EXTENDED TO MAY 15, 2019

Department of the Treasury

A For the 2017 calendar year, or tax year beginning JUL 1, 2017

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.

and ending JUN 30, 2018

OMB No. 1545-0047 Inspection

B Check if applicable:		C Name of organization			D Employer identification number		
г	Address	HOME OF GUIDING HANDS CORPORATION					
F	lohange lohange lohange	Doing business as			956	058273	
H	initial ireturn	Number and street (or P.O. box if mail is not deli	verad to street address)	Room/suite	E Telephone numbe		
F	Final	1908 FRIENDSHIP DRIVE	vered to street address)	Hoonwante		er 938-2864	
	return/ termin- ated	City or town, state or province, country, and 2	ID or foreign poetal code		G Gross receipts \$	30,457,073.	
	Amended return		air or foreign postal code		H(a) Is this a group return		
F	Applica-	F Name and address of principal officer: MARK	KLAUS			s? Yes X No	
	pending	SAME AS C ABOVE			H(b) Are all subordinates included? Yes No		
1	Tax-exem	npt status: X 501(c)(3) 501(c) ()		or 527			
		www.guidinghands.org	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>	H(c) Group exemption	,	
			sociation Other	L Year		M State of legal domicile; CA	
P	art I	Summary		•			
•	1 B	riefly describe the organization's mission or most	significant activities: TO IMP	ROVE THE	LIVES OF THOSE W	re .	
Governance	<u> </u>	ERVE BY PROVIDING THE HIGHEST QUALITY					
ž	2 C	heck this box 🕨 🔲 if the organization discon		sed of more	than 25% of its net as	ssets,	
Š	3 N	umber of voting members of the governing body (. , , , , , , , , , , , , , , , , , , ,		<u>3</u>		
		umber of independent voting members of the gov					
Activiting &	5 To	otal number of individuals employed in calendar ye					
Ž	6 T	otal number of volunteers (estimate if necessary)			<u>6</u>		
4	[7a ⊺o	otal unrelated business revenue from Part VIII, col					
_	l g M	et unrelated business taxable income from Form 9	190-1, line 34				
		antributions and grants (Part VIII line 1h)			<u>Prior Year</u> 1,103,953,	Current Year 2,824,095.	
9	8 C	Intributions and grants (Part VIII, line 1h)			20,371,866,	 	
Revente	10 10	ogram service revenue (Part VIII, line 2g)			192,902	 	
ă	10 In	vestment income (Part VIII, column (A), lines 3, 4, and 7d)			-55,140,		
		ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)			21,613,581		
	$\overline{}$	irants and similar amounts paid (Part IX, column (A			29,000	 	
		enefits paid to or for members (Part IX, column (A)		0	 		
	45 0				15,742,459	<u> </u>	
T	16a P	rofessional fundraising fees (Part IX, column (A), lii			27,687		
į	ь т	otal fundraising expenses (Part IX, column (D), line			and the same stages		
ú	17 0	ther expenses (Part IX, column (A), lines 11a-11d,			5,042,144		
		otal expenses. Add lines 13-17 (must equal Part IX			20,841,290	+	
		evenue less expenses. Subtract line 18 from line 1			772,291	. 2,279,197.	
5	SE COL				ginning of Current Year	End of Year	
sets	ਛੂਊ 20 ਾ⊲	otal assets (Part X, line 16)	***************************************		20,883,127		
S		21 Total liabilities (Part X, line 26)			9,682,390	8,738,211.	
		et assets or fund balances. Subtract line 21 from	line 20		11,200,737	. 13,694,148.	
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							
true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.							
		Signature of officer					
Sig	I .	Signature of officer Date					
He	ere	MARK KLAUS, PRESIDENT/CEO Type or print name and title					
			Dana and a dana dana		Date Check	DTIM	
Pai		Print/Type preparer's name MY A. O'LOUGHLIN	Preparer's signature		if	PTIN PO 0 8 6 9 6 8 7	
					self-empl	34-1884125	
		Firm's name CBIZ MHM, LLC Firm's address 4722 N 24TH ST, STE 300			Firm's EÌN ▶	J4-1004123	
USE UTILY		Firm's address 4722 N 24TH ST, STE 300 PHOENIX, AZ 85016			Phone no 60	2-264-6835	
M	ov the IRS	S discuss this return with the preparer shown above? (see instructions)			I Flight ho. 99		
TYTE	47 HIV 1134	varionare and lemmi with the higherst shown 900.	<u>, 1966 (1901)</u>	*************		X Yes No	

