

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

2016

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 2016 calendar year, or tax year beginning 10/01/16, and ending 09/30/17

B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending. C Name of organization: CRAFT EMERGENCY RELIEF FUND, INC. D Employer identification number: \*\* - \*\*\* 3980. E Telephone number: 802-229-2306. F Name and address of principal officer: CORNELIA CAREY, 535 STONE CUTTERS WAY, SUITE 202, MONTPELIER VT 05602. G Gross receipts \$: 1,308,080. H(a) Is this a group return for subordinates? Yes No. H(b) Are all subordinates included? Yes No. I Tax-exempt status: 501(c)(3). J Website: WWW.CERFPLUS.ORG. K Form of organization: Corporation. L Year of formation: 1985. M State of legal domicile: NY.

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1 Briefly describe the organization's mission... SEE SCHEDULE O. 2 Check this box if the organization discontinued its operations... 3 Number of voting members... 4 Number of independent voting members... 5 Total number of individuals employed... 6 Total number of volunteers... 7a Total unrelated business revenue... 7b Net unrelated business taxable income... 8 Contributions and grants... 9 Program service revenue... 10 Investment income... 11 Other revenue... 12 Total revenue... 13 Grants and similar amounts paid... 14 Benefits paid to or for members... 15 Salaries, other compensation... 16a Professional fundraising fees... 16b Total fundraising expenses... 17 Other expenses... 18 Total expenses... 19 Revenue less expenses... 20 Total assets... 21 Total liabilities... 22 Net assets or fund balances.

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, EXECUTIVE DIRECTOR, Date: 3/27/18. Paid Preparer Use Only: Print/Type preparer's name: RANDALL L. SARGENT, CPA, Preparer's signature: Randall L. Sargent, CPA, Date: 3/26/18, Check self-employed: Yes, PTIN: \*\*\*\*\*. Firm's name: JMM & ASSOCIATES, PC, Firm's EIN: \*\* - \*\*\* 0081, 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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes  No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes  No

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 760,915 including grants of \$ 225,137 ) (Revenue \$ 23,313 )  
IN FISCAL YEAR 2017, CERF+ FOCUSED ON THREE MAIN GOALS: (1) ENHANCING AND EXPANDING OUR EMERGENCY PREPAREDNESS AND CAREER PROTECTION RESOURCES AND TECHNICAL ASSISTANCE; (2) EXPANDING OUR OUTREACH TO INCREASE THE NUMBER OF ARTISTS SERVED THROUGH OUR EMERGENCY RELIEF AND RESPONSE PROGRAM; AND (3) SUSTAINING OUR PUBLIC POLICY ADVOCACY AND RESEARCH ABOUT TRENDS WITHIN THE CRAFT FIELD. IN ADDITION TO OUR OWN PROGRAMS AND SERVICES, WE PLAYED A NATIONAL LEADERSHIP ROLE IN THE EMERGING MOVEMENT WITHIN THE ARTS SECTOR TO IMPROVE THE OVERALL SAFETY NET BEFORE, DURING AND AFTER DISASTERS FOR ARTISTS AND ARTS 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 ▶ 760,915

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**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

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**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 line numbers (1a-14b), descriptions of questions, and Yes/No checkboxes. Includes data for lines 1a (40), 1b (0), 2a (11), 2b (X), 3a (X), 4a (X), 5a (X), 5b (X), 6a (X), 7a (X), 7c (X), 7e (X), 7f (X), 7g (X), 7h (X), 9a, 9b, 10a, 10b, 11a, 11b, 12a, 12b, 13a, 13b, 13c, 14a (X), 14b.

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 [X]

Section A. Governing Body and Management

Table with columns 1a, 1b, 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9 and Yes/No columns. Contains questions about voting members, family relationships, and governance procedures.

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

Table with columns 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b and Yes/No columns. Contains questions about local chapters, conflict of interest policies, whistleblower policies, and compensation.

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.
[X] Own website [X] Another's website [X] 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) POLLY ALLEN	4.00									
DIRECTOR	0.00	X					0	0	0	
(2) TANYA AGUINIGA	4.00									
DIRECTOR	0.00	X					0	0	0	
(3) POLLY ALLEN	4.00									
DIRECTOR	0.00	X					0	0	0	
(4) BARRY BERGEY	4.00									
DIRECTOR	0.00	X					0	0	0	
(5) EDDIE BERNARD	6.00									
CHAIR	0.00	X		X			0	0	0	
(6) MICHELLE BUFANO	4.00									
DIRECTOR	0.00	X					0	0	0	
(7) DON FRIEDLICH	4.00									
DIRECTOR	0.00	X					0	0	0	
(8) JOHN HAWORTH	4.00									
DIRECTOR	0.00	X					0	0	0	
(9) CINDA HOLT	4.00									
DIRECTOR	0.00	X					0	0	0	
(10) ANDE MARICICH	4.00									
DIRECTOR	0.00	X					0	0	0	
(11) REED MCMILLAN	4.00									
TREASURER/VICE CHAIR	0.00	X		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) JULES POLK	4.00									
SECRETARY	0.00	X		X			0	0	0	
(13) SYLVIE ROSENTHAL	4.00									
DIRECTOR	0.00	X					0	0	0	
(14) LOIS RUSSELL	4.00									
DIRECTOR	0.00	X					0	0	0	
(15) CASEY GILL SUMMAR	4.00									
DIRECTOR	0.00	X					0	0	0	
(16) OLIVIA SURRATT	4.00									
DIRECTOR	0.00	X					0	0	0	
(17) JULIE GORDON DALGLEISH	4.00									
DIRECTOR	0.00	X					0	0	0	
(18) JUDY GORDON	4.00									
DIRECTOR	0.00	X					0	0	0	
(19) AZIM MAZAGONWALLA	4.00									
DIRECTOR	0.00	X					0	0	0	
<b>1b Sub-total</b>										
<b>c Total from continuation sheets to Part VII, Section A</b>							92,814		22,071	
<b>d Total (add lines 1b and 1c)</b>							92,814		22,071	

