EXTENDED TO NOVEMBER 15, 2019

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury Internal Revenue Service

▶ 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.

ΑF	or the	e 2018 calendar year, or tax year beginning	and	ending					
B	Check if pplicabl	C Name of organization			D Employer identifi	cation number			
	Addre chang	e CRISIS TEXT LINE INC.							
	□Name □chang □Initial	e Doing business as				039599			
	return _Final _return	Number and street (or P.O. box if mail is not del PO BOX 1144	livered to street address)	Room/suite	E Telephone numbe 631-	r 509–2790			
	termin ated	City or town, state or province, country, and	ZIP or foreign postal code		G Gross receipts \$ 27,137,174.				
	Ameno return				H(a) Is this a group re	eturn			
	Application	F Name and address of principal officer: MAIN	CY LUBLIN		for subordinates	? Yes X No			
	pendir	SAME AS C ABOVE	H(b) Are all subordinates in	ncluded? Yes No					
				or 527	If "No," attach a	list. (see instructions)			
		te: WWW.CRISISTEXTLINE.ORG			H(c) Group exemption				
		5. 9um 2um 2um 2um 2um 2um 2um 2um 2um 2um 2	ssociation Other	L Year	of formation: 2012 I	M State of legal domicile; NY			
Pa	art I	Summary	DDOI		TT 04/7 TM0	TT 0313 T			
ě	1	Briefly describe the organization's mission or most SUPPORT FOR THOSE IN CRIST		IDE FR	EE 24// EMO	TTONAL			
Governance	_				the or OFO/ of its not so				
/er	2	Check this box if the organization discor Number of voting members of the governing body	·			11			
é	4	Number of independent voting members of the governing body.				10			
	1 -	Total number of individuals employed in calendar y				120			
ij		Total number of volunteers (estimate if necessary)				4700			
Activities &		Total unrelated business revenue from Part VIII, col				0.			
Ă		Net unrelated business taxable income from Form				32,421.			
			,		Prior Year	Current Year			
4	8	Contributions and grants (Part VIII, line 1h)			2,586,026.	25,036,660.			
Revenue	l				593,554.	1,787,510.			
eve	I .	Investment income (Part VIII, column (A), lines 3, 4,			202,604.	272,935.			
Œ			ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)						
	12	Total revenue - add lines 8 through 11 (must equal	Part VIII, column (A), line 12)		3,392,000.	27,137,174.			
	13	Grants and similar amounts paid (Part IX, column (A	A), lines 1-3)		0.	0.			
	14	Benefits paid to or for members (Part IX, column (A	0.	0.					
S	15	Salaries, other compensation, employee benefits (F			6,805,973.				
Expenses	16a	Professional fundraising fees (Part IX, column (A), li		L	0.	0.			
ž	b	Total fundraising expenses (Part IX, column (D), line	'		0.600.060	0.000.000			
ш	''	Other expenses (Part IX, column (A), lines 11a-11d,			2,688,062.				
		Total expenses. Add lines 13-17 (must equal Part I)			9,494,035.	12,229,626.			
	19	Revenue less expenses. Subtract line 18 from line	12		-6,102,035.	14,907,548.			
Net Assets or		Tatal assats (Dart V. line 16)		Ве	ginning of Current Year 21,178,889.	End of Year 36,378,307.			
SSe	20	Total assets (Part X, line 16) Total liabilities (Part X, line 26)			355,762.	643,124.			
let /	21 22	Net assets or fund balances. Subtract line 21 from	lino 20		20,823,127.	35,735,183.			
Pa	art II	Signature Block	III le 20		20,020,127,	33773371337			
Und	er pena	Ities of perjury, I declare that I have examined this return,	including accompanying schedule:	s and stateme	ents, and to the best of my	v knowledge and belief, it is			
		et, and complete. Declaration of preparer (other than office				,,			
			,						
Sig	n	Signature of officer			Date				
Her		NANCY LUBLIN, CEO							
		Type or print name and title							
		Print/Type preparer's name	Preparer's signature	1	Date Check Check	PTIN			
Paid	I	SARAH AVERY		0	9/09/19 self-employ				
-	arer	Firm's name FRIEDMAN LLP			Firm's EIN ▶	13-1610809			
Use	Only	Firm's address 100 EAGLE ROCK A)	, ,	E2\ 000 0500			
		EAST HANOVER, NJ			Phone no. (9	73) 929-3500			
May	the IF	RS discuss this return with the preparer shown above	ve? (see instructions)			X Yes No			

Pai	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:
	USE TECHNOLOGY AND DATA INNOVATIONS TO PIONEER NEW APPROACHES TO
	SUPPORT PEOPLE IN NEED
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes X No
_	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
3	· · · · · · · · · · · · · · · · · · ·
	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 \$1,990,635. including grants of \$) (Revenue \$1,787,510.)
	CRISIS COUNSELOR COMMUNITY - ALL COSTS ASSOCIATED WITH RECRUITING AND
	RETAINING VOLUNTEER'S DEVELOPMENT, TRAINING AND CULTURAL COMPETENCIES
	IN THE COMMUNITY TO APPROPRIATELY COMMUNICATE WITH AND PROMOTE CTL, INC. AS A SERVICE TO ALL COMMUNITIES.
	INC. AS A SERVICE TO ALL COMMONITIES.
	2 510 072
4b	(Code:) (Expenses \$3,519,073. including grants of \$) (Revenue \$)
	SUPERVISION - A DEDICATED GROUP OF PAID SUPERVISORS THAT SERVICE AND MANAGE CRISIS COUNSELORS AND OVERSEE ALL TEXTERS ON THE CTL, INC.
	MANAGE CRISIS COUNSELORS AND OVERSEE ALL TEXTERS ON THE CTL, INC. PLATFORM.
	PLAIFORM.
4-	(Code:) (Expenses \$ 2,715,607. including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$2,715,607. including grants of \$) (Revenue \$) ENGINEERING & TECH - CODING, REFINING, AND SUPPORTING THE CTL, INC.
	TEXTING PLATFORM.
	IDATING IDATIONAL.
4d	Other program services (Describe in Schedule O.)
-ru	(Expenses \$ 1,640,407. including grants of \$) (Revenue \$)
4e	Total program service expenses 9,865,722.
	Form 990 (2018)

