

Form 990 Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

2017

Open to Public Inspection

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

A For the 2017 calendar year, or tax year beginning 10/01/17, and ending 09/30/18

Header section containing organization name (CRAFT EMERGENCY RELIEF FUND, INC.), address (535 STONE CUTTERS WAY, SUITE 202, MONTEPELIER VT 05602), EIN (3980-229-2306), and officer name (CORNELIA CAREY).

Part I Summary

Summary table with columns for Revenue, Expenses, and Net Assets or Fund Balances. Rows include mission statement, revenue breakdown, expenses, and total assets/liabilities.

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.

Signature block for Corneliea Carey, Executive Director, including signature and date fields.

Preparer information section for Randall L. Sargent, CPA, including firm name (JMM & ASSOCIATES, PC) and address.

May the IRS discuss this return with the preparer shown above? (see instructions) [X] 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 \$ 1,163,303 including grants of \$ 595,343) (Revenue \$)

IN FISCAL YEAR 2018, CERF+ FOCUSED ON FOUR MAIN GOALS: (1) ENHANCING AND EXPANDING OUR EMERGENCY PREPAREDNESS AND CAREER PROTECTION RESOURCES AND TECHNICAL ASSISTANCE; 2) RESPONDING NIMBLY AND QUICKLY TO THE SIGNIFICANT INCREASE IN NATURAL DISASTER RELATED REQUESTS FOR ASSISTANCE AND SCALING OUR EMERGENCY RESPONSE PROGRAM APPROPRIATELY; (3) EXPANDING OUR OUTREACH TO INCREASE THE NUMBER OF ARTISTS SERVED THROUGH OUR EMERGENCY RELIEF AND RESPONSE PROGRAM; AND (4) 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. OUR MONTHLY

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 1,163,303

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		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? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		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? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question number, question text, and Yes/No columns. Includes rows 1a-1c, 2a-2b, 3a-3c, 4a-4b, 5a-5c, 6a-6b, 7a-7h, 8, 9a-9b, 10a-10b, 11a-11b, 12a-12b, 13a-13c, 14a-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 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed 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: JAMES HAFFERMAN 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) EDDIE BERNARD	4.00									
CHAIR	0.00	X		X			0	0	0	
(2) REED MCMILLAN	4.00									
VICE CHAIR	0.00	X		X			0	0	0	
(3) JOHN HAWORTH	4.00									
SECRETARY	0.00	X		X			0	0	0	
(4) CASEY GILL SUMMAR	4.00									
TREASURER	0.00	X		X			0	0	0	
(5) TAYNA AGUINIGA	4.00									
DIRECTOR	0.00	X					0	0	0	
(6) POLLY ALLEN	4.00									
DIRECTOR	0.00	X					0	0	0	
(7) BARRY BERGEY	4.00									
DIRECTOR	0.00	X					0	0	0	
(8) DON FRIEDLICH	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) SYLVIE ROSENTHAL	4.00									
DIRECTOR	0.00	X					0	0	0	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) LOIS RUSSELL	4.00									
DIRECTOR	0.00	X					0	0	0	
(13) PAUL SACARIDIZ	4.00									
DIRECTOR	0.00	X					0	0	0	
(14) MICHELLE BUFANO (UNTIL FEB. 2018)	4.00									
DIRECTOR	0.00	X					0	0	0	
(15) JULES POLK (UNTIL MAR. 2018)	4.00									
DIRECTOR	0.00	X					0	0	0	
(16) OLIVIA SURRATT (UNTIL MAY 2018)	4.00									
DIRECTOR	0.00	X					0	0	0	
(17) JULIE DALGLEISH (UNTIL NOV. 2017)	4.00									
DIRECTOR	0.00	X					0	0	0	
(18) JUDY GORDON (UNTIL NOV. 2017)	4.00									
DIRECTOR	0.00	X					0	0	0	
(19) AZIM MAZAGONWALLA (UNTIL NOV. 2017)	4.00									
DIRECTOR	0.00	X					0	0	0	

1b Sub-total									
c Total from continuation sheets to Part VII, Section A							89,321		20,424
d Total (add lines 1b and 1c)							89,321		20,424

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

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

Section B. Independent Contractors

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(20) CHRISTINE ROBB (UNTIL NOV. 2017)	4.00									
DIRECTOR	0.00	X					0	0	0	
(21) FELICIA SHAW (UNTIL NOV. 2017)	4.00									
DIRECTOR	0.00	X					0	0	0	
(22) CORNELIA CAREY	40.00									
EXECUTIVE DIRECTOR	0.00			X			89,321	0	20,424	
1b Sub-total							89,321		20,424	
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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

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

Section B. Independent Contractors

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

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

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

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,404,833				
	g Noncash contributions included in lines 1a-1f: \$		1,075				
	h Total. Add lines 1a-1f		1,404,833				
Program Service Revenue	2a	Busn. Code					
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		20,813			20,813	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
		b Less: rental exps.					
		c Rental inc. or (loss)					
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
			344,906				
		b Less: cost or other basis & sales exps.		297,846			
		c Gain or (loss)		47,060			
	d Net gain or (loss)		47,060	47,060			
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a					
	b Less: direct expenses	b					
	c Net income or (loss) from fundraising events						
9a Gross income from gaming activities. See Part IV, line 19	a						
b Less: direct expenses	b						
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	a	8,284					
	b Less: cost of goods sold	b	3,004				
	c Net income or (loss) from sales of inventory		5,280			5,280	
Miscellaneous Revenue	11a	Busn. Code					
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions.			1,477,986	47,060	0	26,093	