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**

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**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) CHRISTINE O. ROBB ..... DIRECTOR	4.00 ..... 0.00	X						0	0	0
(21) FELICIA SHAW ..... DIRECTOR	4.00 ..... 0.00	X						0	0	0
(22) CORNELIA CAREY ..... EXECUTIVE DIRECTOR	40.00 ..... 0.00			X				92,814	0	22,071
<b>1b Sub-total</b> .....								92,814		22,071
<b>c Total from continuation sheets to Part VII, Section A</b> .....										
<b>d Total (add lines 1b and 1c)</b> .....										

**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
<b>3</b> 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		
<b>4</b> 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		
<b>5</b> 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		

**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)				
	1f	All other contributions, gifts, grants, and similar amounts not included above	1,115,752			
	g	Noncash contributions included in lines 1a-1f: \$	5,083			
<b>h Total. Add lines 1a-1f</b>			<b>1,115,752</b>			
Program Service Revenue	2a	PROGRAM SERVICE REVENUE	23,313	23,313		
	b					
	c					
	d					
	e					
	f	All other program service revenue				
	g	<b>Total. Add lines 2a-2f</b>	<b>23,313</b>			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	18,722			18,722
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	6a	(i) Real				
		(ii) Personal				
	b	Less: rental exps.				
	c	Rental inc. or (loss)				
	d	<b>Net rental income or (loss)</b>				
	7a	(i) Securities	139,646			
		(ii) Other				
	b	Less: cost or other basis & sales exps.	123,217			
	c	Gain or (loss)	16,429			
	d	<b>Net gain or (loss)</b>	<b>16,429</b>	<b>16,429</b>		
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18				
	b	Less: direct expenses				
c	<b>Net income or (loss) from fundraising events</b>					
9a	Gross income from gaming activities. See Part IV, line 19					
b	Less: direct expenses					
c	<b>Net income or (loss) from gaming activities</b>					
10a	a	Gross sales of inventory, less returns and allowances	10,647			
	b	Less: cost of goods sold	5,595			
c	<b>Net income or (loss) from sales of inventory</b>	<b>5,052</b>			<b>5,052</b>	
<b>11a</b> Miscellaneous Revenue						
b						
c						
d All other revenue						
<b>e Total. Add lines 11a-11d</b>						
<b>12 Total revenue. See instructions.</b>			<b>1,179,268</b>	<b>39,742</b>	<b>0</b>	<b>23,774</b>

**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	225,137	225,137		
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	103,391	82,092	15,612	5,687
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	287,521	205,365	27,733	54,423
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	7,491	5,440	658	1,393
9 Other employee benefits	67,296	50,116	7,078	10,102
10 Payroll taxes	30,707	22,521	3,339	4,847
11 Fees for services (non-employees):				
a Management				
b Legal	525		525	
c Accounting	9,700		9,700	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	8,925		8,925	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	68,180	61,809	631	5,740
12 Advertising and promotion	7,806	6,151	170	1,485
13 Office expenses	43,986	22,596	1,736	19,654
14 Information technology	27,787	22,268	3,831	1,688
15 Royalties				
16 Occupancy	28,132	20,245	3,097	4,790
17 Travel	39,968	33,801	336	5,831
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,556	1,427	38	91
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	6,303		6,303	
23 Insurance	3,187		3,187	
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 BANK AND CREDIT CARD FEES	3,055	145	1,681	1,229
b EVENTS/ DONOR CULTIVATION	2,434			2,434
c BAD DEBT EXPENSE	1,802	1,802		
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	974,889	760,915	94,580	119,394
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	32,988	1	61,041
	2	Savings and temporary cash investments		2	50,699
	3	Pledges and grants receivable, net	321,836	3	503,037
	4	Accounts receivable, net		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	61,418	7	47,382
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	10,408	9	6,847
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 33,341		
	b	Less: accumulated depreciation	10b 11,738		
	11	Investments—publicly traded securities	965,062	11	991,119
	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	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	1,415,208	16	1,681,728	
Liabilities	17	Accounts payable and accrued expenses	54,088	17	48,075
	18	Grants payable		18	
	19	Deferred revenue	1,600	19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to 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	<b>Total liabilities.</b> Add lines 17 through 25	55,688	26	48,075
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	1,034,208	27	1,020,629
	28	Temporarily restricted net assets	325,312	28	613,024
	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	<b>Total net assets or fund balances</b>	1,359,520	33	1,633,653	
34	<b>Total liabilities and net assets/fund balances</b>	1,415,208	34	1,681,728	

**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	1,179,268
2	Total expenses (must equal Part IX, column (A), line 25)	2	974,889
3	Revenue less expenses. Subtract line 2 from line 1	3	204,379
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,359,520
5	Net unrealized gains (losses) on investments	5	69,754
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	1,633,653

**Part XII Financial Statements and Reporting**

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

1 Accounting method used to prepare the Form 990:  Cash  Accrual  Other

If the organization changed its method of accounting from a prior year or checked "Other," explain 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:

Separate basis  Consolidated basis  Both consolidated and separate basis

b Were the organization's financial statements audited by an independent accountant?

