

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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.

2018

Open to Public

	nai Revenue		► Go to www.irs.gov/Form990 for instructions and the latest	information.		Inspection			
A	For the 2	018 cale	ndar year, or tax year beginning January 1 , 2018, and endi	ng Dece	mber 31	, 20 18			
В	Check if an	plicable:	C Name of organization Philippi International, Inc.		D Employer identification numb				
	Address ch	•	Doing business as Public Charity			26-3464879			
$\overline{\Box}$	Name char	_	Number and street (or P O box if mail is not delivered to street address) Room/s	urte	E Telepho	ne number			
$\overline{\Box}$	Initial return	-	4532 New Road			330-261-1978			
$\overline{\Box}$	Final return/		City or town, state or province, country, and ZIP or foreign postal code						
\exists	Amended i		Youngstown, OH 44515		G Gross r	eceipts \$ 254,737.63			
Ξ			F Name and address of principal officer	H(a) is this a d	roup return for	subordinates? Yes No			
_	Application	, pondaig	Richard L. Williams, 4532 New Road, Youngstown OH 44515			s included? Yes No			
	Tax-exemp	nt etatue	☑ 501(c)(3) ☐ 501(c) () ◀ (Insert no) ☐ 4947(a)(1) or ☐ 527	 		a list. (see instructions)			
'	Website:		<u> </u>	H(c) Groun	exemption	number ►			
K	Form of org		Corporation ☐ Trust ☐ Association ☑ Other ▶ Public Charl L Year of form			of legal domicile OH			
_	art I	Summ							
			scribe the organization's mission or most significant activities: We fa	acilitate outre	ach minis	tries with the USA			
•			national churches that will grow and develop church leaders and meet the						
Activities & Governance			matterial charteres that this grow and develop charter leaders and most and						
Ē	2 0	heck th	is box ▶☐ if the organization discontinued its operations or disposed	of more that	1 25% of	its net assets.			
Š			of voting members of the governing body (Part VI, line 1a)		. 3	5			
2			of independent voting members of the governing body (Part VI, line 1b	o)	_	0			
S	1		nber of individuals employed in calendar year 2018 (Part V, line 2a)	,	5	3			
έ	4		nber of volunteers (estimate if necessary)		6	2			
টু			elated business revenue from Part VIII, column (C), line 12		7a	0			
~			ated business taxable income from Form 990-T, line 38		7b	0			
	U !	et unie		Prior Y		Current Year			
	8 0	Contribut	tions and grants (Part VIII, line 1h). RECEIVED	2	31,986.53	254,737.63			
Revenue			service revenue (Part VIII, line 2g) 0		0	0			
ě			nt income (Part VIII, column (A), Ines 3, 4/And 7d) 3.2 110	0					
æ	11 0	thar ra	renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0					
			enue —add lines 8 through 11 (must equat Part VIII, column (A), line 12)		31,986.53				
			nd similar amounts paid (Part IX, columb (A); lines (143) []	† 	51, 980.53 69,938.52				
			paid to or for members (Part IX, column (A), line 4)		09,936.32				
			other compensation, employee benefits (Part IX, column (A), lines 5–10)		79,420.86				
Expenses	1		anal fundraising fees (Part IX, column (A), line 11e)		0				
ě			draising expenses (Part IX, column (D), line 25) ▶						
X			penses (Part IX, column (A), lines 11a–11d, 11f–24e)	<u> </u>	01,901.05	66,994.25			
					51, <u>961.65</u> 51,260.43				
			penses. Add lines 13–17 (must equal Part IX, column (A), line 25)		19,273.90				
		revenue	less expenses. Subtract line 18 from line 12	Beginning of C					
Assets or Relances	20 1	otal acc	ets (Part X, line 16)		93,604.48				
25.5	20 T		els (Part X, line 26)		33,004.40	124,000.04			
Net L	! ~ '		ts or fund balances. Subtract line 21 from line 20		93,604.48	124,085.34			
_	art II		ture Block		33,004.40	124,000.04			
			ry, I declare that I have examined this return, including accompanying schedules and stat	tements and to	the best of	my knowledge, and belief, it is			
tru	ie, correct,	and comp	ete Declaration of preparer (other than officer) is based on all information of which prepar	er has any know	ledge	,,,,,			
		<u> </u>	Richard & Williams	T	3-14	1-19			
Sig	an	Sign	ature of officer	D	ate				
	ere		RICHARD L. WILLIAMS PRESIDENT						
		Type	or print name and title		··				
<u> </u>		Print/Ty	pe preparer's name Preparer's signature	Date	Check	□ r PTIN			
	aid				self-em				
	eparer		ame >	Fin	m's ElN ▶				
US	se Only		ddress ►		one no				
Ma	v the IRS	_	s this return with the preparer shown above? (see instructions)			🗌 Yes 🗌 No			
				No 11282Y		Form 990 (2018)			
						6 cz0 ·			
						→ → − ·			