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	61,041	1	207,007
	2	Savings and temporary cash investments	50,699	2	45,185
	3	Pledges and grants receivable, net	503,037	3	160,563
	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	47,382	7	62,370
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	6,847	9	9,488
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 32,777		
	b	Less: accumulated depreciation	10b 17,540	10c	15,237
	11	Investments—publicly traded securities	991,119	11	1,240,725
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	1,681,728	16	1,740,575	
Liabilities	17	Accounts payable and accrued expenses	48,075	17	39,986
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	48,075	26	39,986
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	1,020,629	27	1,133,373
	28	Temporarily restricted net assets	613,024	28	567,216
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	1,633,653	33	1,700,589	
34	Total liabilities and net assets/fund balances	1,681,728	34	1,740,575	

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
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	595,343	595,343		
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	106,886	89,570	7,696	9,620
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	305,758	212,331	52,855	40,572
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	7,843	5,203	1,467	1,173
9 Other employee benefits	64,894	46,217	10,052	8,625
10 Payroll taxes	34,603	25,121	5,192	4,290
11 Fees for services (non-employees):				
a Management				
b Legal	1,020		1,020	
c Accounting	10,100		10,100	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	10,274		10,274	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	78,623	64,677	1,906	12,040
12 Advertising and promotion	7,228	6,558		670
13 Office expenses	48,675	20,992	5,689	21,994
14 Information technology	35,858	29,291	4,674	1,893
15 Royalties				
16 Occupancy	34,721	24,266	5,917	4,538
17 Travel	38,703	33,079	979	4,645
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,210	1,545	376	289
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	6,303	4,372	1,093	838
23 Insurance	2,855	1,980	495	380
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	3,483	30	3,413	40
b EVENTS/ DONOR CULTIVATION	2,547	778		1,769
c BAD DEBT EXPENSE	1,950	1,950		
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	1,399,877	1,163,303	123,198	113,376
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 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	1,477,986
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,399,877
3	Revenue less expenses. Subtract line 2 from line 1	3	78,109
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,633,653
5	Net unrealized gains (losses) on investments	5	-11,173
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	1,700,589

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
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.		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2017

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.

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

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).
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).
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).
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).
8 A community trust described in section 170(b)(1)(A)(vi).
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.
10 [X] 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...
11 An organization organized and operated exclusively to test for public safety.
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...
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s).
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s).
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s).
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated.
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).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support. Rows (A) through (E) and a Total row.

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) 2013, (b) 2014, (c) 2015, (d) 2016, (e) 2017, (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; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2013, (b) 2014, (c) 2015, (d) 2016, (e) 2017, (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; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10.

12 Gross receipts from related activities, etc. (see instructions)
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))
15 Public support percentage from 2016 Schedule A, Part II, line 14
16a 33 1/3% support test—2017. 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.
16b 33 1/3% support test—2016. 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.
17a 10%-facts-and-circumstances test—2017. 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.
17b 10%-facts-and-circumstances test—2016. 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.
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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,379,002	964,414	575,491	1,115,752	1,404,833	5,439,492
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	5,389	2,450	2,353	10,647	8,284	29,123
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	1,384,391	966,864	577,844	1,149,712	1,413,117	5,491,928
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	1,010,000	726,076	409,726	668,373	735,000	3,549,175
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	1,010,000	726,076	409,726	668,373	735,000	3,549,175
8 Public support. (Subtract line 7c from line 6.)						1,942,753

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6	1,384,391	966,864	577,844	1,149,712	1,413,117	5,491,928
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	16,693	20,173	24,969	18,722	20,813	101,370
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	16,693	20,173	24,969	18,722	20,813	101,370
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.)	1,401,084	987,037	602,813	1,168,434	1,433,930	5,593,298
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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	34.73%
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	36.12%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	2%
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	2%

- 19a **33 1/3% support tests—2017.** 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—2016.** 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

Table with 3 columns: Question, Yes, No. Rows include questions 1 through 10b regarding supported organizations, including their status, control, and support.

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? Row 11a: A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? Row 11b: A family member of a person described in (a) above? Row 11c: A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

Section B. Type I Supporting Organizations

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? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations

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)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

Section D. All Type III Supporting Organizations

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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 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? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

Section E. Type III Functionally-Integrated Supporting Organizations

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

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

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

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

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2017 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-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017:			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, 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 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

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.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

CRAFT EMERGENCY RELIEF FUND, INC.

Employer identification number

-*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, 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. 1b 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:

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

	Amount
1c	
1d	
1e	
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:

- (i) unrelated organizations Yes No
- (ii) related organizations Yes No

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		14,277	10,140	4,137
e Other		18,500	7,400	11,100
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				15,237

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. Rows include (1) Financial derivatives, (2) Closely-held equity interests, (3) Other (A-H), and Total.

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. Rows (1) through (9) and Total.

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) and Total.

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), and Total.

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	1,556,298
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-11,173	
b	Donated services and use of facilities	2b	86,481	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	3,004	
e	Add lines 2a through 2d	2e		78,312
3	Subtract line 2e from line 1	3		1,477,986
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		1,477,986

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	1,489,362
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	86,481	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	3,004	
e	Add lines 2a through 2d	2e		89,485
3	Subtract line 2e from line 1	3		1,399,877
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		1,399,877

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 \$ 3,004

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

COST OF GOODS SOLD \$ 3,004

Part XIII Supplemental Information *(continued)*

SCHEDULE I (Form 990)

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

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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?
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.