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:

Separate basis  Consolidated basis  Both consolidated and separate basis

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

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

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

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

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Public Charity Status and Public Support**

OMB No. 1545-0047

**2016**

Open to Public Inspection

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](http://www.irs.gov/form990).

Department of the Treasury  
Internal Revenue Service

Name of the organization

CRAFT EMERGENCY RELIEF FUND, INC.

Employer identification number

\*\*-\*\*\*3980

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2  A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: .....
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9  An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: .....
- 10  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization 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 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

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) 2012, (b) 2013, (c) 2014, (d) 2015, (e) 2016, (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) 2012, (b) 2013, (c) 2014, (d) 2015, (e) 2016, (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) 12
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

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f)) 14 %
15 Public support percentage from 2015 Schedule A, Part II, line 14 15 %
16a 33 1/3% support test—2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
b 33 1/3% support test—2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
17a 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
b 10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**  
 (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.  
 If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	694,756	1,379,002	964,414	575,491	1,115,752	4,729,415
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					23,313	23,313
3 Gross receipts from activities that are not an unrelated trade or business under section 513	16,077	5,389	2,450	2,353	10,647	36,916
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	710,833	1,384,391	966,864	577,844	1,149,712	4,789,644
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	210,000	1,010,000	726,076	409,726	668,373	3,024,175
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	210,000	1,010,000	726,076	409,726	668,373	3,024,175
8 Public support. (Subtract line 7c from line 6.)						1,765,469

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6	710,833	1,384,391	966,864	577,844	1,149,712	4,789,644
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	18,230	16,693	20,173	24,969	18,722	98,787
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	18,230	16,693	20,173	24,969	18,722	98,787
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.)	729,063	1,401,084	987,037	602,813	1,168,434	4,888,431

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 2016 (line 8, column (f) divided by line 13, column (f))	15	36.12 %
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	42.37 %

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	2 %
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	2 %

- 19a 33 1/3% support tests—2016. 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—2015. 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 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (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).</i>		
b <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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? Row 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?

Section E. Type III Functionally-Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer (a) and (b) below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer (a) and (b) below. Sub-rows a, b.

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (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	<b>Total</b> (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	<b>Minimum Asset Amount</b> (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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> 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	<b>Total annual distributions.</b> 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 2016 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-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required-explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
c	From 2013			
d	From 2014			
e	From 2015			
f	<b>Total of lines 3a through e</b>			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2017. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a				
b	Excess from 2013			
c	Excess from 2014			
d	Excess from 2015			
e	Excess from 2016			



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.

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

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

CRAFT EMERGENCY RELIEF FUND, INC.

\*\*-\*\*\*3980

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?, 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?

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

Table with 2 columns: 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. (a) Total number of conservation easements, (b) Total acreage restricted by conservation easements, (c) Number of conservation easements on a certified historic structure included in (a), (d) 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?, 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)?, 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: Revenue, Assets. 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 .....		14,841	11,738	3,103
e Other .....		18,500		18,500
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				21,603

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.

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation: Cost or end-of-year market value. Rows include (1) Financial derivatives, (2) Closely-held equity interests, (3) Other (A-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.

Table with 3 columns: (a) Description of investment, (b) Book value, (c) Method of valuation: Cost or end-of-year market value. Rows (1) through (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.

Table with 2 columns: (a) Description, (b) Book value. Rows (1) through (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.

Table with 2 columns: (a) Description of liability, (b) Book value. Row 1 includes (1) Federal income taxes, (2) through (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 [X]

**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	1,320,530
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	69,754	
b	Donated services and use of facilities	2b	65,913	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	5,595	
e	Add lines 2a through 2d	2e		141,262
3	Subtract line 2e from line 1	3		1,179,268
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		1,179,268

**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	1,046,397
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	65,913	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	5,595	
e	Add lines 2a through 2d	2e		71,508
3	Subtract line 2e from line 1	3		974,889
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		974,889

**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 \$ 5,595

**PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER**

COST OF GOODS SOLD \$ 5,595



**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

**2016**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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](http://www.irs.gov/form990).

Name of the organization

CRAFT EMERGENCY RELIEF FUND, INC.

Employer identification number

\*\*-\*\*\*3980

**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.

1	(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 noncash assistance	(h) Purpose of grant or assistance
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								

FOR PUBLIC INSPECTION

- 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

Schedule I (Form 990) (2016) CRAFT EMERGENCY RELIEF FUND, INC. \*\*--\*\*3980

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 EMERGENCY RELIEF	52	225,137			
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART IV - ADDITIONAL INFORMATION

THE ORGANIZATION HAS LONG-ESTABLISHED APPLICATION AND REVIEW PROCEDURES FOR INDIVIDUALS APPLYING FOR EMERGENCY GRANTS.

FOR PUBLIC INSPECTION

**SCHEDULE O**  
 (Form 990 or 990-EZ)

**Supplemental Information to Form 990 or 990-EZ**

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

OMB No. 1545-0047

**2016**
**Open to Public  
 Inspection**

 Department of the Treasury  
 Internal Revenue Service

▶ Attach to Form 990 or 990-EZ.

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

Name of the organization

Employer identification number

CRAFT EMERGENCY RELIEF FUND, INC.

