

Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2015
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2015 calendar year, or tax year beginning 10/01/15 , **and ending** 09/30/16

B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization CRAFT EMERGENCY RELIEF FUND, INC.		D Employer identification number 13-3273980
	Doing business as		E Telephone number 802-229-2306
	Number and street (or P.O. box if mail is not delivered to street address) 535 STONE CUTTERS WAY, SUITE 202	Room/suite	
	City or town, state or province, country, and ZIP or foreign postal code MONTPELIER VT 05602		G Gross receipts \$ 847,041
F Name and address of principal officer: CORNELIA CAREY 535 STONE CUTTERS WAY, SUITE 202 MONTPELIER VT 05602			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: WWW.CRAFTEMERGENCY.ORG			H(c) Group exemption number
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			L Year of formation: 1985 M State of legal domicile: NY

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: CRAFT EMERGENCY RELIEF FUND, INC. IS A NATIONAL ARTIST SERVICE ORGANIZATION WHOSE MISSION IS TO SAFEGUARD AND SUSTAIN THE CAREERS OF CRAFT ARTISTS AND TO PROVIDE EMERGENCY RESOURCES THAT BENEFIT ALL ARTISTS.	
	2 Check this box <input type="checkbox"/> 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)	3 19
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4 19
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5 8
	6 Total number of volunteers (estimate if necessary)	6 62
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a 0
b Net unrelated business taxable income from Form 990-T, line 34	7b 0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year: 964,414 Current Year: 575,491
	9 Program service revenue (Part VIII, line 2g)	0
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	39,346 22,474
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	277 2,305
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,004,037 600,270
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	130,650 127,300
	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)	519,303 561,932
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0
	b Total fundraising expenses (Part IX, column (D), line 25)	97,184
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	214,620 233,279	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	864,573 922,511	
19 Revenue less expenses. Subtract line 18 from line 12	139,464 -322,241	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year: 1,668,475 End of Year: 1,415,208
	21 Total liabilities (Part X, line 26)	56,934 55,688
	22 Net assets or fund balances. Subtract line 21 from line 20	1,611,541 1,359,520

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 CORNELIA CAREY		Date EXECUTIVE DIRECTOR	
	Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name RANDALL L. SARGENT, CPA	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed <input type="checkbox"/> if PTIN P00136499
	Firm's name JMM & ASSOCIATES, PC		Firm's EIN 03-0280081	
	Firm's address 336 WATER TOWER CIR STE 801 COLCHESTER, VT 05446		Phone no. 802-655-5665	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

CRAFT EMERGENCY RELIEF FUND, INC. IS A NATIONAL ARTIST SERVICE ORGANIZATION WHOSE MISSION IS TO SAFEGUARD AND SUSTAIN THE CAREERS OF CRAFT ARTISTS AND TO PROVIDE EMERGENCY RESOURCES THAT BENEFIT ALL ARTISTS.

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 [X] 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 [X] 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 \$ 677,164 including grants of \$ 127,300) (Revenue \$)

IN FISCAL YEAR 2016, CERF+'S PREPAREDNESS AND RESILIENCY-BUILDING PROGRAMS WERE FOCUSED IN TWO AREAS (1) EXPEDITING EMERGENCY RELIEF SUPPORT AND INCREASING INFORMATION ABOUT-AND ACCESS TO-READINESS AND RECOVERY RESOURCES (2) ENHANCING OUR SERVICES TO ENSURE THAT WE MEET THE NEEDS OF ARTISTS AT ALL PHASES OF THEIR CAREERS. THROUGH THESE EFFORTS, WE SERVED 639 INDIVIDUAL ARTISTS AND ARTS PROFESSIONALS. IN ADDITION TO OUR OWN PROGRAMS AND SERVICES, WE PLAYED A LEADERSHIP ROLE IN THE EMERGING NATIONAL MOVEMENT WITHIN THE ARTS SECTOR TO IMPROVE THE OVERALL SAFETY NET (BEFORE, DURING AND AFTER DISASTERS) FOR ARTISTS, ARTS ENTREPRENEURS AND ORGANIZATIONS.

CONTINUED ON SCHEDULE O

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 677,164

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)? If "Yes," complete Schedule A	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? If "Yes," complete Schedule C, Part 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? If "Yes," complete Schedule C, Part II		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		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
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		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? If "Yes," complete Schedule D, Part VI	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? If "Yes," complete Schedule D, Part VII		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? If "Yes," complete Schedule D, Part VIII		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		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		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)? If "Yes," complete Schedule D, Part X	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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? If "Yes," complete Schedule F, Parts I and IV		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? If "Yes," complete Schedule F, Parts II and IV		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? If "Yes," complete Schedule F, Parts III and IV		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? If "Yes," complete Schedule G, Part I (see instructions)		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? If "Yes," complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		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? If "Yes," complete Schedule I, Parts I and II		X
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		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
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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part I		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
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		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1		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)? If "Yes," complete Schedule R, Part V, line 2		
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		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 1a-14b regarding IRS filings and tax compliance.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
1a	19		
b	Enter the number of voting members included in line 1a, above, who are independent		
1b	19		
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, or 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
7b			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	
8a		X	
b	Each committee with authority to act on behalf of the governing body?	X	
8b		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 in Schedule O		X
9			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
10a			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?		
10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
11a		X	
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	X	
12a		X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12b		X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
12c		X	
13	Did the organization have a written whistleblower policy?	X	
13		X	
14	Did the organization have a written document retention and destruction policy?	X	
14		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	
15a		X	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	X	
15b		X	
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
16a			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?		
16b			