Porm 99	0 (2018)	age 2
Part	-	
	Check if Schedule O contains a response or note to any line in this Part III	V
1	Briefly describe the organization's mission:	
	We facilitate outreach ministries with USA and international churches that will grow and develop church leaders and meet felt ne	eds I
	the community.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
_	prior Form 990 or 990-EZ?	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?	No
	If "Yes," describe these changes on Schedule O.	1110
4	•	ad by
-	Describe the organization's program service accomplishments for each of its three largest program services, as measurexpenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to organizations.	
	the total expenses, and revenue, if any, for each program service reported.	.11015,
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$including grants of \$23,197.00_) (Revenue \$)	
	, ————————————————————————————————————	
	Gansu Church development projects in the poor rural areas	

		.
	,	

	(0-1	
4b	(Code:) (Expenses \$24,182.98 including grants of \$) (Revenue \$)	
	We trained workers in 19 cities in sports and community impacting 243 kids through summer sports camps, after school clubs,	nd
	leadership coaching.	
		.
4c	(Code:) (Expenses \$ including grants of \$ 12,400.00) (Revenue \$)	
•••	(
	We assisted in training leaders in Talwan in church development	
	Other presum convers (Deceribe in Schodule O.)	
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ 9,853.40) (Revenue \$)	
4e	Total program service expenses ► 69,633.38	



Form 990 (2018) Part IV **Checklist of Required Schedules** No Yes 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . 2 V Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 V Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 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 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V . . . 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 VII, VIII, IX, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," 11a Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more 11c Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV. 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV. 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? ...

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

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J

19 20a

20b

Part	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? If "Yes," complete Schedule I, Parts I and III	22		v
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		,
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		v
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	~
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		,
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	~
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? If "Yes," complete Schedule L, Part I	25a		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		v
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		,
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		,
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		~
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		,
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		,
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		,
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		,
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		,
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		,
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
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)? If "Yes," complete Schedule R, Part V, line 2	35b		,
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		,
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		~
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	1	
Part				
	Control of the state of the sta	<u> </u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	[
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		

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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		~
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		~
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	1		ļ
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		~
b	If "Yes," enter the name of the foreign country:	İ	ľ	
	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		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
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		~
þ	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).			
а	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		~
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	:		ļ
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7-		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7g		~
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		~
h		/'''		
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.	- ٽ		<u> </u>
а	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		1
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	1		
11	Section 501(c)(12) organizations. Enter:	1		
а	Gross income from members or shareholders	j ,		
b	Gross income from other sources (Do not net amounts due or paid to other sources	Ì		
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	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.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		~
	Note. See the instructions for additional information the organization must report on Schedule O.			
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			
C	Enter the amount of reserves on hand	ļ		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in 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?	15		~
	If "Yes," see instructions and file Form 4720, Schedule N.	<u> </u>		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
	If "Yes," complete Form 4720, Schedule O.			

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI	See ins	struct	
Secti	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	4		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 2			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1	1	
	any other officer, director, trustee, or key employee?	2	~	
3	Did the organization delegate control over management duties customanly performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		~
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	<u> </u>	1
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		1
6 7a	Did the organization have members or stockholders?	6		~
	one or more members of the governing body?	7a	<u> </u>	~
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		~
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	7	
b	Each committee with authority to act on behalf of the governing body?	8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	9	,	
Secti	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			
	on bit onoise (this seed on brogassic information about pension for required by the internal reven	00 0	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		~
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?	10b		<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	~	ļ
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		<u> </u>	لــــا
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	~	₩-
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	-	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	~	
13	Did the organization have a written whistleblower policy?	13	ļ	~
14	Did the organization have a written document retention and destruction policy?	14	<u> </u>	V .
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?			
а	The organization's CEO, Executive Director, or top management official	15a	<u> </u>	<u> </u>
b	Other officers or key employees of the organization	15b	ļ	<u> </u>
	If "Yes" to line 15a or 15b, describe the process in 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?	16a		7
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?	16b		
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ OHIO			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-1 (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 in Schedule O)	۲ (Sec	tion (501(c)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.	erest	policy	, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	•	