\*\*-\*\*\*3980

## FORM 990 - ORGANIZATION'S MISSION

CRAFT EMERGENCY RELIEF FUND, INC. (CERF+ -- THE ARTISTS' SAFETY NET), IS A NATIONAL ARTIST SERVICE ORGANIZATION WHOSE MISSION IS TO SERVE ARTISTS WHO WORK IN CRAFT DISCIPLINES BY PROVIDING A SAFETY NET TO SUPPORT STRONG AND SUSTAINABLE CAREERS. CERF+'S CORE SERVICES ARE EDUCATION PROGRAMS, ADVOCACY, NETWORK BUILDING AND EMERGENCY RELIEF.

## FORM 990, PART III, LINE 2

## "GET READY" GRANTS

THIS YEAR WE CREATED A GRANT PROGRAM TO FUND ARTIST PREPAREDNESS INITIATIVES TO HELP SAFEGUARD THEIR STUDIOS, PROTECT THEIR LIVELIHOODS AND PREPARE FOR EMERGENCIES. TWENTY GRANTS WERE AWARDED TO 18 INDIVIDUAL ARTISTS (UP TO \$500) AND TWO GROUPS OF ARTISTS (UP TO \$1,500) TOWARDS THE PURCHASE OF GOODS OR SERVICES THAT INCLUDED DUST COLLECTION AND VENTILATION SYSTEMS, FIRE EXTINGUISHERS, HAZARDOUS MATERIAL CABINETS, NON-TOXIC ART MATERIALS, SECURITY SYSTEMS, HARD DRIVES, ESTATE AND LEGACY PLANNING, TO ENSURE SAFE WORKING ENVIRONMENTS IN THEIR STUDIOS. AS PART OF THE GRANT, ARTISTS WILL SHARE WHAT THEY'VE LEARNED THROUGH VIDEOS, BLOGS, WORKSHOPS AND SOCIAL MEDIA TO INSPIRE OTHER ARTISTS TO "GET READY."

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

AS WE BOLSTERED OUR OUTREACH EFFORTS ACROSS A VARIETY OF PLATFORMS, MEDIA AND CONSTITUENTS, WE ACHIEVED A 5-YEAR HIGH OF 2,018 ARTISTS SERVED IN FY17. OUR MONTHLY ENEWS AVERAGED 11,564 RECIPIENTS PER ISSUE. OUR INCREASED

Schedule O (Form 990 or 990-EZ) (2016)

Page 2

Name of the organization

Employer identification number

CRAFT EMERGENCY RELIEF FUND, INC.

\*\*-\*\*\*3980

ONLINE SOCIAL MEDIA ENGAGEMENT RESULTED IN 717 TWITTER FOLLOWERS, 5,323 FACEBOOK FOLLOWERS, 559 INSTAGRAM FOLLOWERS AND 3,635 YOUTUBE VIEWS. NEARLY 40,000 USERS ACCESSED OUR WEBSITE IN FY17.

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. THIS YEAR, 52 ARTISTS RECEIVED DIRECT EMERGENCY RELIEF GRANTS. THESE ARTISTS WERE IMPACTED BY FLOODS, HOME AND STUDIO FIRES, HURRICANES, INJURIES AND ILLNESSES RECEIVING A TOTAL OF \$225,570 IN EMERGENCY AID (\$214,570 IN GRANTS AND \$11,000 IN NO-INTEREST LOANS) AND \$14,031 WORTH OF GIFTS-IN-KIND (DONATIONS OF EQUIPMENT, MATERIALS, BOOTH WAIVER FEES, ETC.), FOR A GRAND TOTAL OF \$239,601 IN AID. OUR PERSONALIZED INDIVIDUAL COUNSELING AND REFERRALS HELPED 466 ARTISTS RESPOND TO THEIR EMERGENCY IN A TIME OF CRISIS. DUE TO THE LARGE GEOGRAPHIC AREAS AFFECTED BY HURRICANES HARVEY, IRMA, AND MARIA IN LATE SUMMER, WE EXPERIENCED A RECORD-SETTING NUMBER OF ARTISTS (91) SEEKING OUR HELP IN SEPTEMBER-TWICE THE NUMBER OF INQUIRIES IN THE IMMEDIATE AFTERMATH OF HURRICANE SANDY.

IN MARCH 2017, WE LAUNCHED A BENEFICIARY SATISFACTION SURVEY THAT ASKS OUR EMERGENCY RELIEF GRANTEEES TO RATE THEIR EXPERIENCE IN A NUMBER OF KEY AREAS 30 DAYS AFTER THEY RECEIVE ASSISTANCE. 100% SAID IT WAS VERY EASY TO FIND INFORMATION ABOUT CERF+ ASSISTANCE; 95% SAID OUR RESPONSE WAS TIMELY AND 100% SAID WE ANSWERED THEIR QUESTIONS VERY WELL; 95% SAID THAT ASSISTANCE RECEIVED WAS WHEN THEY NEEDED IT THE MOST; 96% ARE DEFINITELY LIKELY TO

## FOR PUBLIC INSPECTION

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Schedule O (Form 990 or 990-EZ) (2016)

Page 2

Name of the organization

Employer identification number

CRAFT EMERGENCY RELIEF FUND, INC.

\*\*-\*\*\*3980

VERY LIKELY TO RECOMMEND CERF+ AND 100% RATED CERF+ AS "EXCELLENT".