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ► MA, NY
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request 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: ►
 JAYNE SHERIDAN 535 STONE CUTTERS WAY, SUITE 202
 MONTPELIER VT 05602 802-229-2306

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check 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 instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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) JULIE GORDON DALGLEISH CHAIR	4.00 0.00	X		X				0	0	0
(2) LOIS RUSSELL SECRETARY	4.00 0.00	X		X				0	0	0
(3) EDDIE BERNARD VICE CHAIR	4.00 0.00	X		X				0	0	0
(4) REED MCMILLAN TREASURER	4.00 0.00	X		X				0	0	0
(5) JUDY GORDON DIRECTOR	4.00 0.00	X						0	0	0
(6) POLLY ALLEN DIRECTOR	4.00 0.00	X						0	0	0
(7) BARRY BERGEY DIRECTOR	4.00 0.00	X						0	0	0
(8) MICHELLE BUFANO DIRECTOR	4.00 0.00	X						0	0	0
(9) DON FRIEDLICH DIRECTOR	4.00 0.00	X						0	0	0
(10) JOHN HAWORTH DIRECTOR	4.00 0.00	X						0	0	0
(11) CINDA HOLT DIRECTOR	4.00 0.00	X						0	0	0

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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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) AZIM MAZAGONWALLA	4.00									
DIRECTOR	0.00	X						0	0	0
(13) JULES POLK	4.00									
DIRECTOR	0.00	X						0	0	0
(14) CHRISTINE O. ROBB	4.00									
DIRECTOR	0.00	X						0	0	0
(15) SYLVIE ROSENTHAL	4.00									
DIRECTOR	0.00	X						0	0	0
(16) FELICIA SHAW	4.00									
DIRECTOR	0.00	X						0	0	0
(17) JAN KATZ (TERM ENDED 11/15/15)	4.00									
DIRECTOR	0.00	X						0	0	0
(18) CURTIS BENZLE (TERM ENDED 11/15/15)	4.00									
DIRECTOR	0.00	X						0	0	0
(19) TONI SIKES (TERM ENDED 11/15/15)	4.00									
DIRECTOR	0.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A								87,684		13,664
d Total (add lines 1b and 1c)								87,684		13,664

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 0

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		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? If "Yes," complete Schedule J for such individual		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? If "Yes," complete Schedule J for such person		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 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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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			
(20) CORNELIA CAREY	40.00									
EXECUTIVE DIRECTOR	0.00			X			87,684	0	13,664	
1b Sub-total							87,684		13,664	
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	
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? If "Yes," complete Schedule J for such individual	4	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	

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

Part VIII Statement of Revenue

Check 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					
	1b	Membership dues					
	1c	Fundraising events					
	1d	Related organizations					
	1e	Government grants (contributions)	15,000				
	1f	All other contributions, gifts, grants, and similar amounts not included above	560,491				
	g	Noncash contributions included in lines 1a-1f: \$					
	h	Total. Add lines 1a-1f		575,491			
Program Service Revenue	2a						
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f					
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		24,969		24,969
4		Income from investment of tax-exempt bond proceeds					
5		Royalties					
6a		Gross rents	(i) Real				
			(ii) Personal				
b		Less: rental exps.					
c		Rental inc. or (loss)					
d		Net rental income or (loss)					
7a		Gross amount from sales of assets other than inventory	(i) Securities	244,228			
			(ii) Other				
b		Less: cost or other basis & sales exps.	246,723				
c		Gain or (loss)	-2,495				
d		Net gain or (loss)		-2,495	-2,495		
8a		Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a				
b		Less: direct expenses	b				
c	Net income or (loss) from fundraising events						
9a	Gross income from gaming activities. See Part IV, line 19	a					
b	Less: direct expenses	b					
c	Net income or (loss) from gaming activities						
10a	Gross sales of inventory, less returns and allowances	a	2,353				
		b	Less: cost of goods sold	48			
		c	Net income or (loss) from sales of inventory		2,305		2,305
Miscellaneous Revenue		Busn. Code					
11a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d						
12	Total revenue. See instructions.		600,270	-2,495	0	27,274	

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	127,300	127,300		
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	115,850	93,839	7,646	14,365
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	351,927	248,991	60,430	42,506
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	9,410	7,622	621	1,167
9 Other employee benefits	50,014	34,503	9,498	6,013
10 Payroll taxes	34,731	25,360	5,151	4,220
11 Fees for services (non-employees):				
a Management				
b Legal	895		895	
c Accounting	10,594		10,594	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	9,647		9,647	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	27,185	26,385	219	581
12 Advertising and promotion	2,967	2,507	120	340
13 Office expenses	50,426	14,219	18,922	17,285
14 Information technology	29,870	21,487	4,361	4,022
15 Royalties				
16 Occupancy	25,221	18,465	3,253	3,503
17 Travel	51,600	47,303	1,942	2,355
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,281	1,712	224	345
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,973		1,973	
23 Insurance	3,200		3,200	
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.)				
a BAD DEBT EXPENSE	7,273	2,023	5,250	
b EVENTS/ DONOR CULTIVATION	4,004	4,004		
c BANK AND CREDIT CARD FEES	3,619		3,547	72
d DUES AND SUBSCRIPTIONS	2,524	1,444	670	410
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	922,511	677,164	148,163	97,184
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check 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	196,735	1	32,988	
	2	Savings and temporary cash investments		2		
	3	Pledges and grants receivable, net	425,171	3	321,836	
	4	Accounts receivable, net	205	4		
	5	Loans and other receivables from current and former officers, directors, 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 organizations (see instructions). Complete Part II of Schedule L		6		
	7	Notes and loans receivable, net	40,711	7	61,418	
	8	Inventories for sale or use		8		
	9	Prepaid expenses and deferred charges	6,669	9	10,408	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	30,735		
	b	Less: accumulated depreciation	10b	7,239	10c	23,496
	11	Investments—publicly traded securities	992,015	11	965,062	
	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)	1,668,475	16	1,415,208		
Liabilities	17	Accounts payable and accrued expenses	56,934	17	54,088	
	18	Grants payable		18		
	19	Deferred revenue		19	1,600	
	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 current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		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	56,934	26	55,688	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets	1,046,023	27	1,034,208	
	28	Temporarily restricted net assets	565,518	28	325,312	
	29	Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds		30		
	31	Paid-in or capital surplus, or land, building, or equipment fund		31		
	32	Retained earnings, endowment, accumulated income, or other funds		32		
33	Total net assets or fund balances	1,611,541	33	1,359,520		
34	Total liabilities and net assets/fund balances	1,668,475	34	1,415,208		