Table with 8 columns: (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. Rows 1-9.

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

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 noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 EMERGENCY RELIEF	194	595,343			
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.

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2017

Open to Public Inspection

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

▶ Attach to Form 990 or 990-EZ.

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

Department of the Treasury
Internal Revenue Service

Name of the organization

CRAFT EMERGENCY RELIEF FUND, INC.

Employer identification number

** - ***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 3

CERF+'S EMERGENCY ASSISTANCE PROGRAM AND EMERGENCY RECOVERY LOAN PROGRAM - AS WE CONTINUED TO RECEIVE RECORD NUMBERS OF INQUIRIES FOR EMERGENCY ASSISTANCE AND AWARDED EMERGENCY GRANTS AT A RECORD PACE THROUGH THE MIDDLE OF THE FISCAL YEAR, OUR DISASTER RELIEF FUND WAS DRAINED - AN EVENT WE HAD NEVER SEEN BEFORE. IN LATE MAY, WE MADE THE CAREFUL, INFORMED AND TOUGH DECISION TO PUT THE PROGRAM ON HOLD UNTIL A CASH INFUSION OF AT LEAST \$200,000 COULD BE RAISED TO REPLENISH THE FUND. WE ALSO CREATED A GO FUND ME CAMPAIGN JUST FOR HURRICANE MARIA EMERGENCY RESPONSE. BY AUGUST, WE RECEIVED OVER \$674,779 FROM INDIVIDUAL AND FOUNDATION DONATIONS AND THANKS TO OUR SUPPORTERS, THE PROGRAM WAS REOPENED.

WHILE THE PROGRAM WAS TEMPORARILY ON HOLD, WE RESEARCHED BEST PRACTICES, OTHER ER PROGRAMS, OUR PAST PROCEDURES AND DATA, AND CONSULTED WITH BOARD MEMBERS, CURRENT AND FORMER ER COMMITTEE MEMBERS, COLLEAGUES FROM THE CENTER FOR DISASTER PHILANTHROPY, FEMA, RED CROSS AND HELD SPECIAL FOCUS GROUPS. THE RESULT WAS A THOUGHTFULLY STREAMLINED EMERGENCY ASSISTANCE INQUIRY AND APPLICATION PROCESS AND IMPLEMENTATION OF A "LITE" CASE MANAGEMENT SYSTEM.

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SIMPLIFIED GRANT AMOUNT AND REVIEW PROCESS: BY AUGUST 2018, THE GRANT PROGRAM REOPENED. A FLAT GRANT AMOUNT OF \$3,000 IS NOW AWARDED INSTEAD OF A SLIDING SCALE GRANT AMOUNT WITH A MAXIMUM OF \$6,000. THE FLAT GRANT AWARD AMOUNT IS INTENDED TO BE A TEMPORARY MEASURE. DURING 2019, CERF+ WILL EVALUATE WHAT STEPS NEED TO BE TAKEN TO ENABLE CERF+ TO RESUME AWARDED GRANTS UP TO \$6,000. STAFF DETERMINE IF THE ARTIST AND THEIR SITUATION MEETS THE GUIDELINES AND THE DECISION IS MADE WHETHER OR NOT TO AWARD THE FLAT GRANT AMOUNT. HOWEVER, AT TIMES, THE CERF+ STAFF WILL ENGAGE THE EXPERTISE OF THE CERF+ GRANTS COMMITTEE TO ADDRESS QUESTIONS PARTICULARLY RELATED TO ELEMENTS OF AN APPLICANT'S WORK AND CAREER AND SUBSEQUENT ELIGIBILITY. THIS YEAR, WE ALSO BECAME THE FISCAL AGENT FOR THE ETSY ARTISTS EMERGENCY GRANT PROGRAM IN WHICH WE AWARD FUNDS TO THEIR GRANTEEES.

THE EMERGENCY RECOVERY LOAN PROGRAM HAS BEEN UNDER-UTILIZED FOR MANY YEARS, EVEN AFTER EFFORTS TO PROMOTE IT AND IMPROVE THE APPLICATION PROCESS. FOR THE FORESEEABLE FUTURE, WE ARE FOCUSING ON INCREASING OTHER FORMS OF CERF+ EMERGENCY ASSISTANCE, IN PARTICULAR OUR IN-KINDNESS PROGRAM.

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

E-NEWS AVERAGED 11,564 RECIPIENTS PER ISSUE. OUR INCREASED ONLINE SOCIAL MEDIA ENGAGEMENT RESULTED IN 791 TWITTER FOLLOWERS; 5,584 ACCESSED OUR WEBSITE IN FY18.

CRAFT EMERGENCY RELIEF FUND -

CERF+ PROVIDES CRITICAL EMERGENCY FINANCIAL ASSISTANCE TO ARTISTS WORKING IN CRAFT DISCIPLINES WHO HAVE EXPERIENCED A RECENT, CAREER-THREATENING

Schedule O (Form 990 or 990-EZ) (2017)

Page 2

Name of the organization

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EMERGENCY. ONCE APPLICATIONS ARE COMPLETED, GRANT DETERMINATIONS ARE MADE WITHIN TWO WEEKS AND ON AVERAGE, WITHIN SEVEN DAYS. THIS YEAR, 138 ARTISTS RECEIVED DIRECT EMERGENCY RELIEF GRANTS. THESE ARTISTS WERE IMPACTED BY FLOODS, HOME AND STUDIO FIRES, HURRICANES, INJURIES AND ILLNESSES RECEIVING A TOTAL OF \$608,245 IN EMERGENCY AID (\$554,900 IN GRANTS AND \$33,800 IN NO-INTEREST LOANS) AND \$19,545 WORTH OF GIFTS-IN-KIND (DONATIONS OF EQUIPMENT, MATERIALS, BOOTH WAIVER FEES, ETC.), FOR A GRAND TOTAL OF \$608,245 IN AID.