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Form	000	(201	a١
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Part VII	Compensation of Officers	Directors, Truste	es, Key Employees	s, Highest Compensate	d Employees, and
	Independent Contractors				

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization no	r any relate	d orga	aniz	atio	n c	ompe	nsa	ated any curren	t officer, directo	r, or trustee.
					C)					
(A)	(B)	(do n	at at	Position heck more than or				(D)	(E)	(F)
Name and Title	Average					is both		Reportable	Reportable	Estimated
	hours per week (list any			dad	rect	or/trust	tee)	compensation	compensation from related	amount of other
	hours for	일	쿒	Officer	₹	調査	Former	the	organizations	compensation
	related organizations	Individual trustee or director	Institutional trustee	펹	Key employee	o log	me	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	Q 8	2		ջ	A &		1000-111100)		and related
	line)	uste	켮		8	5				organizations
		•	8			Highest compensated employee				
	 		 	-	-		-			
(1) Richard L. Williams	50									
Director, President			<u> </u>	~		L		24,000.00		
(2) Edna M. Williams	30						Ì			
Director, Treasurer	<u> </u>		<u> </u>	~	ļ,		ļ	24,000.00		
(3) Daniel L. Williams	50					ļ		1		
Director, Vice President				~				55,384.50		
(4) Steve Halley	0		1	_				1		
Director (5) Ma Compall	0		\vdash					0		
(5) Vic Cottrell Director	ļ		١.	_				0		
(6)			\vdash	ř			-	,		
	+									
(7)			\vdash	\vdash	\vdash		-			· · · · · · · · · · · · · · · · · · ·
-X-/	†									
(8)										
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(12)	ļ						ĺ			
			<u> </u>				L			
(13)	 									
44	ļ						<u> </u>		-	
(14)										

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(A) Name and title		(B) (do not check more that box, unless person is boxed in the control of the con					ee)	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estimated amount of other		
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-Mi		comp from organ and	ensation in the nization related ization	n I
(15)														
(16)														
(17)												·		
(18)														
(19)														
(20)														
(21)														
(22)														
(23)														
(24)							-					<u> </u>		
(25)								<u> </u>						
1b c d	Sub-total	VII, Sectio	n A					▶ ▶	153 53 176)				84.50
2	Total number of individuals (including but reportable compensation from the organi	not limited	to th	ose	list	ed	above	e) w	ho received m	ore than \$10	0,000	of	100,0	.04.00
3	Did the organization list any former of employee on line 1a? If "Yes," complete:	ficer, direc							oloyee, or high	est comper	nsated	3	Yes	No
4	For any individual listed on line 1a, is the organization and related organizations individual											4		~
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or indi		5		
	on B. Independent Contractors Complete this table for your five highest		od in			ont.	contr		ore that receive	nd more than	\$100	200 01		
1	compensation from the organization. Repyear.	oort compe	nsatio	on fo	or th	16 C	aleno	lar y	year endińg wit	h or within the	he orga	nizatı	on's t	ax
(A) (B) Name and business address Description of services							С	(C) ompens	ation					
						_								
2	Total number of independent contractor received more than \$100,000 of compens							L b th	nose listed ab	ove) who				Ì