Part XI Reconciliation of Net Assets

Check 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	600,270
2	Total expenses (must equal Part IX, column (A), line 25)	2	922,511
3	Revenue less expenses. Subtract line 2 from line 1	3	-322,241
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,611,541
5	Net unrealized gains (losses) on investments	5	70,220
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 33, column (B))	10	1,359,520

Part XII Financial Statements and Reporting

Check 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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	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 in 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 Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

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.

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

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

CRAFT EMERGENCY RELIEF FUND, INC.

Employer identification number

13-3273980

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 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An 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.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 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

Table with 7 columns: (a) 2011, (b) 2012, (c) 2013, (d) 2014, (e) 2015, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 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

Table with 7 columns: (a) 2011, (b) 2012, (c) 2013, (d) 2014, (e) 2015, (f) Total. Rows include: 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); 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 3 columns: Line number, Description, and Percentage. Rows include: 14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)); 15 Public support percentage from 2014 Schedule A, Part II, line 14; 16a 33 1/3% support test—2015; b 33 1/3% support test—2014; 17a 10%-facts-and-circumstances test—2015; b 10%-facts-and-circumstances test—2014; 18 Private foundation.

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

(Complete only if you checked the box on line 9 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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	621,872	694,756	1,379,002	964,414	575,491	4,235,535
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513	12,989	16,077	5,389	2,450	2,353	39,258
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	634,861	710,833	1,384,391	966,864	577,844	4,274,793
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	180,000	210,000	1,010,000	691,076	329,726	2,420,802
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	180,000	210,000	1,010,000	691,076	329,726	2,420,802
8 Public support. (Subtract line 7c from line 6.)						1,853,991

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6	634,861	710,833	1,384,391	966,864	577,844	4,274,793
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	21,058	18,230	16,693	20,173	24,969	101,123
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	21,058	18,230	16,693	20,173	24,969	101,123
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	655,919	729,063	1,401,084	987,037	602,813	4,375,916

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	42.37%
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	47.97%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	2%
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	2%

19a 33 1/3% support tests—2015. 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—2014. 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 in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
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? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
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.		

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).		

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?		
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).		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

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	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

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. 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 (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

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

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

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

Section D - Distributions		Current Year		
1	Amounts paid to supported organizations to accomplish exempt purposes			
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of supported organizations			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015:			
a				
b				
c				
d	From 2013			
e	From 2014			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2015 distributable amount			
i	Carryover from 2010 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2015 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7	Excess distributions carryover to 2016. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a				
b				
c	Excess from 2013			
d	Excess from 2014			
e	Excess from 2015			

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

Employer identification number

CRAFT EMERGENCY RELIEF FUND, INC.

13-3273980

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 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 (2a Total number of conservation easements, 2b Total acreage restricted by conservation easements, 2c Number of conservation easements on a certified historic structure included in (a), 2d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register), 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 2(d) 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.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1, (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 SFAS 116 (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 are a 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 programs
 - 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 on 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 Temporarily restricted 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:
- | | Yes | No |
|---|---------------------|-------|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 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				
b Buildings				
c Leasehold improvements				
d Equipment		12,235	7,239	4,996
e Other		18,500		18,500
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶				23,496

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, col. (B) line 12.) ▶		

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, col. (B) line 13.) ▶		

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)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

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

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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	729,567
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	70,220	
b	Donated services and use of facilities	2b	59,029	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	48	
e	Add lines 2a through 2d		2e	129,297
3	Subtract line 2e from line 1		3	600,270
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		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	600,270

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	981,588
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	59,029	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	48	
e	Add lines 2a through 2d		2e	59,077
3	Subtract line 2e from line 1		3	922,511
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		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	922,511

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.

PART X - FIN 48 FOOTNOTE

THE ORGANIZATION BELIEVES IT HAS ADEQUATE SUPPORT FOR ANY TAX POSITION TAKEN AND, AS SUCH, HAS NOT RECORDED ANY LIABILITY FOR UNCERTAIN TAX POSITIONS.

PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER
 COST OF GOODS SOLD \$ 48

PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER
 COST OF GOODS SOLD \$ 48

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Name of the organization

CRAFT EMERGENCY RELIEF FUND, INC.

Employer identification number

13-3273980

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

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

2015

▶ Attach to Form 990 or 990-EZ.

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

CRAFT EMERGENCY RELIEF FUND, INC.

13-3273980

FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT

IN RECOGNITION OF THE UNIQUE ROLE THAT CERF+ PLAYS WITHIN THE CRAFT COMMUNITY AS AN "ARTIST RESPONDER" AND ARTIST ADVOCATE AND OUR 30+ YEARS OF SERVICE TO THE FIELD, WE RECEIVED THE PRESTIGIOUS BIENNIAL AWARD OF DISTINCTION FROM THE AMERICAN CRAFT COUNCIL.