RESPONDING TO ARTISTS WHO SUFFERED LOSSES IN NATURAL DISASTERS DOMINATED OUR WORK THIS YEAR. 70% OF THE FY18 ASSISTANCE WAS IN RESPONSE TO THE MAJOR DISASTERS. BY COMPARISON, DURING THE PREVIOUS FIVE FISCAL YEARS, 29% OF THE ASSISTANCE WAS IN RESPONSE TO DISASTERS.

OUR PERSONALIZED INDIVIDUAL COUNSELING AND REFERRALS HELPED 725 ARTISTS RESPOND TO THEIR EMERGENCY IN A TIME OF CRISIS. THIS IS ALMOST TWICE INDIVIDUAL EMERGENCY COUNSELING AND REFERRALS PROVIDED IN PREVIOUS YEARS (ANNUAL AVERAGE THE PREVIOUS FIVE YEARS BEING 374). 45% OF THIS PERSONALIZED ASSISTANCE WAS IN RESPONSE TO NATURAL DISASTERS -- PRIMARILY HURRICANES HARVEY, IRMA AND MARIA, AS WELL AS THE CALIFORNIA WILDFIRES LATE IN 2017.

EMERGENCY RESPONSE -

CERF+ MAINTAINS AN ACTIVE LIST OF INDIVIDUALS, ORGANIZATIONS, AND ARTS BUSINESSES THAT RECEIVE EMAIL ALERTS BEFORE, DURING AND AFTER A DISASTER. IN FY18, MORE THAN 8,500 INDIVIDUALS AND ORGANIZATIONS RECEIVED 22 DISASTER RESPONSE MESSAGES FROM CERF+ WITH CRITICAL PREPAREDNESS AND RECOVERY INFORMATION, RESOURCES AND SUPPORT. NOTICES WERE SENT OUT THIS YEAR FOR THE FLOODS IN FLORIDA, ALABAMA, LOUISIANA, AND MONTANA; WILDFIRES AND MUDSLIDES

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IN CALIFORNIA; THE VOLCANO IN HAWAII, AND HURRICANES NATE, LANE, AND FLORENCE.

"GET READY" GRANTS -

CERF+ CONTINUED ITS SECOND YEAR OF "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 42 INDIVIDUAL ARTISTS (UP TO \$500) TOTALING \$20,443 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 -

WE CONTINUE TO UPDATE OUR WEBSITE WITH NEW CONTENT ON A WEEKLY AND MONTHLY BASIS. DUE TO THE ONSLAUGHT OF DISASTERS, WE LAUNCHED A "DISASTER PORTAL," WHICH PROVIDES ALERTS, INFORMATION AND RESOURCES ON SPECIFIC DISASTERS WITH THE CLICK OF A LINK. OTHER ADDITIONS TO THE SITE INCLUDE NEW ARTIST INTERVIEWS AND STORIES AND NEW CONTENT RELATED TO OUR GET READY GRANT PROGRAM CREATED BY RECIPIENTS OF THOSE GRANTS. CERF+ ALSO UPDATED ITS EMERGENCY RELIEF INFORMATION PAGES ON ITS WEBSITE TO INCLUDE SPANISH TRANSLATIONS. 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.

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COVER YOUR A'S: ART, ASSETS + ARCHIVES -

COVER YOUR A'S (CYA) IS A TRAIN-THE-TRAINER WORKSHOP, INAUGURATED IN 2012, THAT IS GEARED FOR ART SCHOOL FACULTY (BFA, MFA, AND CERTIFICATE PROGRAMS), CAREER SERVICES STAFF AND PROFESSIONAL DEVELOPMENT PROVIDERS. OPTIMUM WORKSHOP SIZE IS 15-25 PARTICIPANTS; WORKSHOP LENGTH IS FLEXIBLE (1-1.5 DAYS). OUR CURRICULUM MODULES FOCUS ON "DEFENSIVE STRATEGIES" TO BUILD AND SUSTAIN A CREATIVE PRACTICE, AND ARE DESIGNED TO COMPLEMENT STANDARD ARTIST BUSINESS SKILL TRAINING (MARKETING, BUSINESS PLANNING, BUDGETING). WORKSHOP INSTRUCTORS INCLUDE CERF+ STAFF, SUBJECT EXPERTS, AND CYA WORKSHOP "ALUMNI." THROUGH THE MULTIPLIER EFFECT OF OUR TEACHING PROGRAM THIS YEAR MORE THAN 2,000 ART STUDENTS AND EMERGING ARTISTS ARE RECEIVING INSTRUCTION IN RISK MANAGEMENT.

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 OCCURRED 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 -

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ARTIST LEGACY PLANNING IS A FAST EMERGING FIELD GIVEN THE AGING OF THE 'BABY BOOM' GENERATION. TO COMPLEMENT A SPATE OF RECENT PUBLICATIONS AND RESOURCES ON ARTIST ESTATE PLANNING, CERF+ HAS PUBLISHED A 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, GUIDE TO PUTTING YOUR NON-ARTISTIC ASSETS TO WORK IN AN ESTATE PLAN" 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.