## EMERGENCY RESPONSE

CERF+ MAINTAINS AN ACTIVE LIST OF INDIVIDUALS, ORGANIZATIONS, AND ARTS BUSINESSES THAT RECEIVE EMAIL ALERTS BEFORE, DURING AND AFTER AN EMERGENCY. IN FY17, MORE THAN 13,000 INDIVIDUALS AND ORGANIZATIONS RECEIVED 28 DISASTER RESPONSES FROM CERF+ WITH CRITICAL PREPAREDNESS AND RECOVERY INFORMATION, RESOURCES AND SUPPORT. NOTICES WERE SENT OUT THIS YEAR FOR THE FLOODS IN LOUISIANA, TEXAS, SOUTH CAROLINA, MARYLAND, ARKANSAS, MISSISSIPPI, AND WEST VIRGINIA; HURRICANES HARVEY, IRMA AND MARIA.

## "GET READY" GRANTS

CERF+ LAUNCHED A NEW "GET READY" GRANT PROGRAM TO SUPPORT PREPAREDNESS EFFORTS THAT WILL HELP ARTISTS WORKING IN CRAFT DISCIPLINES SAFEGUARD THEIR STUDIOS, PROTECT THEIR LIVELIHOODS AND PREPARE FOR EMERGENCIES. TWENTY GRANTS WERE AWARDED TO 18 INDIVIDUAL ARTISTS (UP TO \$500) AND TWO GROUPS OF ARTISTS (UP TO \$1,500) TOWARDS THE PURCHASE OF GOODS OR SERVICES. PROJECTS INCLUDED PURCHASING AND INSTALLING DUST COLLECTION AND VENTILATION SYSTEMS, FIRE EXTINGUISHERS, HAZARDOUS MATERIAL CABINETS, NON-TOXIC ART MATERIALS, SECURITY SYSTEMS, HARD DRIVES, ESTATE AND LEGACY PLANNING. AS PART OF THE GRANT, ARTISTS SHARE WHAT THEY HAVE LEARNED THROUGH VIDEOS, BLOGS, WORKSHOPS AND SOCIAL MEDIA TO INSPIRE OTHER ARTISTS TO "GET READY".

## CERF+ WEBSITE

CERF+ LAUNCHED ITS NEW WEBSITE, WWW.CERFPLUS.ORG, IN FEBRUARY 2017. WE MERGED AND UPGRADED THE CERF+ AND STUDIO PROTECTOR WEBSITES INTO ONE, WHICH IS FULLY RESPONSIVE ON ALL DEVICES. OUR NEW WEBSITE FEATURES INTERACTIVE,

PAGE 2 OF 8

Schedule O (Form 990 or 990-EZ) (2016)

## FOR PUBLIC INSPECTION

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Schedule O (Form 990 or 990-EZ) (2016)

Page 2

Name of the organization

Employer identification number

CRAFT EMERGENCY RELIEF FUND, INC.

\*\*-\*\*\*3980

VISUAL INFORMATION AND CONTENT THAT MAKES IT EASY FOR VISITORS TO TAP INTO RESOURCES BEFORE, DURING AND AFTER AN EMERGENCY. CHECKLISTS HELP GAUGE PERSONAL AND PROFESSIONAL PREPAREDNESS AND ARTIST-TO-ARTIST STORIES PROVIDE INSIDER INFORMATION ON BEST PRACTICES FOR PLANNING AND RECOVERY, SUCH AS WORKING WITH VOLUNTEERS TO ARCHIVE ARTWORK OR TOXIC WASTE CLEANUP. WE PRODUCED THE FIRST OF A NEW COLLECTION OF SHORT DIY SAFETY DEMONSTRATION VIDEOS --"PROTECT YOURSELF! HEALTH AND SAFETY TIPS FOR A FLOODED STUDIO" AND PLAN TO CREATE MORE VIDEOS IN FY18.

IN THE IMMEDIATE PERIOD AFTER THE WEBSITE LAUNCH, TRAFFIC TO OUR SITE INCREASED 32%. FOLLOWING HURRICANES HARVEY, IRMA AND MARIA AND THE WILDFIRES IN NORTHERN CALIFORNIA, OUR SITE HAS BEEN THE GO-TO DESTINATION FOR ARTISTS SEEKING EMERGENCY RESOURCES. IT IS LISTED ON MANY STATE, REGIONAL AND NATIONAL ARTS AGENCIES' AND ORGANIZATIONS' WEBSITES AND BLOGS WITH DISASTER-SPECIFIC INFORMATION.

COVER YOUR A'S: ART, ASSETS + ARCHIVES

IN FY 2017, 28 ARTISTS, ART SCHOOL FACULTY, CAREER SERVICES STAFF AND ARTS ADMINISTRATORS PARTICIPATED IN OUR "COVER YOUR A'S: ART, ASSETS + ARCHIVES" A UNIQUE CURRICULUM THAT TRAINS ART SCHOOL FACULTY, ADMINISTRATORS AND CAREER SERVICES STAFF TO PREPARE STUDIO ART AND DESIGN STUDENTS TO CREATE RESILIENT CAREERS. THE CURRICULUM INCLUDES: MANAGING RISK, EMERGENCY READINESS, INSURANCE FOR ARTISTS, STUDIO SAFETY, DOCUMENTATION AND STORAGE AND SELF-CARE. THE CYA TRAININGS WERE HELD AT MARYLAND INSTITUTE COLLEGE OF ART AND THE SCHOOL OF VISUAL ARTS, NYC IN SEPTEMBER 2017. WE PARTNERED WITH WELLNESS FOR MAKERS TO INCLUDE ARTIST HEALTH AND WELLNESS AS PART OF OUR TRAINING CURRICULUM. WITH MORE THAN 40 INSTITUTIONS AND SERVICE

PAGE 3 OF 8

Schedule O (Form 990 or 990-EZ) (2016)

FOR PUBLIC INSPECTION

Name of the organization

Employer identification number

CRAFT EMERGENCY RELIEF FUND, INC.