CRAFT EMERGENCY RELIEF FUND

CERF+ PROVIDES CRITICAL EMERGENCY FINANCIAL ASSISTANCE TO ARTISTS WORKING IN CRAFT DISCIPLINES WHO HAVE EXPERIENCED A RECENT, CAREER-THREATENING EMERGENCY. ONCE APPLICATIONS ARE COMPLETED, GRANT DETERMINATIONS ARE MADE WITHIN TWO WEEKS AND ON AVERAGE, WITHIN SEVEN DAYS. TWENTY-NINE ARTISTS FROM ACROSS THE COUNTRY IMPACTED BY FLOODS, HOME AND STUDIO FIRES, HURRICANES, INJURIES AND ILLNESSES RECEIVED \$127,300 IN RELIEF GRANTS (UP TO \$6,000 EACH); SEVEN ARTISTS RECEIVED NO-INTEREST LOANS OF \$41,500 (UP TO \$9,000 EACH), AND SEVENTEEN ARTISTS RECEIVED \$10,597 WORTH OF GIFTS-IN-KIND (DONATIONS OF EQUIPMENT, MATERIALS, BOOTH WAIVER FEES), TOTALING \$179,397. OUR PERSONALIZED INDIVIDUAL COUNSELING AND REFERRALS HELPED 224 ARTISTS RESPOND TO THEIR EMERGENCY IN A TIME OF CRISIS.

EMERGENCY ALERTS

CERF+ MAINTAINS AN ACTIVE LIST OF INDIVIDUALS, ORGANIZATIONS, AND ARTS BUSINESSES THAT RECEIVE EMAIL ALERTS BOTH BEFORE AND AFTER AN EMERGENCY. IN FY16, 4,985 INDIVIDUALS AND ORGANIZATIONS RECEIVED FOURTEEN ALERTS THAT

Name of the organization

Employer identification number

CRAFT EMERGENCY RELIEF FUND, INC.

13-3273980

WERE SENT OUT WITH CRITICAL PREPAREDNESS AND RECOVERY INFORMATION, RESOURCES AND SUPPORT GEARED TOWARD THEIR NEEDS. NOTICES WERE SENT OUT THIS YEAR FOR THE FLOODING IN LOUISIANA, TEXAS, SOUTH CAROLINA, MARYLAND, ARKANSAS, MISSISSIPPI, AND WEST VIRGINIA; HURRICANES HERMINE AND MATTHEW; THE CALIFORNIA WILDFIRES; AND WASHINGTON WINTER STORMS. A NEW CERF+ SELF-HELP VIDEO CALLED "SALVAGING MOLD-DAMAGED ARTWORK" WAS VIEWED OVER 1,000 TIMES IN THE MONTH FOLLOWING THE LOUISIANA FLOODS AND HURRICANE MATTHEW.

STUDIO PROTECTOR

CERF+'S STUDIO PROTECTOR WEBSITE AND WALL GUIDE ARE COMPREHENSIVE RESOURCES THAT HELP ARTISTS PREPARE FOR AND RECOVER FROM EMERGENCIES, LARGE AND SMALL. OUR ONLINE RESOURCE IS RECOGNIZED AS A "GO TO" DESTINATION BY NATIONAL, REGIONAL, STATE, AND LOCAL ARTS AGENCIES AND ARTIST SERVICE ORGANIZATIONS PROVIDING EMERGENCY MANAGEMENT AND CAREER PROTECTION INFORMATION TO CONSTITUENTS AND MEMBERS. OUR STUDIO PROTECTOR "TIP OF THE MONTH"-COVERING TIMELY PREVENTION AND PREPAREDNESS MEASURES--IS AMONG THE MOST VIEWED SECTIONS OF OUR MONTHLY E-NEWSLETTER; IT IS OFTEN REPOSTED BY BLOGGERS AND OTHER ARTS SERVICE ORGANIZATIONS AND THEN ARCHIVED IN AN ONLINE COLLECTION. OUR WALL GUIDE STUDIO PROTECTORS WERE DISTRIBUTED TO 654 PEOPLE, INCLUDING CERF+ BENEFICIARIES AND APPLICANTS, WORKSHOP PARTICIPANTS AND PRESENTERS, ART STUDENTS AND ARTS PROFESSIONALS.

COVER YOUR A'S: ART, ASSETS + ARCHIVES

Schedule O (Form 990 or 990-EZ) (2015)

Page 2

Name of the organization CRAFT EMERGENCY RELIEF FUND, INC.	Employer identification number 13-3273980
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IN FY 2016, NINE ART SCHOOLS/ART DEPARTMENTS ENROLLED FACULTY AND CAREER SERVICES STAFF IN OUR "COVER YOUR A'S" CURRICULUM TRAINING WORKSHOPS HELD AT THE MINNEAPOLIS COLLEGE OF ART & DESIGN (OCTOBER 2015) AND AT THE FRIST CENTER FOR VISUAL ARTS, NASHVILLE (SEPTEMBER 2016). WITH MORE THAN 30 INSTITUTIONS NOW USING OUR TEACHING MODULES, THIS MEANS THAT 1,200-1,500 ART STUDENTS AT THE CERTIFICATE, BFA AND MFA LEVELS WILL RECEIVE CAREER PROTECTION INSTRUCTION AS PART OF THEIR PROFESSIONAL PRACTICE CLASSES IN THE CURRENT ACADEMIC YEAR.