Form 990 (2018) CRISIS TEXT LINE INC. 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	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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	3		Х
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	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
·	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
Ü	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
′		7		x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	-		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			_V
_	Schedule D, Part III	8_		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?			٠,,
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
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	10		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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
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	11b		X
С	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	11c		Х
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	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
124		12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
D	, ,	12b	Х	
12	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	13	- 21	х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?			X
14a		14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	441		x
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
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	15		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	16		<u> </u>
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	17		<u> </u>
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	18		<u> </u>
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	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		Х

Form 990 (2018) CRISIS TEXT LINE INC. 46-5039599 Page 4 Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	_X_	<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		\vdash
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			77
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	۵		v
00	Schedule L, Part I	25b		<u> </u>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			x
07	complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			x
00	of any of these persons? If "Yes," complete Schedule L, Part III	27		$\stackrel{\Delta}{\vdash}$
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):	28a		х
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		<u> </u>
C		28c		x
29	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		
00	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?	-00		
0.	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete			
02	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
-	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
٠.	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes." complete Schedule R, Part VI	37		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	38	Х	
Pai	TV Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
83300	1 12 21 10	Form	990	(2018)

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return Х b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За Х **b** If "Yes," has it filed a Form 990-T for this year? *If* "No" to line 3b, provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X 4a **b** If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). **5a** Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). Х Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year 7d X Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? X 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand X Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or Х excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N. X Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

Form 990 (2018)

If "Yes," complete Form 4720, Schedule O.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 11 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 10 **b** Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 Х 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? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c in Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Х 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation 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 List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright NY$ Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A 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 Upon request Another's website ___ Other (explain in Schedule O) Own website 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. State the name, address, and telephone number of the person who possesses the organization's books and records THE ORGANIZATION - 631-509-2797

Form **990** (2018)

PO BOX 1144, NEW YORK, NY

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.

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

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

(A) Name and Title	(B) Average hours per week	box, unle		Position do not check more than one ox, unless person is both an efficer and a director/trustee)				compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) NANCY LUBLIN	40.00									
CEO, SECRETARY		Х		Х				135,000.	111,539.	39,746.
(2) DANAH BOYD	2.00									_
DIRECTOR		Х						0.	0.	0.
(3) STEVE BUFFONE DIRECTOR	2.00	х						0.	0.	0.
(4) ROBERT STAVIS	2.00									
CHAIRMAN		Х		Х				0.	0.	0.
(5) LARRY BERG - TO 3/18	2.00									
TREASURER		Х		Х				0.	0.	0.
(6) DAVID DRUMMOND	2.00									
DIRECTOR		Х						0.	0.	0.
(7) DENA TRUJILLO	2.00									
DIRECTOR		Х						0.	0.	0.
(8) ELIZABETH CUTLER	2.00									
DIRECTOR		X						0.	0.	0.
(9) DJ PATIL	2.00									
DIRECTOR		Х						0.	0.	0.
(10) HARRY BRANDLER - ON 7/18	2.00									
TREASURER		Х		Х				0.	0.	0.
(11) ADA WILLIAMS PRINCE - ON 9/18	2.00									
DIRECTOR		Х						0.	0.	0.
(12) JEFF LAWSON - ON1/18	2.00								_	_
DIRECTOR	1	Х						0.	0.	0.
(13) JASON BENNETT	40.00									
CTO	1				Х			350,000.	0.	40,245.
(14) SARAH BERNARD	40.00									
COO	<u> </u>				Х			308,615.	0.	28,577.
(15) MATTHEW MORRIS	40.00							145 500		40.404
DIRECTOR, DIGITAL AND CONT	10.00					X		147,500.	0.	18,491.
(16) ELANA JACOBS	40.00	l						150 200	_	00 650
DIRECTOR OF CTL INTERNATIO	10.00					X		152,308.	0.	29,652.
(17) ROBERT W. FILBIN	40.00					٦,		156 750	_	17 740
CHIEF DATA OFFICER	1			<u> </u>		X		156,750.	0.	17,748.

832007 12-31-18

Form **990** (2018)

Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	d Hi	ghe	st C	Compensated Employee	s (continued)				
(A) Name and title	(B) Average	(do	(C) Position on not check more than one				one	(D) Reportable	(E) Reportable	e		(F) imate	d
	hours per week	box	, unle	ss pe	rson i	is bot or/trus	h an	compensation from	compensation from relate		1	ount o	of
	(list any	director						the	organization		comp		ion
	hours for related	or dire	ee ee			ated		organization	(W-2/1099-MI	SC)		m the	
	organizations	trustee	al trust		yee	mpens		(W-2/1099-MISC)				nizati relate	
	below	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				organ	nizatio	ns
(18) SHAIRI TURNER-DAVIS	line) 40.00	lnd	lus	#0	Key	를 등 등 등	Ğ	<u> </u>			 		
CHIEF MEDICAL OFFICER	40.00	1				x		250,000.		0.	34	, 97	70.
(19) JEFFREY FAIRCHILD	40.00							230,0000			<u> </u>	,,,	
LEAD DEV OPS ENGINEER						X		151,346.		0.	36	,13	32.
		_											
						-	-						
		-											
						-							
		-											
							Ļ	1 (51 510	111 -	20	245	F /	- 1
1b Sub-total								1,651,519.	111,5	0.	245	,50	0.
c Total from continuation sheets to Part VI d Total (add lines 1b and 1c)								1,651,519.	111,5		245	. 56	
Total number of individuals (including but n							no r	<u> </u>	· · · · · · · · · · · · · · · · · · ·			, , ,	
compensation from the organization									·				17
											`	Yes	No
3 Did the organization list any former officer	•			•	•	•							X
line 1a? If "Yes," complete Schedule J for s 4 For any individual listed on line 1a, is the su											3		_
and related organizations greater than \$150	•							•	•		4	х	
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes." con	plete Schedule	e J f	or su	uch į	pers	son					5		X
Section B. Independent Contractors									100.000 (
1 Complete this table for your five highest co the organization. Report compensation for	-	-								pensa	tion fron	n	
(A)	the dateridar ye	Jui C	<u> </u>	19 W	1011	O1 VV		(B)	cui.		(C)		
Name and business	address	N	INC	3				Description of s	services	С	compens	satior	1
										 			