STUDIO SAFETY -

CERF+ DEVELOPED A STUDIO SAFETY GUIDE AND ACCOMPANYING POSTER IN BOTH ENGLISH AND SPANISH, EDUCATING ARTISTS AND RAISING AWARENESS ABOUT THIS TOPIC AS AN IMPORTANT ADVOCACY ISSUE. AVAILABLE ONLINE AS A FREE DOWNLOAD OR FOR PURCHASE AS A PRINTED GUIDE, THE PORTABLE 12-PAGE STUDIO SAFETY GUIDE IS DESIGNED TO HELP ARTISTS EVALUATE THEIR CURRENT OR NEW SPACES AND TO HELP THEM MAINTAIN OR UPGRADE THEIR STUDIOS WITH STEP-BY-STEP CLEAR INSTRUCTIONS ABOUT HOW TO IDENTIFY AND REDUCE UNSAFE CONDITIONS AND POTENTIAL RISKS. THE GUIDE BREAKS DOWN COMPLICATED (AND OFTEN SCARY) ISSUES SUCH AS CHECKING OUT STRUCTURAL ISSUES OF A BUILDING, ITS HEATING AND VENTILATION SYSTEMS, ELECTRICAL WIRING, AND ALSO LOOKS AT THE ARTIST'S USE OF HAZARDOUS MATERIALS AND OTHER SAFETY MEASURES.

EDUCATION AND TRAINING WORKSHOPS -

1,023 ARTISTS, ARTS PROFESSIONALS, AND REPRESENTATIVES OF GOVERNMENT AND

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COMMUNITY AGENCIES ATTENDED CERF+'S NATIONAL, REGIONAL AND LOCAL WORKSHOPS AND PRESENTATIONS IN FY18. THESE WERE PRESENTED AT/FOR THE CONNECTICUT ARTS DAY 2018, GRANTMAKERS IN THE ARTS, HERITAGE EMERGENCY NATIONAL TASK FORCE (HENTF) ANNUAL MEETING, HURRICANE HARVEY KNOWLEDGE SHARE, MAINE INTERNATIONAL CONFERENCE ON THE ARTS, NATIONAL ORGANIZATION OF COUNTIES - ARTS IN DISASTER RECOVERY, THE TURABO MUSEUM, READY + RESILIENT GATLINBURG, SOCIETY OF NATIONAL GOLDSMITHS ANNUAL CONFERENCE, SCULPTURAL OBJECTS FUNTIONAL ART, ST LOUIS VOLUNTEER LAWYERS AND ACCOUNTANTS FOR THE ARTS.

CERF+ CONDUCTED A SERIES OF WEBINARS ON A VARIETY OF TOPICS WITH CERF+ AS HOST/PRESENTER AND EXPERT(S) AS CO-PRESENTERS. PARTNERING WITH ORANGENIUS, AN ONLINE PLATFORM FOR ARTISTS, WAS PARTICULARLY EFFECTIVE IN EXPANDING OUR REACH TO INCLUDE A GREATER NUMBER OF STUDIO ARTISTS AND IN PRESENTING EXPERTISE COMPLEMENTARY TO OUR EXPERTISE. WEBINAR TOPICS INCLUDED PHOTOGRAPHING YOUR WORK AND COPYRIGHT BASICS FOR CREATIVES WITH ORANGENIUS, INC.; BUSINESS INSURANCE WITH ZINC INSURANCE; CRAFTING YOUR LEGACY. OVER 800 STUDIO ARTISTS AND ARTS PROFESSIONALS REGISTERED FOR THESE WEBINARS. EVERY WEBINAR WAS RECORDED AND POSTED ON OUR WEBSITE AND SOCIAL MEDIA FOR FREE REPLAY.

ADVOCACY -

TOOL REPLACEMENT BILL

IN PARTNERSHIP WITH AMERICANS FOR THE ARTS (AFTA), CERF+ PARTICIPATED IN A SECOND ROUND OF OUR CONGRESSIONAL ADVOCACY CAMPAIGN TO CHANGE FEMA REGULATIONS ABOUT ARTISTS' AND OTHER SELF-EMPLOYED WORKERS' ELIGIBILITY FOR POST-DISASTER TOOL REPLACEMENT. CERF+ CONTINUED TO ADVOCATE FOR REGULATORY CHANGE AT FEMA THAT WOULD ENABLE SELF-EMPLOYED WORKERS (INCLUDING ARTISTS)

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TO ACCESS FEMA'S OTHER NEEDS ASSISTANCE (ONA) AFTER FEDERALLY DECLARED DISASTER AS W-2 EMPLOYEES ARE CURRENTLY ABLE TO.

NATIONAL COALITION FOR ARTS' PREPAREDNESS AND EMERGENCY RESPONSE (NCAPER) - CERF+ CONTINUES TO PLAY AN ACTIVE ROLE AS A STEERING COMMITTEE MEMBER OF NCAPER. THE WORK OF NCAPER THIS PAST YEAR HAS LARGELY FOCUSED ON COORDINATED WEEKLY, BI-WEEKLY AND MONTHLY CALLS WITH CULTURAL ORGANIZATIONS AND ARTISTS ON THE GROUND IN ALL OF THE AFFECTED STATES AND TERRITORIES. NCAPER ALSO COMMISSIONED CERF+ TO CREATE HURRICANE PREPAREDNESS TIP SHEETS IN BOTH ENGLISH AND SPANISH. THE TIP SHEET WAS CIRCULATED TO ALL OF CERF+ BENEFICIARIES AND WAS DISTRIBUTED BY NCAPER.