EDUCATION AND TRAINING WORKSHOPS

CERF+ ATTENDED FOURTEEN NATIONAL, REGIONAL, AND STATE CONFERENCES WHERE WE PRESENTED SEVEN WORKSHOPS ON ARTISTS' EMERGENCY AND CAREER PROTECTION SAFEGUARDS AND ARTISTS' LEGACY PLANNING. 594 ARTISTS, ARTS PROFESSIONALS, AND REPRESENTATIVES OF GOVERNMENT AND COMMUNITY AGENCIES AND OTHER RELIEF PROVIDERS PARTICIPATED IN THESE SESSIONS AT MEETINGS OF THE NATIONAL COUNCIL ON EDUCATION FOR THE CERAMIC ARTS, NATIONAL VOLUNTEER ORGANIZATIONS ACTIVE IN DISASTER, THE FURNITURE SOCIETY, NATIONAL ASSOCIATION OF STATE ART ASSEMBLY FOLK AND TRADITIONAL ARTS COORDINATORS, OKLAHOMA ARTS CONFERENCE, VERMONT CRAFTS COUNCIL AND ST LOUIS VOLUNTEER LAWYERS FOR THE ARTS.

IN OUR HOME STATE (VERMONT), CERF+, IN COOPERATION WITH THE VERMONT COUNCIL ON THE ARTS, BROUGHT TOGETHER COMMUNITY ARTISTS, ARTS ADMINISTRATORS AND EMERGENCY MANAGEMENT DIRECTORS FROM THE AMERICAN RED CROSS FROM VERMONT AND NORTHERN NEW ENGLAND FOR A FORUM TO EXPLORE POSSIBILITIES FOR TRAINING "ARTIST RESPONDERS" TO BE PART OF IMMEDIATE AND LONG TERM RECOVERY TEAMS.

Schedule O (Form 990 or 990-EZ) (2015)

Page 2

Name of the organization

CRAFT EMERGENCY RELIEF FUND, INC.

Employer identification number

13-3273980

ADVOCACY

TOOL REPLACEMENT BILL

SINCE 2012, CERF+ HAS LED A NATIONAL EFFORT TO CHANGE THE FEMA REGULATION ABOUT ARTISTS' AND OTHER SELF-EMPLOYED WORKERS' ELIGIBILITY FOR POST-DISASTER TOOL REPLACEMENT. THIS YEAR WE MADE SIGNIFICANT GAINS, ASSISTED BY THE FEDERAL AFFAIRS STAFF FROM AMERICANS FOR THE ARTS. CERF+'S PROPOSAL FOR CHANGING THE LANGUAGE IN THE STAFFORD ACT WAS ADAPTED INTO A "STATEMENT OF CONCERN" THAT WAS INCLUDED IN THE 2016 CONGRESSIONAL ARTS HANDBOOK FOR NATIONAL ARTS ADVOCACY DAY ON MARCH 8 IN WASHINGTON DC. IN ADDITION, OUR PROPOSAL WAS A COMPONENT OF A NEW LEGISLATIVE ARTS PACKAGE THAT WAS INTRODUCED IN THE SENATE ON MARCH 8 BY NEW MEXICO SENATOR TOM UDALL, AND FORMALLY ANNOUNCED DURING THE ARTS ADVOCACY DAY KICK OFF. THE COMPREHENSIVE RESOURCES FOR ENTREPRENEURS IN THE ARTS TO TRANSFORM THE ECONOMY ACT OF 2016 OR THE CREATE ACT OF 2016 (S.2648), IS A COMPREHENSIVE MEASURE TO SUPPORT THE DEVELOPMENT OF ARTS BUSINESSES, JOBS, AND THE GROWTH OF THE CREATIVE ECONOMY IN THE UNITED STATES.

NATIONAL COALITION FOR ARTS' PREPAREDNESS AND EMERGENCY RESPONSE (NCAPER) SINCE SPEARHEADING THE FORMATION OF THE COALITION IN 2006, CERF+ EXECUTIVE DIRECTOR CORNELIA CAREY HAS SERVED AS A CO-CHAIR OF THIS CROSS-DISCIPLINARY VOLUNTARY TASK FORCE. THROUGH THE COALITION'S EFFORTS, THE URGENCY OF ADDRESSING THE ISSUE OF THE VULNERABILITY OF THE ARTS AND CULTURE SECTOR HAS GAINED GREATER ATTENTION, AND IN SPRING 2016, THE NATIONAL ENDOWMENT FOR THE ARTS HOSTED A NATIONAL CONVENING ON "READINESS AND RESILIENCY: ADVANCING A COLLABORATIVE AND NATIONAL STRATEGY FOR THE ARTS IN TIMES OF

PAGE 3 OF 5

Schedule O (Form 990 or 990-EZ) (2015)

Schedule O (Form 990 or 990-EZ) (2015)

Page 2

Name of the organization CRAFT EMERGENCY RELIEF FUND, INC.	Employer identification number 13-3273980
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EMERGENCIES." CAREY, ALONG WITH 20+ NATIONAL ARTS LEADERS, FUNDERS, AND EMERGENCY MANAGEMENT EXPERTS REVIEWED IMPROVEMENTS BY THE COALITION AND OTHERS SINCE HURRICANES KATRINA AND RITA, AND IDENTIFIED A FRAMEWORK FOR NEW COLLECTIVE ACTION IN THE AREAS OF RESEARCH/DATA, EDUCATION/TRAINING, LOCAL CAPACITY-BUILDING AND INTEGRATION WITH EXISTING EMERGENCY SYSTEMS, AND ARTS PHILANTHROPY POLICY AND ADVOCACY.