										-			
										L			
2 Total number of independent contractors (i		ot lir	nite	d to		se lis	stec	d above) who received me	ore than				
\$100,000 of compensation from the organi	zaliui 📂					J							

Form **990** (2018)

		(2016) CRIDI		TIME THE.			40 3033	Fage 9
Par	t VII	II Statement of Reven	iue					
		Check if Schedule O conta	ains a response	or note to any line	e 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	b c d e f	Membership dues Fundraising events Related organizations Government grants (contributi All other contributions, gifts, grant similar amounts not included abov	1c 1d ons) 1e ts, and //e 1f 1a-1f: \$	25,036,660.	25,036,660.			
O a	n	Total. Add lines 1a-1f			23,030,000.			
Program Service Revenue	2 a b c d			Business Code 518210	1,787,510.	1,787,510.		
P.O.B	е	·						
۵	f	All other program service reve						
\rightarrow	g	Total. Add lines 2a-2f			1,787,510.			
	4	Investment income (including other similar amounts)	k-exempt bond p	proceeds	272,935.			272,935.
	5	Royalties						
	b	Gross rents Less: rental expenses	(i) Real	(ii) Personal				
	d	Net rental income or (loss)						
		Gross amount from sales of assets other than inventory Less: cost or other basis	(i) Securities	(ii) Other				
	d	and sales expenses Gain or (loss) Net gain or (loss)		>				
Other Revenue		Gross income from fundraising including \$ contributions reported on line Part IV, line 18	of 1c). See a					
₹		Less: direct expenses						
		Net income or (loss) from fund Gross income from gaming ac Part IV, line 19	tivities. See					
	С	Less: direct expenses Net income or (loss) from gam	king activities					
	b	and allowances Less: cost of goods sold	t	·				
}	С	Net income or (loss) from sales						
-	11 a b	Miscellaneous Revenue		Business Code	40,069.			40,069.
	C							
		All other revenue						
		Total. Add lines 11a-11d			40,069.			
	•			······				1

832009 12-31-18

Form **990** (2018)

313,004.

27,137,174.

Total revenue. See instructions

1,787,510.

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 (**D**)
Fundraising (C) Management and general expenses (B) Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 793,615. 639,428. 135,030. 19,157. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 6,527,470. 5,839,699. 536,942. 150,829. Other salaries and wages 7 Pension plan accruals and contributions (include 174,691. 140,751. 29,723. 4,217. section 401(k) and 403(b) employer contributions) 1,065,107. 321,939. 224,922. 31,910. Other employee benefits 9 602,604. 485,528. 102,530. 14,546. 10 Payroll taxes Fees for services (non-employees): Management 69,953. 53,175. 16,731. Legal 85,822. 112,900. 27,003. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, <u>1,</u>901. 701,980. 216,305. 920,186. column (A) amount, list line 11g expenses on Sch O.) 9,277. 47,075. 59,766. 3,414. Advertising and promotion 12 77,600. 25,694. 39,521. 12,385. Office expenses 13 285,864. 276,408. 9,456. Information technology 14 15 Royalties 22,839. 550,144. 527,305. 16 Occupancy 305,730. 161,164. 140,588. 3,978. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates 21 25,093. 25,093. Depreciation, depletion, and amortization 22 29,557. 5,434. 24,123. 23 Other expenses. Itemize expenses not covered 24 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.) 291,586. 19,958. 269,314. 2,314. SUBSCRIPTIONS TRAINING 27,876. 22,460. 4,743. 673. 23,843. 23,532. REPAIRS AND MAINTENANCE 311. 11,355. 9,149. 1,932.274. PERSONNEL OTHER COSTS 3,285. 17,854. 14.384. 185. e All other expenses 12,229,626. 9,865,722. 2,117,999. 245,905. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Form 990 (2018)

if following SOP 98-2 (ASC 958-720)