\*\*-\*\*\*3980

ORGANIZATIONS NOW USING OUR TEACHING MODULES, MORE THAN 2,000 ARTISTS AND ART STUDENTS ARE RECEIVING CAREER PROTECTION INSTRUCTION AS PART OF THEIR PROFESSIONAL PRACTICE CLASSES OR PROFESSIONAL DEVELOPMENT IN ART SCHOOL COLLEGES AND UNIVERSITIES.

ARTIST HEALTH AND WELLNESS

WE CONDUCTED AN ARTIST HEALTH + WELLNESS SURVEY IN PARTNERSHIP WITH WELLNESS FOR MAKERS WITH OVER 300 ARTISTS PARTICIPATING TO GAIN BASELINE DATA ON HOW ARTISTS WORKING IN CRAFT DISCIPLINES ARE TAKING CARE OF THEIR BODIES IN SUPPORT OF THEIR STUDIO PRACTICES. THE SURVEY RESULTS HELPED US IDENTIFY CONTENT AREAS TO GENERATE A NEW SERIES OF 'HOW TO' VIDEOS FOR OUR WEBSITE AND TRAINING PROGRAMS TO BE LAUNCHED IN FY18.

READY + RESILIENT

CERF+ RECEIVED A GRANT FROM THE WESTFIELD INSURANCE FOUNDATION LEGACY OF CARING FUND TO PILOT OUR NEW "READY + RESILIENT" PROGRAM, A FREE ONE-DAY PROFESSIONAL DEVELOPMENT PROGRAM FOR STUDIO ARTISTS TO LEARN HOW TO STRENGTHEN THEIR CAREERS, PREPARE FOR EMERGENCIES AND GET BACK ON THEIR FEET IN COMMUNITIES THAT HAVE EXPERIENCED DISASTERS. READY + RESILIENT PROVIDES RESOURCES, TOOLS AND INFORMATION ON A VARIETY OF TOPICS CRITICAL TO BUILDING AND MAINTAINING A SUSTAINABLE CAREER. THE PROGRAM TAKES PLACE ON NOVEMBER 18, 2017 IN GATLINBURG, TENNESSEE -- A YEAR AFTER THE DEVASTATING 2016 WILDFIRES-- AND WILL BE REPLICATED FOR OTHER COMMUNITIES IMPACTED BY DISASTER.

ARTISTS LEGACY PLANNING

ARTIST LEGACY PLANNING IS A FAST EMERGING FIELD GIVEN THE AGING OF THE

Name of the organization

Employer identification number

CRAFT EMERGENCY RELIEF FUND, INC.

\*\*-\*\*\*3980

'BABY BOOM' GENERATION. TO COMPLEMENT A SPATE OF RECENT PUBLICATIONS AND RESOURCES ON ARTIST ESTATE PLANNING, CERF+ HAS PRODUCED A DRAFT WORKBOOK THAT FOCUSES ON THE TRANSFER/DISPOSITION OF AN ARTIST'S TOOLS, BOOKS AND OTHER NON-ARTISTIC ASSETS. BASED ON INTERVIEWS WITH MORE THAN 15 ARTISTS, CRAFTING YOUR LEGACY PROVIDES STRATEGIES FOR AND EXAMPLES TO ASSIST ARTISTS IN THINKING ABOUT THE BEST APPROACHES TO INVENTORY AND SAFEGUARD THEIR POSSESSIONS. THE WORKBOOK IS INTENDED FOR MID- AND LATE-CAREER ARTISTS, WHETHER THEY HAVE A MODEST WORKSPACE OR A SPRAWLING FACILITY, WHETHER THEIR STUDIO IS HOME-BASED OR OFF-SITE. THE ONLINE BOOKLET WILL BE AVAILABLE IN FALL 2017.

EDUCATION AND TRAINING WORKSHOPS

1,480 ARTISTS, ARTS PROFESSIONALS, AND REPRESENTATIVES OF GOVERNMENT AND COMMUNITY AGENCIES ATTENDED CERF+'S NATIONAL, REGIONAL AND LOCAL WORKSHOPS AND PRESENTATIONS IN FY17. THESE WERE PRESENTED AT/FOR THE BOULDER COUNTY ARTS ALLIANCE, CLACKAMAS COUNTY ARTS ALLIANCE, HAYSTACK ART SCHOOLS CONFERENCE, SCHOOL OF VISUAL ARTS, MARYLAND INSTITUTE COLLEGE OF ART, ST LOUIS VOLUNTEER LAWYERS AND ACCOUNTANTS FOR THE ARTS, NATIONAL COUNCIL OF EDUCATORS ON THE CERAMIC ARTS AND VERMONT VOLUNTEER AGENCIES ACTIVE IN DISASTERS.

ADVOCACY

TOOL REPLACEMENT BILL

IN PARTNERSHIP WITH AMERICANS FOR THE ARTS (AFTA), CERF+ PLANNED A SECOND ROUND OF OUR CONGRESSIONAL ADVOCACY CAMPAIGN TO CHANGE FEMA REGULATIONS ABOUT ARTISTS' AND OTHER SELF-EMPLOYED WORKERS' ELIGIBILITY FOR POST-

Schedule O (Form 990 or 990-EZ) (2016)

Page 2

Name of the organization

Employer identification number

CRAFT EMERGENCY RELIEF FUND, INC.