CERF+, BESIDES PLAYING A LEADERSHIP ROLE IN THE COALITION'S DEVELOPMENT AND OPERATION THROUGH ITS PIONEERING PHASE, HAS SERVED AS THE PROJECT MANAGER FOR SEVERAL NEW DISASTER PLANNING/RECOVERY RESOURCES. MOST NOTABLY, "THE ESSENTIAL GUIDELINES FOR ARTS RESPONDERS ORGANIZING IN THE MIDST OF DISASTER," PRODUCED IN 2011, WHICH HAS BEEN ACTIVELY USED AS A "JUST IN TIME" ARTS EMERGENCY MANAGEMENT PLAYBOOK AFTER A NUMBER OF RECENT MAJOR DISASTERS. CURRENTLY, CERF+ IS OVERSEEING THE REVISION AND ADAPTATION OF THE ARTS RESPONDER HANDBOOK-A DRAFT MANUAL WE DEVELOPED TO GUIDE ADVANCE DISASTER PLANNING-INTO A STREAMLINED DIGITAL PUBLICATION. TITLED "THE CULTURAL PLACEKEEPING GUIDE," IT IS GEARED TO COMMUNITIES OF ALL SIZES AND GEOGRAPHIES FROM A RURAL ARTISTS' COLLECTIVE TO AN URBAN NEIGHBORHOOD, CULTURAL DISTRICT, OR COUNTY AND WILL BE AVAILABLE IN SPRING 2017.

HAVING MET THE OBJECTIVE OF AN "EVOLVED COALITION" WITH A FORMAL GOVERNANCE STRUCTURE, CERF+ HAS COMPLETED OUR CO-CHAIR TOUR OF DUTY, BUT WILL CONTINUE AS AN ACTIVE STEERING COMMITTEE MEMBER.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
DESCRIPTION: THE CERF+ FINANCE/AUDIT COMMITTEE REVIEWS THE 990 PRIOR TO FILLING. THIS YEAR THE FINANCE COMMITTEE HAS EMPOWERED THE FINANCE/AUDIT

Name of the organization

Employer identification number

CRAFT EMERGENCY RELIEF FUND, INC.

13-3273980

COMMITTEE CHAIR/TREASURER TO APPROVE THE FORM 990 PRIOR TO FILING. THE FINANCE/AUDIT COMMITTEE THEN SHARES THE 990 WITH THE BOARD AT THE TIME IT IS FILED.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY AT CERF+'S ANNUAL BOARD MEETING IN THE FALL (BEGINNING OF THE FISCAL YEAR) EACH BOARD MEMBER FILLS OUT AND SIGNS A BOD CONFLICT OF INTEREST POLICY - DISCLOSURE FORM. CERF+'S BOOKKEEPER/OFFICE MANAGER DOES FOLLOW-UP REMINDERS TILL THEY ARE ALL SIGNED AND SUBMITTED.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL AS PART OF CERF+'S GOVERNANCE POLICY RESPONSIBILITY FOR ED'S COMPENSATION IS DETERMINED BY THE BOARD. REMUNERATION OF THE EXECUTIVE DIRECTOR IS DECIDED ANNUALLY AFTER A REVIEW OF MONITORING REPORTS.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS THE DIRECTOR OF ADMINISTRATION RESEARCHES FACTORS RELEVANT TO STAFF COMPENSATION AND THE EXECUTIVE DIRECTOR DETERMINES THE SALARIES.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION GOVERNING DOCUMENTS ARE AVAILABLE ON WEBSITE AND UPON REQUEST.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

COST OF GOODS SOLD \$ 48

COST OF GOODS SOLD \$ -48

Form 990	Two Year Comparison Report	2014 & 2015
For calendar year 2015, or tax year beginning 10/01/15 , ending 09/30/16		

Name: **CRAFT EMERGENCY RELIEF FUND, INC.** Taxpayer Identification Number: **13-3273980**

		2014	2015	Differences
Revenue	1. Contributions, gifts, grants	964,414	560,491	-403,923
	2. Membership dues and assessments			
	3. Government contributions and grants		15,000	15,000
	4. Program service revenue			
	5. Investment income	20,173	24,969	4,796
	6. Proceeds from tax exempt bonds			
	7. Net gain or (loss) from sale of assets other than inventory	19,173	-2,495	-21,668
	8. Net income or (loss) from fundraising events			
	9. Net income or (loss) from gaming			
	10. Net gain or (loss) on sales of inventory	277	2,305	2,028
	11. Other revenue			
	12. Total revenue. Add lines 1 through 11	1,004,037	600,270	-403,767
Expenses	13. Grants and similar amounts paid	130,650	127,300	-3,350
	14. Benefits paid to or for members			
	15. Compensation of officers, directors, trustees, etc.	110,152	115,850	5,698
	16. Salaries, other compensation, and employee benefits	409,151	446,082	36,931
	17. Professional fundraising fees			
	18. Other professional fees	41,905	48,321	6,416
	19. Occupancy, rent, utilities, and maintenance	25,895	25,221	-674
	20. Depreciation and Depletion	3,198	1,973	-1,225
	21. Other expenses	143,622	157,764	14,142
	22. Total expenses. Add lines 13 through 21	864,573	922,511	57,938
	23. Excess or (Deficit). Subtract line 22 from line 12	139,464	-322,241	-461,705
Other Information	24. Total exempt revenue	1,004,037	600,270	-403,767
	25. Total unrelated revenue			
	26. Total excludable revenue	39,623	24,779	-14,844
	27. Total assets	1,668,475	1,415,208	-253,267
	28. Total liabilities	56,934	55,688	-1,246
	29. Retained earnings	1,611,541	1,359,520	-252,021
	30. Number of voting members of governing body	14	19	
	31. Number of independent voting members of governing body	14	19	
	32. Number of employees	9	8	
	33. Number of volunteers	282	62	