Form 990 (2018) Part X Balance Sheet

Par	τχ	Balance Sheet					
		Check if Schedule O contains a response or not	e to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,156,452.	1	5,733,336.
	2	Savings and temporary cash investments			463,994.	2	5,008,987.
	3	Pledges and grants receivable, net			6,652,200.	3	6,203,763.
	4	Accounts receivable, net			82,366.	4	60,537.
	5	Loans and other receivables from current and fo			·		
		trustees, key employees, and highest compensa					
		Part II of Schedule L		l		5	
	6	Loans and other receivables from other disquali					
	_	section 4958(f)(1)), persons described in section	•	· ·			
		employers and sponsoring organizations of sect	•				
,		employees' beneficiary organizations (see instr).		·		6	
Assets	7	Notes and loans receivable, net				7	
Ass	8	Inventories for sale or use				8	28.619.
	9	B	139,277.	9	28,619 91,533		
		Land, buildings, and equipment: cost or other					<u> </u>
		basis. Complete Part VI of Schedule D	10a	90.841.			
	b	Less: accumulated depreciation	10h	90,841.	5,139.	10c	26.484.
	11	Investments - publicly traded securities			12,671,877.	11	26,484. 19,217,411.
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, line		13	53.		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		7,584.	15	7,584.	
	16	Total assets. Add lines 1 through 15 (must equ			21,178,889.	16	36,378,307
	17	Accounts payable and accrued expenses			209,929.	17	348,535.
	18	Grants payable	,	18			
	19	Deferred revenue		145,833.	19	198,789	
	20	Tax-exempt bond liabilities			•	20	,
	21	Escrow or custodial account liability. Complete		1		21	
	22	Loans and other payables to current and former					
Liabilities		key employees, highest compensated employee					
ig						22	
≝	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines		1			
		Schedule D			0.	25	95,800.
	26	Total liabilities. Add lines 17 through 25			355,762.	26	95,800. 643,124.
		Organizations that follow SFAS 117 (ASC 958), checl	k here ▶ X and			
ဖွ		complete lines 27 through 29, and lines 33 an					
) 2	27	Unrestricted net assets			13,319,265.	27	28,919,081.
ala	28				7,503,862.	28	6,816,102.
d B	29	Permanently restricted net assets				29	
늘		Organizations that do not follow SFAS 117 (A	SC 958	, check here 🕨 🗌			
Net Assets or Fund Balances		and complete lines 30 through 34.					
ts	30	Capital stock or trust principal, or current funds			30		
SSE	31	Paid-in or capital surplus, or land, building, or ed				31	
et A	32	Retained earnings, endowment, accumulated in				32	
ž	33	Total net assets or fund balances			20,823,127.	33	35,735,183.
	34				21,178,889.	34	36,378,307.

Form **990** (2018)

Par	t XI Reconciliation of Net Assets					90		
	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	27	,13	7,1	74.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	12	, 229	9,6	26.		
3	Revenue less expenses. Subtract line 2 from line 1	3	14	,90	7,5	48.		
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 2							
5	Net unrealized gains (losses) on investments	5		4	1,5	08.		
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				0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,							
	column (B))	10	35	<u>, 73</u> !	5,1	<u>83.</u>		
Par	t XII Financial Statements and Reporting					_		
	Check if Schedule O contains a response or note to any line in this Part XII					Щ		
			ſ		Yes	No		
1	Accounting method used to prepare the Form 990:							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis				v			
b	Were the organization's financial statements audited by an independent accountant?			2b	X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,						
	consolidated basis, or both:							
	Separate basis X Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?			2c	х			
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche		Г	20	21			
22	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin							
		gie Aud	"	За		x		
	Act and OMB Circular A-133? If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	har	·····	Ja				
	in 105, and the organization undergo the required addition addition the organization did not undergo the requi	ca auu	"					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		I	3b		l		

832012 12-31-18

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section

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.

OMB No. 1545-0047

2018

Open to Public Inspection

Employer identification number Name of the organization CRISIS TEXT LINE INC. 46-5039599 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. 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. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other n your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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.)

Sec	tion A. Public Support			,					
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total		
	Gifts, grants, contributions, and		,	, ,	. ,	, ,	,,		
-	membership fees received. (Do not								
	include any "unusual grants.")	696,158.	4006758.	29161826.	2586026.	25036660.	61487428.		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge								
4	Total. Add lines 1 through 3	696,158.	4006758.	29161826.	2586026.	25036660.	61487428.		
	The portion of total contributions	·							
	by each person (other than a								
	governmental unit or publicly								
	supported organization) included								
	on line 1 that exceeds 2% of the								
	amount shown on line 11,								
	column (f)						31848039.		
6	Public support. Subtract line 5 from line 4.						29639389.		
	ction B. Total Support								
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total		
	Amounts from line 4	696,158.	4006758.	29161826.	2586026.	25036660.	61487428.		
	Gross income from interest,	,							
Ŭ	dividends, payments received on								
	securities loans, rents, royalties,								
	and income from similar sources	898.	857.	25,332.	212.420.	272,935.	512.442.		
a	Net income from unrelated business	0,000	0071	23,3323		27273331	312,1121		
,	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain								
10	or loss from the sale of capital								
	assets (Explain in Part VI.)								
11	Total support. Add lines 7 through 10						61999870.		
	Gross receipts from related activities,	etc (see instructio	ine)				,116,116.		
	First five years. If the Form 990 is for						, , , , , , , , , , , , , , , , , , , ,		
	organization, check this box and stop	-			-				
Sec	ction C. Computation of Public	c Support Per	centage						
14	Public support percentage for 2018 (li	ne 6. column (f) div	vided by line 11. c	olumn (f))		14	47.81 %		
	Public support percentage from 2017					15	47.90 %		
	33 1/3% support test - 2018. If the o								
	stop here. The organization qualifies								
b	33 1/3% support test - 2017. If the o								
-	and stop here. The organization quali	-							
17a									
	a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization								
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								
h	10% -facts-and-circumstances test								
IJ		_							
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								
12	Private foundation. If the organization		-	· ·					
10	rivate iounuation. Ii the organization	n did not check a f	JOA OH IIIIE 13, 10	a, 100, 17a, 01 17D	, OHEON HIS DOX A	ina see iristructions	<u> </u>		

Schedule A (Form 990 or 990-EZ) 2018

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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
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						
8	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support		T			_	
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
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.)						
14	First five years. If the Form 990 is for	· ·			•	. , . ,	
0	check this box and stop here						
	ction C. Computation of Publi			. (5)		T .= T	
	Public support percentage for 2018 (li	, (,,	,	(,,		15	<u>%</u>
	Public support percentage from 2017 ction D. Computation of Inves					16	%
	-			20 13 column (f)		17	0/
	Investment income percentage for 20 Investment income percentage from 2					18	<u>%</u>
198	33 1/3% support tests - 2018. If the						. .
L	more than 33 1/3%, check this box an 33 1/3% support tests - 2017. If the						
i.	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?