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.

HERITAGE EMERGENCY NATIONAL TASK FORCE (HENTF) - CERF+'S INVOLVEMENT IN THE HERITAGE EMERGENCY NATIONAL TASK FORCE (HENTF), SPONSORED BY THE SMITHSONIAN INSTITUTION AND FEMA, HAS WIDENED RECOGNITION FOR OUR SPECIALIZED EXPERTISE IN ARTISTS DISASTER PREPAREDNESS AND RECOVERY. CERF+ WAS INVITED TO SPEAK AT THE ANNUAL MEETING OF FEDERAL AGENCIES AND NATIONAL SERVICE ORGANIZATIONS AT THE SMITHSONIAN CASTLE, WHERE WE PROFILED OUR ACTIVITIES AND LESSONS LEARNED FROM THE 2017

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HURRICANES.

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

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY AT CERF+'S ANNUAL BOARD MEETING IN THE FALL (BEGINNING OF THE FISCAL YEAR) EACH BOARD MEMBER FILLS OUT AND SIGNS A BOARD OF DIRECTORS CONFLICT OF INTEREST POLICY - DISCLOSURE FORM. CERF+'S BOOKKEEPER/OFFICE MANAGER DOES FOLLOW-UP REMINDERS UNTIL 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 THE EXECUTIVE DIRECTOR'S COMPENSATION IS DETERMINED BY THE BOARD. RENUMERATION OF THE EXECUTIVE DIRECTOR IS DECIDED ANNUALLY AFTER A REVIEW OF MONITORING REPORTS.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS THE DEPUTY DIRECTOR 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.

Name of the organization

Employer identification number

CRAFT EMERGENCY RELIEF FUND, INC.

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

COST OF GOODS SOLD \$ 3,004

COST OF GOODS SOLD \$ -3,004

Form **990**

Two Year Comparison Report

2016 & 2017

For calendar year 2017, or tax year beginning **10/01/17**, ending **09/30/18**

Name

Taxpayer Identification Number

CRAFT EMERGENCY RELIEF FUND, INC.

****-***3980**

		2016	2017	Differences
Revenue	1. Contributions, gifts, grants	1,115,752	1,404,833	289,081
	2. Membership dues and assessments			
	3. Government contributions and grants			
	4. Program service revenue	23,313		-23,313
	5. Investment income	18,722	20,813	2,091
	6. Proceeds from tax exempt bonds			
	7. Net gain or (loss) from sale of assets other than inventory	16,429	47,060	30,631
	8. Net income or (loss) from fundraising events			
	9. Net income or (loss) from gaming			
	10. Net gain or (loss) on sales of inventory	5,052	5,280	228
	11. Other revenue			
	12. Total revenue. Add lines 1 through 11	1,179,268	1,477,986	298,718
Expenses	13. Grants and similar amounts paid	225,137	595,343	370,206
	14. Benefits paid to or for members			
	15. Compensation of officers, directors, trustees, etc.	103,391	106,886	3,495
	16. Salaries, other compensation, and employee benefits	393,015	413,098	20,083
	17. Professional fundraising fees			
	18. Other professional fees	87,330	100,017	12,687
	19. Occupancy, rent, utilities, and maintenance	28,132	34,721	6,589
	20. Depreciation and Depletion	6,303	6,303	
	21. Other expenses	131,581	143,509	11,928
	22. Total expenses. Add lines 13 through 21	974,889	1,399,877	424,988
	23. Excess or (Deficit). Subtract line 22 from line 12	204,379	78,109	-126,270
Other Information	24. Total exempt revenue	1,179,268	1,477,986	298,718
	25. Total unrelated revenue			
	26. Total excludable revenue	63,516	73,153	9,637
	27. Total assets	1,681,728	1,740,575	58,847
	28. Total liabilities	48,075	39,986	-8,089
	29. Retained earnings	1,633,653	1,700,589	66,936
	30. Number of voting members of governing body	21	13	
	31. Number of independent voting members of governing body	21	13	
32. Number of employees	11	9		
33. Number of volunteers	58	81		

Form **990****Tax Return History****2017**

Name

CRAFT EMERGENCY RELIEF FUND, INC.

