAL	<u>\$ 22,870</u>

Schedule A, Part III, Line 2(e)

Description	Amount
GOVERNMENT FEE	\$ 5,547,940
MISCELLANEOUS INCOME	7,170
TOTAL	<u>\$ 5,555,110</u>

Schedule A, Part III, Line 10a(e)

Description	Amount
INTEREST	\$ 111,446
DIVIDENDS	51,040
TOTAL	<u>\$ 162,486</u>