 If "Yes." complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
•		
2		
За		
Ju		
3b		
3с		
4a		
4b		
4c		
F-0		
5a		
		
5b		
5c		
6		
7		
8		
9a		
34		
9b		
35		
9с		
36		
10a		
401-		
10b		

11 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of an supported organization? b A family member of a person described in (a) above? If 'Yes' to a.b. or c. provide detail in Part VI. 11b C	Pal	Supporting Organizations (Continued)			
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? b A family member of a person described in (a) above? c A 59% controlled with or a special person described in (a) a for (a) bove? if Yes' to a, b, or c, provide detail in Pert VI. 11b				Yes	No
below, the governing body of a supported organization? 1 A family member of a person described in (a) above? 2. AS\$6 controlled entity of a person described in (a) or (b) above? 3. AS\$6 controlled entity of a person described in (a) or (b) above? 4. Yes 1 to a. b. or c. provide detail in Pert VI. 11b 11c Section B. Type I Supporting Organizations 1 Did the directors, frustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organizations directors or trustees at all times during the tax year? If 'No,' observible. If the organization directors or trustees at all times during the tax year? If 'No,' observible. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organization and what conditions or restrictors, if any, applied to supple powers during the tax year 2. Did the organization operate for the benefit of any supported organization other than the supported organization and what conditions or estrictors, if any, applied to supple powers during the tax year in Part VI how providing such benefit carried out the purposes of the supported organization of the than the supported organization and the supported organizations and the supported organizations of the supported organization of the supported organizations of the supported organization of the supported organization of the supported organization of the supported organization or trustees of each of the organization and the supported organization of the supported organization or trustees of each of the organization organization and the supported organization organization organization organiz	11	Has the organization accepted a gift or contribution from any of the following persons?			
b A family member of a person described in (a) above? If "Yes" to a, b, or c, provide detail in Part VI. Section B. Type I Supporting Organizations 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 organizations directors or trustees at all times during the tax year? If "Yes" describe in Part VI how the supported organization effectively operated, supervised, or controlled the organization's activities. If the organization and more than one supported organization, describe how the powers to appoint and/or embers delectors or trustees, are allocated omong the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 1 Did the organization operate for the benefit of any supported organization? If "Yes," explain in Part VI how the powers to appoint and/or embers upsopreed organization? If "Yes," explain in Part VI how the powers to appoint acroid remove supported organization? If "Yes," explain in Part VI how providing such benefit carred out the supported organization? If "Yes," explain in Part VI how providing such benefit carred out the supposes of the supported organization? If "Yes," explain in Part VI how control or management of the supporting Organizations 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 organizations, by the last day of the fifth month of the organization provide to each of its supported organizations, by the last day of the fifth month of the organization provide to each of its supported organizations, by the last day of the fifth month of the organization provide to each of its supported organization, by the last day of the fifth month of the organization provide to each of its supported organization, to the extent not previously provided? 2 Were any of the organization or the source of the supported organiz	а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
section B. Type I Supporting Organizations 1 Did the directors, frustees, 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 frustees at all times during the tax year? If "No," describe in Part VI now the supported organization's directors or frustees at all times during the tax year? If "No," describe in Part VI now the supported organization's directors or frustees at all times during the tax year? If "No," describe in Part VI now the supported organization or describe or or frustees were allocated among the supported organization, describe how the powers to appoint and/or remove directors or frustees were allocated among the supported organization and what conditions or restrictions, if any, applied to such powers during the tax year. 2 Did the organization operate for the benefit of any supported organization that the supported organization (s) that operated, supervised, or controlled the supporting organization and controlled the supporting organization and controlled the supporting organization and controlled the supported organization (s) that operated, supervised, or controlled the supported organization (s) that operated, supervised, or controlled or supported organization (s) If No, 'describe in Part VI how control or management of the supported organizations. 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 or supported organization or management of the supported organization or supported organization or management of the supported organization or supported organization or management of the supported organization organization or tax year. (i) a copy of the Form 990 that was most exceed in the same persons that controlled or managed the supported organization organization or the organization or office organization organization organization organization organization organization organization org		below, the governing body of a supported organization?	11a		
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If *No,* describe in Pat VI how the supported organization's directors or trustees at all times during the tax year? If *No,* describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations; and what conditions or restrictions, if any, applied to such powers during the tax year. 2 Did the organization operated for the benefit of any supported organization other than the supported organization; and the supported organization of the supported organization; if *Yes,* explain in Part VI pro providing outs benefit carried out the purposes of the supported organization; if *Yes,* explain in Part VI providing organizations and explain and in the supported organization. 2 Section C. Type II Supporting Organizations 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization provide to each of its supported organizations, by the last day of the fifth month of the organization provide to each of its supported organizations, and (ii) copies of the organization provide to each of its supported organizations, and (iii) copies of the organization markinate a close and continuous working relationship with the supported organizationship. 3 By reason of the relationship described in Itŷ, did the organizations if the organizations is supported organizationship. 4 Complete the organization supported in this region. 5 Cotton E. Type III Functionally Integrated Supported organizations (complete the organizations is the parent of each of its support	b	A family member of a person described in (a) above?	11b		
Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least an najority of the organization's directors or trustees at all times during the tax yea? If "No," describe in Part VI how the supported organization's directors or trustees at all times during the tax yea? If "No," describe in Part VI how the supported organization or extended organization, and the organization and what conditions or restrictions if any, applied to such powers during the tax year. 2. Did the organization operate for the benefit of any supported organization of the thin the supported organization of year to the providing such benefit carried out the purposes of the supported organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization; but no perated. Section C. Type II Supporting Organizations 1. Were a majority of the organizations directors or trustees during the tax year also a majority of the directors or trustees of each of the organizations or supported organizations? If "Yes," describe in Part VI how control or management of the supporting Organizations and the same persons that controlled or managed. 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 copy of the Form 900 that was most recently filed as of the date of netification, and (ii) copies of the organization's powering documents in effect on the date of netification, to the extent not previously provided? 2. Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization's powering documents in effect on the date of netification, to the organization's provided? 2. Were any of the organization is with supported organization's income or assests at all times during the tax year? If "Yes," describe in Part VI how the organization's powering documents in effect on the date of ne			11c		i
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization's effectively operated, supervised, or controlled the organization's activities. If the organization and more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 2 Did the organization operated for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization of the than the supported organization of the than the supported organization or controlled the supporting organization. 3 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). 3 Were a majority of the organization's supported organization(s). 4 Were any orely of the Form 990 that was most vectors of the supported organization in the supporting organization is tax year, (i) a vortice describing the type and amount of support provided during the prior tax year, (ii) a vortice of the organization is tax year, (ii) a color of the organization is the vector of the organization is described in the supported organization is governing documents in effect on the date of notification, to the extent not previously provided? 1 Did the organization is diversed on the date of notification, to the extent not previously provided organizations is supported organizations is supported organizations is supported organiza	Sec	tion B. Type I Supporting Organizations			
regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization (s) effectively operated, supervised, or controlled the organization's activities. If the organization and more than one supported organization, describe how the powers to appoint another remove directors or trustees were allocated among the supported organization operate for the benefit of any supported organization other than the supported organization operate for the benefit of any supported organization of the trust than the supported organization operate for the benefit of any supported organization of the than the supported organization of the trustees of acts of the organization's directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organizations. 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 supported organization or unangement of the supporting organization in the same persons that controlled or managed the supported organization's activities of the describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (ii) appointed or elected by the supported organization's provided organization's income or assets at all times during the sax year? If "yes," describe in Part VI five role the organizat				Yes	No
tax year? If *No,* describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 2 Did the organization operate for the benefit of any supported organization? 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 organizations. 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 Organizations was vested in the same persons that controlled or managed the supporting organization was vested in the same persons that controlled or managed the supporting organization was vested in the same persons that controlled or managed the supporting organization was vested in the same persons that controlled or managed the supporting organization was vested in the same persons that controlled or managed the supporting organization was vested in the same persons that controlled or managed the organization is 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 (ii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization or the regularization or of the elationship with the supported organization's and a significant voice in the organization or the restriction of the relationship of the described in (2) (different persons). 3 By rea	1	Did the directors, trustees, or membership of one or more supported organizations have the power to			l
controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 2 bid the organization operate for the benefit of any supported organization other than the supported organization (s) that operated, supervised, or controlled the supporting organization (f) 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 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 was vested in the same persons that controlled or managed to measurement of the supporting organization was vested in the same persons that controlled or managed to measurement of the supporting organization was vested in the same persons that controlled or managed to measurement of the supported organizations by the last day of the fifth month of the organization's tax year, (i) a viriten 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 field as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization so officers, directors, or trustees either (ii) appointed or elected by the supported organization's provided organization's provided organization's provided organization's provided organization's involvement as significant voice in the organization and the supported organization's live in the relationship described in (ii), did the organization's supported organization's involvement as supp		regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			l
controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 2 bid the organization operate for the benefit of any supported organization other than the supported organization (s) that operated, supervised, or controlled the supporting organization (f) 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 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 was vested in the same persons that controlled or managed to measurement of the supporting organization was vested in the same persons that controlled or managed to measurement of the supporting organization was vested in the same persons that controlled or managed to measurement of the supported organizations by the last day of the fifth month of the organization's tax year, (i) a viriten 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 field as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization so officers, directors, or trustees either (ii) appointed or elected by the supported organization's provided organization's provided organization's provided organization's provided organization's involvement as significant voice in the organization and the supported organization's live in the relationship described in (ii), did the organization's supported organization's involvement as supp		tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
2 Did the organization and what conditions or restrictions, if any, applied to such powers during the tax year 2 Did the organization operate for the benefit of any supported organization other than the supported organization of the two providing such benefit carried out the purposes of the supported organizations of the supported organizations or trustees of cannot 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 organizations or trustees of each of the organization's supported organizations, and the supported organization's supported organizations or trustees of each of the organization's supported organizations or trustees of each of the organization's supported organizations or trustees of each of the organization's supported organizations organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (i) a copy of the Form 990 that was most recently filed as of the date of notification, and (ii) copies of the organization's orficers, directors, or trustees either (i) appointed or elicited by the supported organization's poverning documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elicited by the supported organization's provided or					l
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supenvised, 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, supenvised, or controlled the supporting organizations. Section C. Type II Supporting Organizations 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 was vested in the same persons that controlled or managed the supported organization supported organizations. Section D. All Type III Supporting Organizations 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, (i) a copy of the Form 990 that was most recently filed as of the date of notification, and (ii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization organization(s) or (ii) serving on the governing body of a supported organizations have a significant voice in the organization is substantially all the directors, or trustees either (ii) appointed organizations have a significant voice in the organization is were the organization is an 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. Comple		describe how the powers to appoint and/or remove directors or trustees were allocated among 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 organizations. 2 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 managem of the supporting organization was vested in the same persons that controlled or managed the supported organization was vested in the same persons that controlled or managed the supported organization was vested in the same persons that controlled or managed the supported organization supported organizations. Section D. All Type III Supporting Organizations 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 copy of the Form 990 that was most recently filed as of the date of notification, and (ii) copies of the organization's poverning documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization maintenance a close and continuous working relationship with the supported organizations in Part VI how the organization maintenance a close and continuous working relationship with the supported organizations is income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations between the organizations is lated to a satisfy the Integral Part Test during the year (see instructions). 3 Practice of progranization is the parent of each of its supported organizations. Complete line 3 below. 5 Did the organization is upported organization's activities during the tax year directly further the exempt purposes, ho		organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supported, or controlled the supporting Organizations. 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 was vested in the same persons that controlled or managed the supported organization(s). 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 flied as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' replain in Part VI how the organization ministend a close and continuous working relationship with the supported organization(s). 3 By reason of the relationship described in (2), did the organization's supported organization's supported organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organization's supported organization's and substantially all of the organization used to satisfy the Integral Part Test during the year (see instructions). 3 Cection E. Type III Functionally integrated Supporting Organizations. 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 2 Activities Test. Answer (a)	2	Did the organization operate for the benefit of any supported organization other than the supported			l