Employer Identification Number

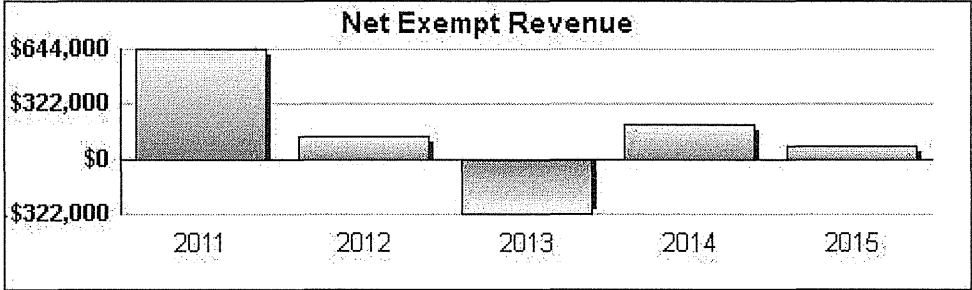
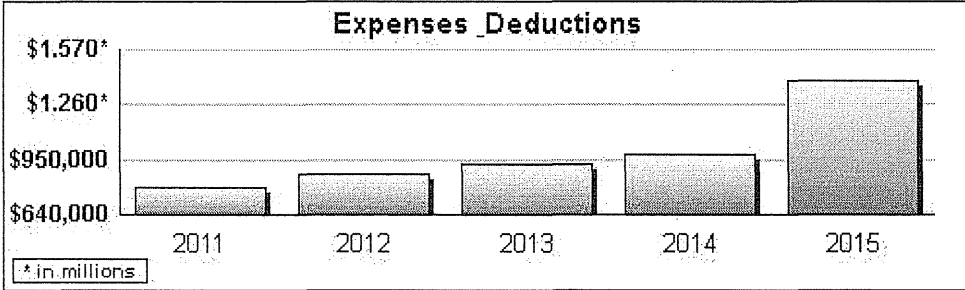
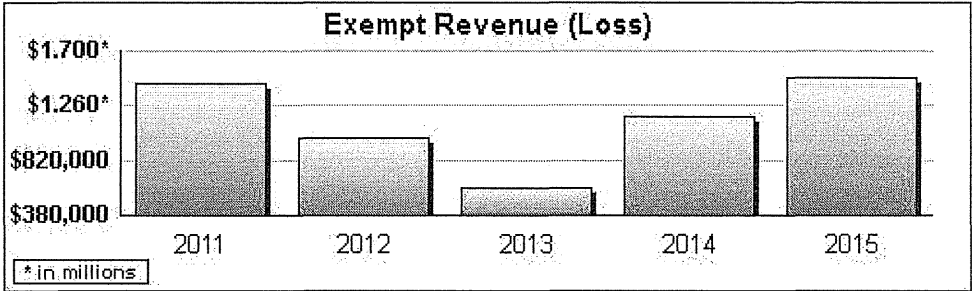
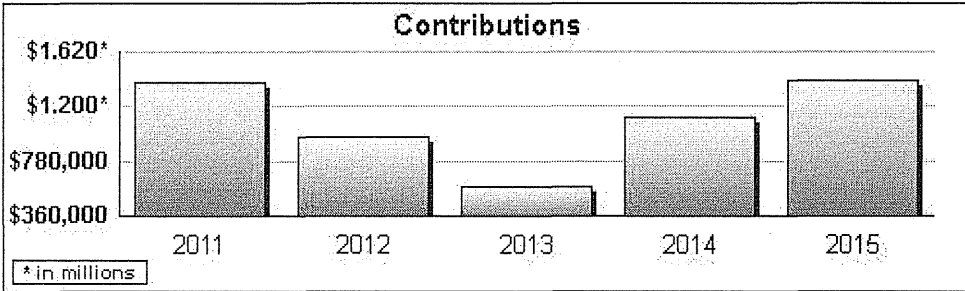
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	2013	2014	2015	2016	2017	2018
Contributions, gifts, grants	1,379,002	964,414	575,491	1,115,752	1,404,833	
Membership dues						
Program service revenue				23,313		
Capital gain or loss	49,016	19,173	-2,495	16,429	47,060	
Investment income	16,693	20,173	24,969	18,722	20,813	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue	-2,667	277	2,305	5,052	5,280	
Total revenue	1,442,044	1,004,037	600,270	1,179,268	1,477,986	
Grants and similar amounts paid	132,248	130,650	127,300	225,137	595,343	
Benefits paid to or for members						
Compensation of officers, etc.	98,011	110,152	115,850	103,391	106,886	
Other compensation	336,006	409,151	446,082	393,015	413,098	
Professional fees	77,587	41,905	48,321	87,330	100,017	
Occupancy costs	26,094	25,895	25,221	28,132	34,721	
Depreciation and depletion	2,212	3,198	1,973	6,303	6,303	
Other expenses	125,779	143,622	157,764	131,581	143,509	
Total expenses	797,937	864,573	922,511	974,889	1,399,877	
Excess or (Deficit)	644,107	139,464	-322,241	204,379	78,109	
Total exempt revenue	1,442,044	1,004,037	600,270	1,179,268	1,477,986	
Total unrelated revenue						
Total excludable revenue	63,042	39,623	24,779	63,516	73,153	
Total Assets	1,582,296	1,668,475	1,415,208	1,681,728	1,740,575	
Total Liabilities	43,260	56,934	55,688	48,075	39,986	
Net Fund Balances	1,539,036	1,611,541	1,359,520	1,633,653	1,700,589	

Form **990T** | **Tax Return History** | **2017**

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

	2013	2014	2015	2016	2017	2018
Business activity profit/loss						
Capital gains/losses						
Partner and S Corp gain/loss						
Rental income*						
Debt-financed income*						
Controlled organizations income/interest*						
Investment income, specific organizations*						
Exploited exempt activity income*						
Other income						
Total trade or business income.						
Compensation of officers, ect.						
Other salaries and wages						
Repairs and maintenance						
Bad debts						
Interest						
Taxes and licenses						
Charitable contributions						
Depreciation and Depletion						
Deferred compensation plans						
Employee benefit programs						