Form **990** | **Tax Return History** | **2015**

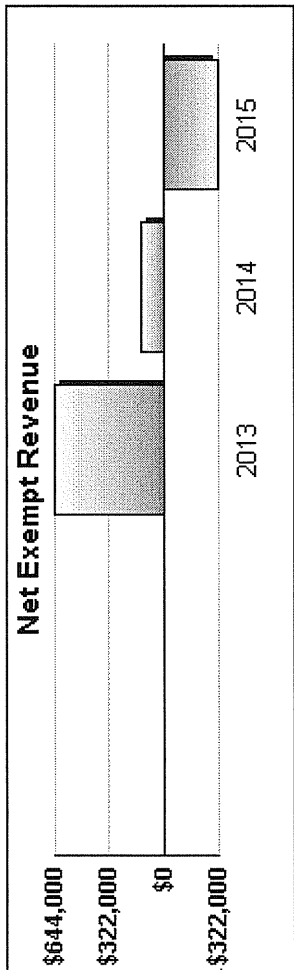
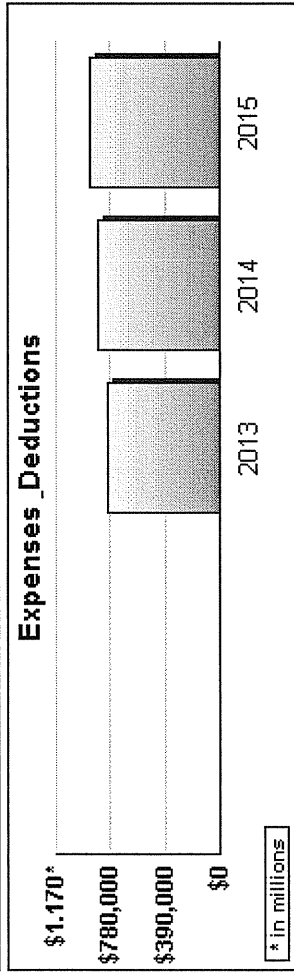
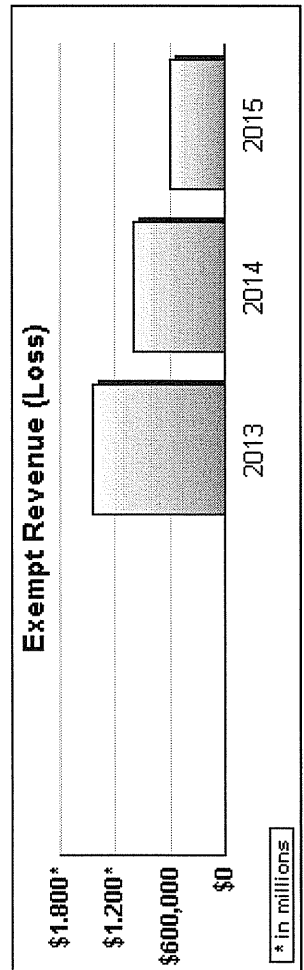
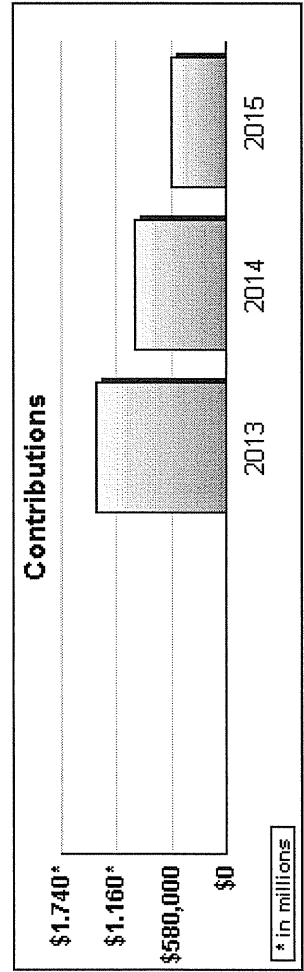
Name: **CRAFT EMERGENCY RELIEF FUND, INC.** Employer Identification Number: **13-3273980**

	2011	2012	2013	2014	2015	2016
Contributions, gifts, grants			1,379,002	964,414	575,491	
Membership dues						
Program service revenue						
Capital gain or loss			49,016	19,173	-2,495	
Investment income			16,693	20,173	24,969	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue			-2,667	277	2,305	
Total revenue			1,442,044	1,004,037	600,270	
Grants and similar amounts paid			132,248	130,650	127,300	
Benefits paid to or for members						
Compensation of officers, etc.			98,011	110,152	115,850	
Other compensation			336,006	409,151	446,082	
Professional fees			77,587	41,905	48,321	
Occupancy costs			26,094	25,895	25,221	
Depreciation and depletion			2,212	3,198	1,973	
Other expenses			125,779	143,622	157,764	
Total expenses			797,937	864,573	922,511	
Excess or (Deficit)			644,107	139,464	-322,241	
Total exempt revenue			1,442,044	1,004,037	600,270	
Total unrelated revenue						
Total excludable revenue			63,042	39,623	24,779	
Total Assets			1,582,296	1,668,475	1,415,208	
Total Liabilities			43,260	56,934	55,688	
Net Fund Balances			1,539,036	1,611,541	1,359,520	

Form **990T** | **Tax Return History** | **2015**

Name: **CRAFT EMERGENCY RELIEF FUND, INC.** | Employer Identification Number: **13-3273980**