Part	VIII	Statement of Revenu						
		Check if Schedule O co	ntains a res	ponse or note to			<u> </u>	<u> </u>
	-				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
इंद	1a	Federated campaigns .	1a				1	
ᅙᇕ	b	Membership dues	1b					
s, E	С	Fundraising events	1c		ļ			İ
a Si	d	Related organizations .	1d		}			1
S, E	е	Government grants (contribu			i			
ži Š	f	All other contributions, gifts,					1	
₹ ق		and similar amounts not include	d above 1f	254,737.63				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in					ł	1
	h	Total. Add lines 1a-1f .	<u> </u>	▶	254,737.63			<u> </u>
ᇍ				Business Code				
e e	2a						<u> </u>	
Œ i	Ь							
. <u>Ş</u> .	С							ļ <u>-</u>
8	ď							
Ē	e			ļ			ļ	
Program Service Revenue	f	All other program service			·			ļ
<u>a.</u>	<u>g</u>	Total. Add lines 2a-2f . Investment income (inc	ludina divid	lende interest				
	•	and other similar amount	~		1			
	4	Income from investment of	,	L L				
j	5	Royalties						
	•		(i) Real	(ii) Personal				
	6a	Gross rents						
	Ь	Less: rental expenses		 	1		1	l
	c	Rental income or (loss)			ì		ļ	
	ď	Net rental income or (loss	s)	>				
	7a	`	(i) Securities	(ii) Other				
	'-	assets other than inventory		<u> </u>				j
	. ь	Less: cost or other basis						
		and sales expenses .						
	c	Gain or (loss)					<u> </u>	_
	ď	Net gain or (loss)		, >				
evenue	8a	Gross income from fundrevents (not including \$	raising					
Œ		of contributions reported of See Part IV, line 18	n line 1c).		į			
Other	ь	Less: direct expenses .						
0		Net income or (loss) from				* <u>-</u>		
		Gross income from gamin		STOLING : P		····	<u> </u>	
		See Part IV, line 19		,	1			
	b	Less: direct expenses .	b				ļ	
	С	Net income or (loss) from	gaming act	ivities ►				
	10a	Gross sales of inven						
		returns and allowances	· · · a	L				
		Less: cost of goods sold						
	С	Net income or (loss) from						
		Miscellaneous Reven	nue	Business Code				
	11a							
	b	***************************************		<u> </u>			ļ	
	С							
	d	All other revenue		L			<u> </u>	ļ
	12	Total. Add lines 11a-11d		🟲			-	
	. 7.7	LOYSEROVODER SAC COSTS	ICTIONS		054 707 60			i e

om 99	90 (2018)				Page 10
Par					
Sectio	n 501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a respons			<u> </u>	
3b, 9t	t include amounts reported on lines 6b, 7b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	4,483.00	4,483.00		
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	40,967.40	40,967.40		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	103,384.50		103,384.50	
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 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 10	Other employee benefits	8,427.62		8427.62	
11	Fees for services (non-employees):				
а	Management				
b	Legal				
C	Accounting			· · · · · · · · · · · · · · · · · · ·	
d e	Lobbying				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses	12,752.86		12,752.86	
14	Information technology			···	
15 16	Royalties				
17	Occupancy	16,531.34		16,531.34	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	10,331.34		10,551.54	
19	Conferences, conventions, and meetings	13,302.07		13,302.07	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				k
a	Program Service \$24,182.98	24,407.98	24,182.98	225.00	
b	To Tax account \$225.00				
d					
e	All other expenses 0				
25	Total functional expenses. Add lines 1 through 24e	224,256.77	69,633.38	154,623.39	
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)	no Tjavvii i	VJ,VUU.00	1.07,020.33	

F	art X				
		Check if Schedule O contains a response or note to any line in this Par	tX		<u> </u>
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	93,604.48	1	124,085.34
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	•	3	
	4	Accounts receivable, net		4	· · · · · · · · · · · · · · · · · · ·
	5	Loans and other receivables from current and former officers, directors,			· · · · · · · · · · · · · · · · · · ·
	İ	trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
ţ		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
Ä	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b	93.604.48	10c	124.085.34
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11	·	12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	95604.48	16	_ <i>124085.3</i> 4
	17	Accounts payable and accrued expenses		17	F
	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	
Liabilities	22	Loans and other payables to current and former officers, directors,		i	
Jii		trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			
ial		<u> </u>		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		25	
	26	Total liabilities. Add lines 17 through 25		26	
_		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and		20	
es		complete lines 27 through 29, and lines 33 and 34.			
Ę.	27	Unrestricted net assets		27	
3al	28	Temporarily restricted net assets		28	
<u>B</u>	29	Permanently restricted net assets		29	
٦		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and □			
ř		complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ğ	32	Retained earnings, endowment, accumulated income, or other funds .		32	
§	33	Total net assets or fund balances	93,604.48	33	124,085.34
	34	Total liabilities and net assets/fund balances	93,604,48	34	124.085.34
					Form 990 (2018)