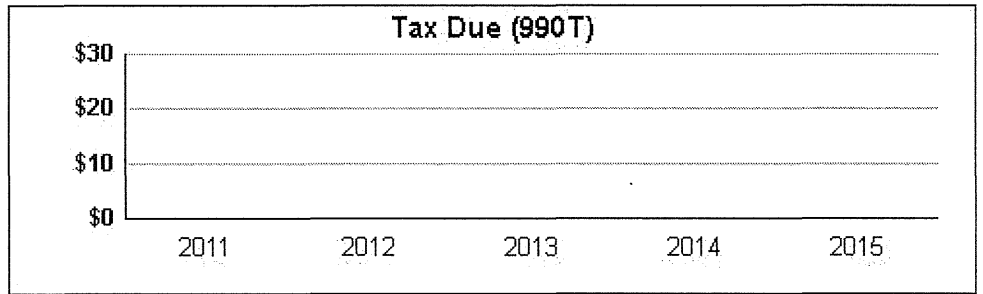
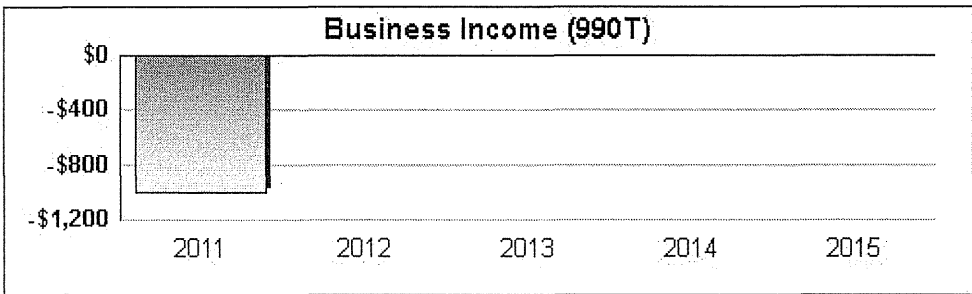
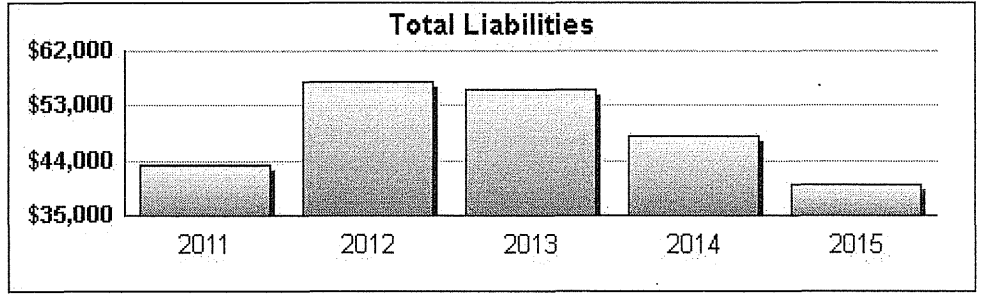
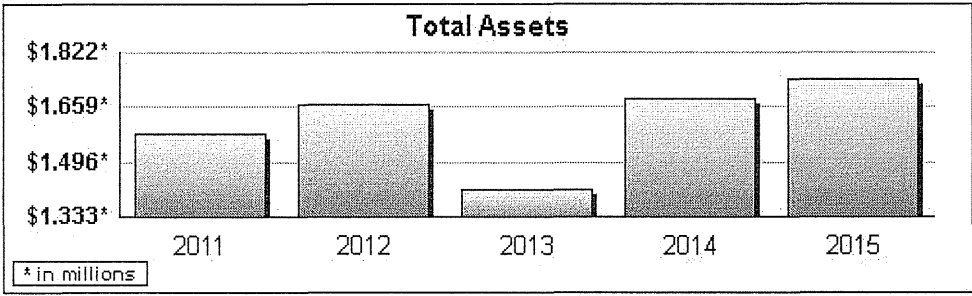


Form 990T	Tax Return History	2017
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Name CRAFT EMERGENCY RELIEF FUND, INC.	Employer Identification Number **-***3980
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	2013	2014	2015	2016	2017	2018
Other deductions						
Net operating loss deduction						
Specific deduction	1,000					
Income after expense and deductions	-1,000					
Income tax (corporate or trust)						
Other taxes						
Total taxes						
General business credit						
Other credits						
Net tax after credits						
Estimated tax payments						
Other payments						
Balance due/Overpayment						

* Income shown net of expenses



Form **4562**

Depreciation and Amortization
(Including Information on Listed Property)

OMB No. 1545-0172

2017

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

Attachment Sequence No. **179**

Name(s) shown on return

CRAFT EMERGENCY RELIEF FUND, INC.

Identifying number

-*3980

Business or activity to which this form relates

CERF MERCHANDISE

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	510,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,030,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2016 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2018. Add lines 9 and 10, less line 12	▶ 13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

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

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	6,304

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

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2017	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	▶ <input type="checkbox"/>	

Section B—Assets Placed in Service During 2017 Tax Year Using the General Depreciation System

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

Section C—Assets Placed in Service During 2017 Tax Year Using the Alternative Depreciation System

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

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	6,304
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2017)

Federal Statements

Taxable Interest on Investments

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
INTEREST AND DIVIDENDS	\$ 20,813				14	
TOTAL	<u>\$ 20,813</u>					

CERF CRAFT EMERGENCY RELIEF FUND, INC.

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Federal Statements

FYE: 9/30/2018

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

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
OTHER FEES FOR SERVICES	\$ 78,623	\$ 64,677	\$ 1,906	\$ 12,040
TOTAL	\$ <u>78,623</u>	\$ <u>64,677</u>	\$ <u>1,906</u>	\$ <u>12,040</u>