	2011	2012	2013	2014	2015	2016
Business activity profit/loss						
Capital gains/losses						
Partner and S Corp gain/loss						
Rental income*						
Debt-financed income*						
Controlled organizations income/interest*						
Investment income, specific organizations*						
Exploited exempt activity income*						
Other income						
Total trade or business income.						
Compensation of officers, ect.						
Other salaries and wages						
Repairs and maintenance						
Bad debts						
Interest						
Taxes and licenses						
Charitable contributions						
Depreciation and Depletion						
Deferred compensation plans						
Employee benefit programs						

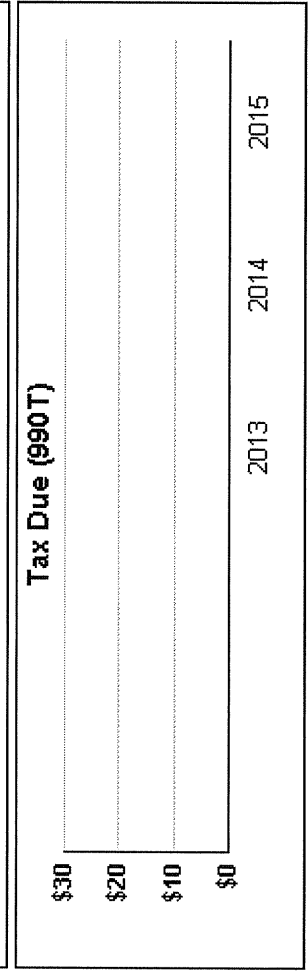
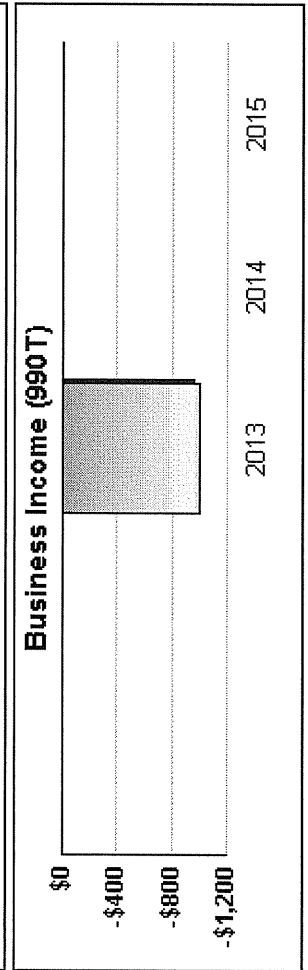
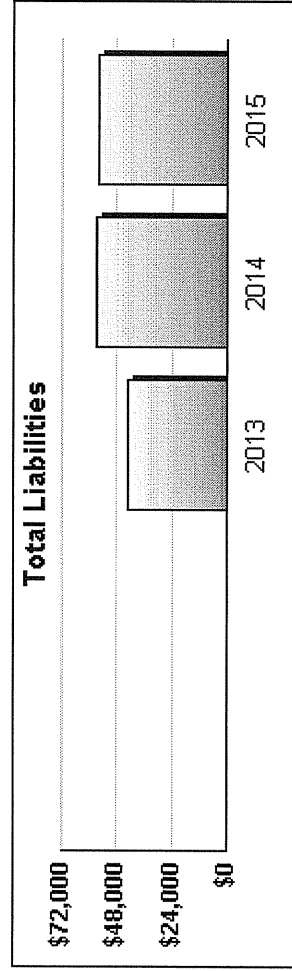
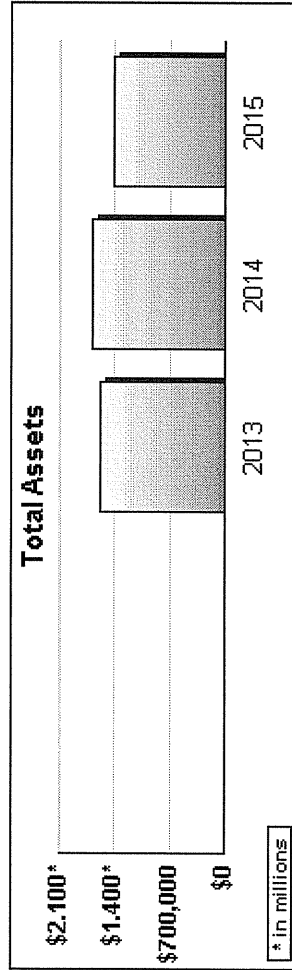


Form **990T** Tax Return History **2015**

Name: CRAFT EMERGENCY RELIEF FUND, INC. Employer Identification Number: 13-3273980

	2011	2012	2013	2014	2015	2016
Other deductions						
Net operating loss deduction						
Specific deduction			1,000			
Income after expense and deductions			-1,000			
Income tax (corporate or trust)						
Other taxes						
Total taxes						
General business credit						
Other credits						
Net tax after credits						
Estimated tax payments						
Other payments						
Balance due/Overpayment						

* Income shown net of expenses



Federal Statements

Taxable Interest on Investments

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
	\$ 24,969			14		
TOTAL	<u>\$ 24,969</u>					

CERF CRAFT EMERGENCY RELIEF FUND, INC.
13-3273980
FYE: 9/30/2016

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Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
CONTRACT SERVICES	\$ 27,185	\$ 26,385	\$ 219	\$ 581
TOTAL	\$ 27,185	\$ 26,385	\$ 219	\$ 581

CERF CRAFT EMERGENCY RELIEF FUND, INC.
13-3273980
FYE: 9/30/2016

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Federal Statements

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

Description	Amount
TOTAL	\$ 24,969
	\$ 24,969