Section C. Type II Supporting Organizations 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 progranization was vested in the same persons that controlled or managed the supported organization(s). Section D. All Type III Supporting Organizations 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were an anjority of the organization is officers, cirectors, or trustees either (ii) 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) or (ii) serving on the governing body of a supported organization in Part VI how the organization maintained a close and continuous working relationship with the supported organization (s) or (ii) serving on the governing body of a supported organizationship and the relationship described in (2), did the organization's supported organizations have a significant voice in the organization sinvestment policies and in directing the use of the organization's income or assests at all times during the tax year? If *Yes," describe in Part VI the role the organization's investment policies and in directing the use of the organization's investment organizations and explain how the organization.		organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			1
Section C. Type II Supporting Organizations 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 progranization was vested in the same persons that controlled or managed the supported organization(s). Section D. All Type III Supporting Organizations 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were an anjority of the organization is officers, cirectors, or trustees either (ii) 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) or (ii) serving on the governing body of a supported organization in Part VI how the organization maintained a close and continuous working relationship with the supported organization (s) or (ii) serving on the governing body of a supported organizationship and the relationship described in (2), did the organization's supported organizations have a significant voice in the organization sinvestment policies and in directing the use of the organization's income or assests at all times during the tax year? If *Yes," describe in Part VI the role the organization's investment policies and in directing the use of the organization's investment organizations and explain how the organization.		Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			1
Section C. Type II Supporting Organizations Yes No 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? "It "No," "describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). Section D. All Type III Supporting Organizations Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or rejected 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 is maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described in (2), did the organization's purported organization's a significant voice in the organization's investment policies and in directing the use of the organization's supported organization's properted			2		
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 managed the supported organization was vested in the same persons that controlled or managed the supported organization(s). 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, (i) a copy of the Form 990 that was most recently flied as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization organization in surported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organizationship described in (2), did the organization's supported organizationshave a significant vice in the organization is the parent of each of its supported organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's and in the complex of the supported organization's and in directing the use of the organization's and in the complex of the organization's and in the complex of the organization's and in the complex of the organization's and in the organization and in the organization and in the organization and in the organization and in the organiz	Sec				
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 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization's 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 have a significant voice in the organization in (2), did the organization's supported organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions) and The organization satisfied the Activities Test. Complete line 2 below. 5 Line organization satisfied the Activities Test. Complete line 2 below. 6 Line organization satisfied the Activities Test. Complete line 2 below. 7 Line organization satisfied the Activities Test. Complete line 2 below. 8 Line organization satisfied the Activities Test. Complete line 2 below. 9 Line organization satisfied the Activities Test. Complete line 2 below. 1 Line organization satisfied to the organization was responsive?				Yes	No
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 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 organization's officers, directors, or trustees either (i) appointed or elected by the supported organization's 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's picescribed in (2), did the organization's purported organization's a significant voice in the organization's investment policies and in directing the use of the organization's supported organization's played in this regard. Section E. Type III Functionally Integrated Supporting Organizations 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 3 Section E. Type III Functionally Integrated 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) the supported organization's activities during the tax year directly further the exempt purposes of the supported organization's below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization was responsive? If "Yes," explain in Part VI the reasons for the organization was position that its supported organizations, and how the organization have the power to regularly appoint or elect a majority of the office	1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
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 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 organization's officers, directors, or trustees either (i) appointed or elected by the supported organization's 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's picescribed in (2), did the organization's purported organization's a significant voice in the organization's investment policies and in directing the use of the organization's supported organization's played in this regard. Section E. Type III Functionally Integrated Supporting Organizations 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 3 Section E. Type III Functionally Integrated 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) the supported organization's activities during the tax year directly further the exempt purposes of the supported organization's below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization was responsive? If "Yes," explain in Part VI the reasons for the organization was position that its supported organizations, and how the organization have the power to regularly appoint or elect a majority of the office		or trustees of each of the organization's supported organization(s)? If "No." describe in Part VI how control			
Section D. All Type III Supporting Organizations 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a The organization is the parent of each of its supported organizations. Complete line 3 below. b The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). 2 Activities Test. Answer (a) and (b) below. a Did substantially all of the organization's activities during the tax year directly furthered their exempt purposes of the 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 in Part VI the reasons for th		, ,			l
Section D. All Type III Supporting Organizations Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization's of (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). 2 By reason of the relationship described in (2), did the organization's supported organization's have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If *Yes,* describe in *Part VI the role the organization's supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 3 The organization is the parent of each of its supported organizations. Complete line 3 below. c The organization susported a governmental entity. Describe in *Part VI how you supported a government entity (see instructions). 2 Activities Test. Answer (a) and (b) below. 3 Did substantially all of the organization was responsive? If *Yes,* then in *Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes of the supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was respon			1		
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization's or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization and colors and continuous working relationship with the supported organization(s). 3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a The organization is the parent of each of its supported organizations. Complete line 3 below. c The organization is the parent of each of its supported organizations. Complete line 3 below. c The organization is the parent of each of its supported organizations. Complete line 3 below. c The organization is the parent of each of its supported organizations, and how the organization determined that these activities of the organization's activities during the tax year directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities described in (a) constitute activiti	Sec	tion D. All Type III Supporting Organizations			
organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization aclose and continuous working relationship with the supported organization(s). 3 By reason of the relationship described in (2), did the organization's supported organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a The organization is the parent of each of its supported organizations. Complete line 3 below. c 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). 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 and explain how these activities described in (a) constitute activities of its activities. b Did the activities ocnstituded substantially all of the organization was responsive to those supported organization have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization's involvement. 3 Parent of Supported Organizations. Answe				Yes	No
year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a The organization satisfied the Activities Test. Complete line 2 below. b The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). 2 Activities Test. Answer (a) and (b) below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization or or more of the organization's position that its supported organizations, and how the organization or or more of the organization's position that its supported organization's movement. 2 Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported org	1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