\*\*-\*\*\*3980

DISASTER TOOL REPLACEMENT. KICKED OFF ON ARTS ADVOCACY DAY IN SPRING 2017, THE CAMPAIGN INCLUDED MEETING WITH THE NEW STAFF OF THE HOUSE AND SENATE HOMELAND SECURITY AND GOVERNMENTAL AFFAIRS COMMITTEES THAT OVERSEE THE BUDGET AND OPERATION OF FEMA, AND ONGOING BRIEFINGS THROUGH THE SUMMER AND FALL. AS A RESULT OF THE DEVASTATING IMPACT OF HURRICANE HARVEY ON CREATIVE COMMUNITIES IN GREATER HOUSTON AND ALONG THE COAST, TEXANS FOR THE ARTS HAS JOINED IN OUR EFFORT TO GET A PROPOSAL TO CHANGE THE LANGUAGE OF THE STAFFORD ACT.

NATIONAL COALITION FOR ARTS' PREPAREDNESS AND EMERGENCY RESPONSE (NCAPER) BOTH THE INADEQUACY OF THE ORGANIZED SAFETY NET WITHIN THE ARTS AND CULTURE SECTOR AND THE LACK OF COORDINATION AMONG NATIONAL ARTS RESPONDERS SO APPARENT IN THE WAKE OF HURRICANE KATRINA WAS THE IMPETUS FOR CERF+ TO CATALYZE THE FORMATION OF THE NATIONAL COALITION FOR ARTS PREPAREDNESS AND EMERGENCY RESPONSE BACK IN 2006. 2017 WAS AN ACTIVE YEAR FOR OUR SMALL, INFORMAL TASK FORCE OF PUBLIC AGENCIES AND PRIVATE, NON-PROFITS THAT HAS WORKED TOGETHER EVER SINCE BOTH IN NON-EMERGENCY AND EMERGENCY PERIODS

IN JUNE, CERF+, IN COLLABORATION WITH SOUTH ARTS, RELEASED THE CULTURAL PLACEKEEPING GUIDE: HOW TO CREATE A LOCAL EMERGENCY ACTION NETWORK GUIDE. ENVISIONED AS BOTH THE FIRST ADVANCE DISASTER MOBILIZATION PLANNING TOOLKIT FOR THE ARTS AND CULTURE SECTOR AND THE FIRST OF A NEW SET OF ONLINE RESOURCES DEVELOPED BY THE COALITION, IT IS ALSO THE CULMINATION OF CERF+'S 10-YEAR LEADERSHIP OF THE COALITION. THE ONLINE GUIDE IS AVAILABLE ON THE AFTA WEBSITE.

THE TRIAD OF HURRICANES HARVEY, IRMA, AND MARIA INSTANTLY MOBILIZED THE

Schedule O (Form 990 or 990-EZ) (2016)

Page 2

Name of the organization

Employer identification number

CRAFT EMERGENCY RELIEF FUND, INC.

\*\*-\*\*\*3980

COALITION'S OWN DISASTER PLAN AND PROTOCOL BOTH FOR COORDINATION AND COMMUNICATION AMONG ITS MEMBERS AND FOR OUTREACH TO AFFECTED COMMUNITIES. WITHIN DAYS, THE COALITION SET UP WEEKLY CONFERENCE CALLS WITH STAFF OF ARTS AGENCIES, FOUNDATIONS, AND ORGANIZATIONS MANAGING ARTS RELIEF IN TEXAS AND FLORIDA. THE CALLS HELPED SUPPLEMENT OUR OWN INFORMATION-GATHERING ABOUT THE STORMS' IMPACT, AS WELL AS INTRODUCED US TO NEW LOCAL COLLEAGUES WHO ARE FOCUSING ON ARTISTS' ISSUES AS WE PLAN OUR ON-THE-GROUND RECOVERY SUPPORT.

HERITAGE EMERGENCY NATIONAL TASK FORCE (HENTF) IN RECOGNITION OF OUR LEADERSHIP IN STRENGTHENING ARTS EMERGENCY MANAGEMENT THROUGH COORDINATED ACTION, IN AUGUST CERF+, WAS INVITED TO JOIN HENTF, A CONSORTIA FORMED IN 1995 OF OVER 50+ FEDERAL AGENCIES AND NATIONAL SERVICE ORGANIZATIONS THAT SUPPORT DISASTER PREPAREDNESS, RESPONSE AND RECOVERY RELATED TO PROTECTION OF THE COUNTRY'S CULTURAL HERITAGE. IN CONTRAST TO THE COALITION'S FOCUS ON PROTECTING ARTISTS, ARTS ORGANIZATIONS, AND ARTS BUSINESSES BEFORE, DURING AND AFTER DISASTER, HENTF IS CONCERNED WITH THE FATE OF PHYSICAL OBJECTS, COLLECTIONS, BUILDINGS AND ARCHAEOLOGICAL SITES. BY JOINING THIS NETWORK, CERF+ IS ABLE TO CIRCULATE INFORMATION ABOUT OUR RESOURCES ON STUDIO CLEAN UP AND SALVAGE TO HENTF MEMBERS, AS WELL AS REPOST THEIR RELEVANT INFORMATION TO OUR CONSTITUENTS.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE CERF+ FINANCE/AUDIT COMMITTEE REVIEWS THE 990 PRIOR TO FILLING. THIS YEAR THE FINANCE COMMITTEE HAS EMPOWERED THE FINANCE/AUDIT COMMITTEE CHAIR/TREASURER TO APPROVE THE FORM 990 PRIOR TO FILING. THE FINANCE/ADUIT COMMITTEE THEN SHARES THE 990 WITH THE BOARD AT THE TIME IT

PAGE 7 OF 8

Schedule O (Form 990 or 990-EZ) (2016)

FOR PUBLIC INSPECTION

Name of the organization

Employer identification number

CRAFT EMERGENCY RELIEF FUND, INC.