•	~ (9
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		254,7	<u>37.63</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		224,2	<u>56.77</u>
3	Revenue less expenses. Subtract line 2 from line 1	3		30,4	80.86
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		93,6	04.48
5	Net unrealized gains (losses) on investments	5		124,0	<u>85.34</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	Ì			
	33, column (B))	10		124,0	<u>85.34</u>
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>			
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		-		ĺ
	If the organization changed its method of accounting from a prior year or checked "Other," ex	olain i	ո չ-		
_	Schedule O.				لب
2a				ļ	~
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	oiled o	r		
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			<u> </u>	
b	Were the organization's financial statements audited by an independent accountant?	• •	2b	~	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited	d on	a		
	separate basis, consolidated basis, or both:				ŀ
	Separate basis Consolidated basis Both consolidated and separate basis		<u> </u>		
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over the committee that assumes responsibility for the committee that assumes responsibility for over the committee that assumes responsibility for the committee that assumes responsibility for the committee that assumes responsibility for the committee that as the committee that a committee that a committee that a committee that a committee that a commi				
	of the audit, review, or compilation of its financial statements and selection of an independent accounts				<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, ex	plain i	י		
_	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth i			
	the Single Audit Act and OMB Circular A-133?	• • •	3a		_
b	The state of the s				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	Jaits.	3b		
			Fon	ո 990	(2018)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

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

Open to Public

Name	of the organization Employer identification number					number	
Phili	ppi International, Inc.	26-3464879				64879	
Pai	Reason for Public Cha	Reason for Public Charity Status (All organizations must complete this part.) See instructions.					ns.
The 6 1 2 3 4	☐ A church, convention of church A school described in section ☐ A hospital or a cooperative ho	tion because it is: (For lines 1 through 12, check only one box.) hes, or association of churches described in section 170(b)(1)(A)(i). 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) spital service organization described in section 170(b)(1)(A)(iii). on operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the					
5	An organization operated for section 170(b)(1)(A)(iv). (Com		ne benefit of a college or university owned or operated by a governmental unit described in lete Part II.)				
6 7		receives a subs					n the general public
8		n section 170(b)(1)(A)(vi). (Complete Part II.)					
9	or university or a non-land-gra university:	nization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college rant college of agriculture (see instructions). Enter the name, city, and state of the college or				the college or	
10	O An organization that normally receives: (1) more than 33½% 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 33½% 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.)					n 331/3% of its	
11		nization organized and operated exclusively to test for public safety. See section 509(a)(4).					
12	of one or more publicly support	rganization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purpose se or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3 It the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g					
а	the supported organization	ganization operated, supervised, or controlled by its supported organization(s), typically by giving tion(s) the power to regularly appoint or elect a majority of the directors or trustees of the . You must complete Part IV, Sections A and B.					
b	control or management of	panization supervised or controlled in connection with its supported organization(s), by having of the supporting organization vested in the same persons that control or manage the supported to complete Part IV, Sections A and C.					
C		grated. A supporting organization operated in connection with, and functionally integrated with n(s) (see instructions). You must complete Part IV, Sections A, D, and E.				ally integrated with,	
d	d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.						
е	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.					e II, Type III	
f		•					
<u>g</u>							
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) is the o listed in you docur	ır governing	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No		
(A)							
(B)							
(C)							
(D)							
(E)							

Total

Part							
	(Complete only if you checked to Part III. If the organization fails to						alify under
Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	231,640.64	297,326.28	189,253.65	231,986.53	254,737.63	1,204,944.73
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	231,640.64	297,326.28	189,253.65	231,986.53	254,737.63	1,204,944.73
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)					1	
6	Public support. Subtract line 5 from line 4						<i>1204944</i> .7
_	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	231,640.64	297,326.28	189,253.65	231,986.53	254,737.63	1,204,944.73
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						1204944.7
12	Gross receipts from related activities, etc					12	1,204,944.73
13	First five years. If the Form 990 is for the						
	organization, check this box and stop he			<u> </u>		· · · · ·	<u>· · ▶ □</u>
	on C. Computation of Public Support						
14	• • • • • • • • • • • • • • • • • • • •		-	. , .	•	14	100 %
15 16a	Public support percentage from 2017 Sci 331/3% support test—2018. If the organ box and stop here. The organization qua	zation did not	check the box	on line 13, an	d line 14 is 33		
b	331/3% support test—2017. If the organithis box and stop here. The organization	zation did not d	check a box o	n line 13 or 16a	a, and line 15 i	is 33¹/3% or m	ore, check
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part VI how the organization meets the organization	eets the "facts- facts-and-circu	and-circumsta imstances" tes	inces" test, che st. The organiz	eck this box a ation qualifies	and stop here. as a publicly	Explain in supported
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organization of Explain in Part VI how the organization of supported organization	ation meets the neets the "fact:	e "facts-and-c s-and-circums	ircumstances" tances" test. T	test, check the organization	his box and son qualifies as	top here. a publicly
18	Private foundation. If the organization di	d not check a b	oox on line 13.	16a, 16b, 17a,	or 17b, check	k this box and	see

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

► Attach to Form 990.