Part IV | Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? x If "Yes," complete Schedule A is the organization required to complete Schedule B, Schedule of Contributors? X 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I X Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II Х 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 X Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Х 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 x 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III X 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 debt negotiation services? If "Yes," complete Schedule D, Part IV 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 X If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X 11 as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D. Part VI <u>11a</u> 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 167 If "Yes," complete Schedule D, Part VII X 11b 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? // "Yes," complete Schedule D, Part VIII 11c X d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX Х e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Х 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete Schedule D, Parts XI and XII X 12a **b** Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E X 13 14a Did the organization maintain an office, employees, or agents outside of the United States? X 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Х 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Х 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? // "Yes."

complete Schedule G. Part III

Part IV | Checklist of Required Schedules (continued)

Yes No 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a Х b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 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? /f "Yes," complete Schedule I, Parts I and II 21 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 X Did the organization answer "Yes," to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current 23 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23 X 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a X 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b 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? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit 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 25b X Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or 26 former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes." complete Schedule L, Part II <u> 26</u> 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 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a 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 X 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 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? /f "Yes," complete Schedule M X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I X 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part li X 32 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 Х 33 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 X 34 Did the organization have a controlled entity within the meaning of section 512(b)(13)? X 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 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 If "Yes," complete Schedule R, Part V, line 2 36 X 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 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 Form 990 (2017)

Form 990 (2017) HOME OF GUIDING HANDS CORPORATION Part V Statements Regarding Other IRS Filings and Tax Compliance

_	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>				
			1		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Enter -0- if not applicable	1a	97		172 RG	24/45
b	Enter the number of Forms W-2G included in line 1a, Enter -0- if not applicable	1b	0			M.
C	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portal	ole gaming	1.5		6.4
	(gambling) winnings to prize winners?		· · · · · · · · · · · · · · · · · · ·	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					機能は
	filed for the calendar year ending with or within the year covered by this return	2a	914		1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) ,,,,,	***********************	97405/W	13 (1943) 1 (1944)	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	• • • • • • • • • • • • • • • • • • • •		За		Х
Ь	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 a	uthori	ty over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccour	it)?	4a		x
b	If "Yes," enter the name of the foreign country:			751252		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	coun	ts (FBAR).			1335
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	S= 2.9.	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?		5b		х
¢	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					
	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 contribution	ons o	aifts			\vdash
	were not tax deductible?		-	6b		
7	Organizations that may receive deductible contributions under section 170(c).	******			2. P. A.	100
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices n	rovided to the payor?	7a	X	1 1 V 1821 W
b	16 MAZ- II Allalah			7b	х	\vdash
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					\vdash
	to file Form 8282?			7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year		1			1 60 60 5 25 160 5 1
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or	ontrac	t?	7е	1 Prosessorial	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		***************************************	7f		x
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		99 as required?	7g		┢
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza			7h	х	┢
8						1000
	sponsoring organization have excess business holdings at any time during the year?					LILIPSAL.
9	Sponsoring organizations maintaining donor advised funds.			8		
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a	. 43586436	1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ь	Did the sponsoring organization make a distribution to a donor donor advisor, or voleted person?	••••••		9b	-	
10	Section 501(c)(7) organizations. Enter:		***************************************	- 30	2000	1878
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	1	60.00% 57.00%		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		-8.7979 77850		
11	Section 501(c)(12) organizations. Enter:		<u> </u>			
а	Gross income from members or shareholders	11a	1			
b	Gross income from other sources (Do not net amounts due or paid to other sources against		<u> </u>			
	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		?	12a		150000
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	İ	128		<u> </u>
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	بىء	L			
	To the commission Record to to a small field to the state of the state			13a		1 (20, 30)
-	Note. See the instructions for additional information the organization must report on Schedule O.			13a	(100 de 200	14,577
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	425	1			
c	Enter the amount of reserves on hand	13b	 	- 10 mg/s 10 mg/sy/sy/		
142	Did the organization receive any payments for indeed tenning applicate desired the territory	13c	<u> </u>	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	357876	X
	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule		***************************************	14a		 ^
	provide an explanation in Scheduk	₹ U	<u></u>	14b	990	/0047
				rorn	・コンし	1201/

HOME OF GUIDING HANDS CORPORATION Form 990 (2017) 95-6058273 Page 6 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 in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Х Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent 13 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 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? x 5 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? _____ 8a b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 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? Х 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 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in 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 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b 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 b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation

Section C. Disclosure

17 List the states with which a copy of this Form 990 is require	ad to b	oo filad	CA

8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available
	for public inspection. Indicate how you made these available. Check all that apply.

X Own website Another's website

1908 FRIENDSHIP DRIVE, EL CAJON,

exempt status with respect to such arrangements?

X	Upon	reque

Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20	State the name, address, and telephone number of the person who possesses the organization's books and records:
	JAN ADAMS, CFO - 619-938-2864

92020

CA

in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's

us.		