\*\*-\*\*\*3980

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 E.D.'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	\$	5,595
COST OF GOODS SOLD	\$	-5,595

<b>Form 990</b>	<b>Two Year Comparison Report</b>	<b>2015 &amp; 2016</b>
For calendar year 2016, or tax year beginning 10/01/16, ending 09/30/17		

Name

Taxpayer Identification Number

CRAFT EMERGENCY RELIEF FUND, INC.

\*\*-\*\*\*3980

		2015	2016	Differences
<b>Revenue</b>	1. Contributions, gifts, grants	560,491	1,115,752	555,261
	2. Membership dues and assessments			
	3. Government contributions and grants	15,000		-15,000
	4. Program service revenue		23,313	23,313
	5. Investment income	24,969	18,722	-6,247
	6. Proceeds from tax exempt bonds			
	7. Net gain or (loss) from sale of assets other than inventory	-2,495	16,429	18,924
	8. Net income or (loss) from fundraising events			
	9. Net income or (loss) from gaming			
	10. Net gain or (loss) on sales of inventory	2,305	5,052	2,747
	11. Other revenue			
	12. <b>Total revenue.</b> Add lines 1 through 11	600,270	1,179,268	578,998
<b>Expenses</b>	13. Grants and similar amounts paid	127,300	225,137	97,837
	14. Benefits paid to or for members			
	15. Compensation of officers, directors, trustees, etc.	115,850	103,391	-12,459
	16. Salaries, other compensation, and employee benefits	446,082	393,015	-53,067
	17. Professional fundraising fees			
	18. Other professional fees	48,321	87,330	39,009
	19. Occupancy, rent, utilities, and maintenance	25,221	28,132	2,911
	20. Depreciation and Depletion	1,973	6,303	4,330
	21. Other expenses	157,764	131,581	-26,183
	22. <b>Total expenses.</b> Add lines 13 through 21	922,511	974,889	52,378
	23. <b>Excess or (Deficit).</b> Subtract line 22 from line 12	-322,241	204,379	526,620
<b>Other Information</b>	24. Total exempt revenue	600,270	1,179,268	578,998
	25. Total unrelated revenue			
	26. Total excludable revenue	24,779	63,516	38,737
	27. Total assets	1,415,208	1,681,728	266,520
	28. Total liabilities	55,688	48,075	-7,613
	29. Retained earnings	1,359,520	1,633,653	274,133
	30. Number of voting members of governing body	19	21	
31. Number of independent voting members of governing body	19	21		
32. Number of employees	8	11		
33. Number of volunteers	62	58		

Form **990****Tax Return History****2016**

Name **CRAFT EMERGENCY RELIEF FUND, INC.** Employer Identification Number **\*\* - \*\*\*3980**

	2012	2013	2014	2015	2016	2017
Contributions, gifts, grants		1,379,002	964,414	575,491	1,115,752	
Membership dues						
Program service revenue					23,313	
Capital gain or loss		49,016	19,173	-2,495	16,429	
Investment income		16,693	20,173	24,969	18,722	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue		-2,667	277	2,305	5,052	
<b>Total revenue</b>		<b>1,442,044</b>	<b>1,004,037</b>	<b>600,270</b>	<b>1,179,268</b>	
Grants and similar amounts paid		132,248	130,650	127,300	225,137	
Benefits paid to or for members						
Compensation of officers, etc.		98,011	110,152	115,850	103,391	
Other compensation		336,006	409,151	446,082	393,015	
Professional fees		77,587	41,905	48,321	87,330	
Occupancy costs		26,094	25,895	25,221	28,132	
Depreciation and depletion		2,212	3,198	1,973	6,303	
Other expenses		125,779	143,622	157,764	131,581	
<b>Total expenses</b>		<b>797,937</b>	<b>864,573</b>	<b>922,511</b>	<b>974,889</b>	
<b>Excess or (Deficit)</b>		<b>644,107</b>	<b>139,464</b>	<b>-322,241</b>	<b>204,379</b>	
<b>Total exempt revenue</b>		<b>1,442,044</b>	<b>1,004,037</b>	<b>600,270</b>	<b>1,179,268</b>	
Total unrelated revenue						
Total excludable revenue		63,042	39,623	24,779	63,516	
<b>Total Assets</b>		<b>1,582,296</b>	<b>1,668,475</b>	<b>1,415,208</b>	<b>1,681,728</b>	
<b>Total Liabilities</b>		<b>43,260</b>	<b>56,934</b>	<b>55,688</b>	<b>48,075</b>	
<b>Net Fund Balances</b>		<b>1,539,036</b>	<b>1,611,541</b>	<b>1,359,520</b>	<b>1,633,653</b>	

FOR PUBLIC INSPECTION

**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>
	\$ 18,722		14			
TOTAL	\$ 18,722					

\*\*-\*\*\*3980

**Federal Statements**

FYE: 9/30/2017

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

Description	Total Expenses	Program Service	Management & General	Fund Raising
CONTRACT SERVICES	\$ 68,180	\$ 61,809	\$ 631	\$ 5,740
TOTAL	\$ 68,180	\$ 61,809	\$ 631	\$ 5,740

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