20**18**

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization
Philippi International, Inc.

Employer identification number 26-3464879

Pai	General Information Form 990, Part IV, line		ties Outside	the United States. Con	nplete if the organization a	answered "Yes" on
1	For grantmakers. Does the other assistance, the grante award the grants or assistan	ees' eligibility	for the gran	ts or assistance, and the	selection criteria used to	☑ Yes □ No
2	For grantmakers. Describe outside the United States.	in Part V the	e organization	's procedures for monitorir	ng the use of its grants an	d other assistance
3	Activities per Region. (The fo	ollowing Part	I, line 3 table o	can be duplicated if addition	nal space is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of	(f) Total expenditures for and investments in the region
(1)	China Gansu	0	0		church development	23.197.00
(2)	China Gansu	0	0		Leadership training	5.000.00
(3)	China Taiwan	0	0		Leadership training	12.400.00
_ (4)	Jamaica .	0 .	0		sponsor teens	370.40
(5)						
(6)						
(7)						
(8)					<u> </u>	
(9)						
(10)						,
<u>(11)</u>		,				
(12)				, ,		
(13)				-		
(14)						
(15)						,
(16)						
(17)						ı
3a	Subtotal					40.967.40
b	Total from continuation sheets to Part I					
С	Totals (add lines 3a and 3b)					40.967.40

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Schedule F (Form 990) 2018

Part II Grants al

-	(a) Name of organization	(b) IRS code section and EIN (f applicable)	ne of (b) IRS code (c) Region section and Ein (f applicable)	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV,
Ξ									appraisal, other)
_			China Gansu	church development	23,197.00				receipts
8			China Gansu	leadership training	5,000.00				recelpts
<u>@</u>			China Talwan	leadership training	12,400.00				receipts
€_			Jamaica	sponsor teens	370.40				receipts
(2)									
9_									
<u>E</u> _									
<u>@</u> _									
6									
<u>6</u>									
<u>E</u>									
(12)	,								
(13)						:	•		
(14)									
(15)									
(16)									
8	Enter total n by the IRS, o	umber of recipie	ent organizations list	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	gnized as charities 501(c)(3) equivaler	s by the foreign country letter	try, recognized as ta		4
ო	Enter total n	umber of other	Enter total number of other organizations or entities	ities				A	
									1 -

Schedule F (Form 990) 2018

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Schedule	F /Form	aan)	2018
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Part	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	· No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Y es	✓ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☐ Yes	√ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	☐ Yes	✓ No

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Supplemental Information

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

When we send funds overseas to assist leadership training, community outreach or church development we receive receipts from the
Christian organization that received the funds. We also receive reports and photos of the project to make sure the project is accurate.
During our annual trip to the region we make a personal visit to see the project. Accountability is built into our giving.

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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

20**18**

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

✓ ► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Name of the organization	Employer identification number
Philippi International, Inc.	26-3464879
Post VI line 0	
Part VI line 9	
Daniel L Williams, 1280 Lamont Circle, Dacula, GA 30019	
Steve M Halley 1366 E Murry-Holladay Road, Salt Lake City UT 84117	•
Maker College 4000 C 77th Charak Linears NF COF4C 40747	,
Victor Cottrell 4933 S 75th Street, Lincoln NE 68516-16715	,
`	
Part VI line 19- Philippi International, Inc. makes its documents available upon request	
Part VI P line 44. Phillippi International Inc. conde the 000 to based members for their impute	od oversetlene myler to melling the remort to IDC
Part VI B line 11- Philippi International, Inc. sends the 990 to board members for their input a	nd suggestions prior to mailing the report to IAS
Part III line 4 B Other Program Service Accomplishments	
\$5,000,00 Cancu landarable training	
\$5,000.00 Gansu leadership training	
\$300.00 USA Mission and youth development	
	` `
\$2,433.00 To train world of sports workers in community outreach	·
6750 00 To goolet teams in 10 cities in markeying and connect	
\$750.00 To assist teams in 19 cities in mentoring and support	
\$500.00 To support after school activities	
\$500.00 To train leaders in health and fitness for kids programs	
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