organization's governing documents in effect on the date of notification, to the extent not previously provided? 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). By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations 1		organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			l
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 3 By reason of the relationship described in (2), did the organization's supported organization's have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a 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). 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 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 dustantially 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 position that its 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 position that its supported organization's position that its supported organization		year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			l
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 3 By reason of the relationship described in (2), did the organization's supported organization's have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a 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). 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 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 dustantially 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 position that its 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 position that its supported organization's position that its supported organization			1		
organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 3 By reason of the relationship described in (2), did the organization's supported organization's involve in the organization's involve in the organization's involvement, one or assets at all times during the tax year? If "Yes," describe in Part VI the relet the organization's supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a 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). 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 organization was responsive to those supported 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 determined that these activities during the supported 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 involvement. 3 Parent of Supported Organizations. Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. b Dild the organization exercise a substantial degree of direction ov	2				
the organization maintained a close and continuous working relationship with the supported organization(s). By creason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a 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). 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 organizations and explain how these activities directly furthered their exempt purposes, how the organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organization, and how the organization determined that these activities described in (a) constituted substantially all of its activities. b Did the activities described in (a) constitute activities that, but for the organization have the organization's involvement, one or more of the organization's position that its supported organization(s) would have engaged in these activities but for the organizations. Answer (a) and (b) below. 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 e					
significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a 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). 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 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 described in (a) constitute activities that, but for the organization in Part VI the reasons for the organization's involvement. 5 Did the activities described in (a) constitute activities that, but for the organization in Part VI the reasons for the organization's involvement. 3 Parent of Supported Organizations. Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		, ,	2		
significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a 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). 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 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 obstantially 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 position that its supported organization(s) would have engaged in these activities but for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 3 Parent of Supported Organizations. Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3				
income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a 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). 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 described in (a) constitute activities that, but for the organization determined that these activities described in (a) constitute activities that, but for the organization is involvement, one or more of the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 3 Parent of Supported Organizations. Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each					
Section E. Type III Functionally Integrated Supporting Organizations 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a					l
1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a			3		
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). 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 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 position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2	Sec	tion E. Type III Functionally Integrated Supporting Organizations			
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). 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 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 position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2	1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). Activities Test. Answer (a) and (b) below. 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. 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 organizations. Answer (a) and (b) below. Parent of Supported Organizations. Answer (a) and (b) below. 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. Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each					
The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). Activities Test. Answer (a) and (b) below. 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. 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. Parent of Supported Organizations. Answer (a) and (b) below. 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. Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	b				
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 organizations) 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. A Parent of Supported Organizations. Answer (a) and (b) below. 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	С	· ·	ructions))	
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 organizations. Answer (a) and (b) below. Parent of Supported Organizations. Answer (a) and (b) below. 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. Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	2				No
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 organizations. Answer (a) and (b) below. Parent of Supported Organizations. Answer (a) and (b) below. 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. Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
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. 2a 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. 2b 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					1
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. 2b 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. 3 Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		·			1
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. 2b 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		•			1
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. 2b 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. 3 Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			2a		
of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 3 Parent of Supported Organizations. Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. 3 Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	b	•			
reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2b 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. 3 Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each					
activities but for the organization's involvement. 2b 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. 3a b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		• •			
 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 			2b		
 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? <i>Provide details in Part VI.</i> b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each 	3	•			
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					
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	-		3a		
	h		- Ju		
	~		3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi:	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust on N	ov. 20, 1970 (explain in F	Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must of	omplete Sec	tions A through E.	
Sect	ion 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		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		
Sect	ion 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-functional	ally integrated	d Type III supporting orga	anization (see

Schedule A (Form 990 or 990-EZ) 2018

instructions).

Par	LV	Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continued)	
Secti	on D -	Distributions			Current Year
1	Amou	nts paid to supported organizations to accomplish exer	npt purposes		
2	Amou	nts paid to perform activity that directly furthers exemp	t purposes of supported		
	organ	izations, in excess of income from activity			
3	Admir	nistrative expenses paid to accomplish exempt purpose	s of supported organizations	3	
4	Amou	nts paid to acquire exempt-use assets			
5	Qualif	ied 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	Distrik	outions to attentive supported organizations to which th	e organization is responsive		
	(provi	de details in Part VI). See instructions.			
9	Distrik	outable amount for 2018 from Section C, line 6			
10		s amount divided by line 9 amount			
Secti		Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distrib	outable amount for 2018 from Section C, line 6			
2	Unde	rdistributions, if any, for years prior to 2018 (reason-			
	able c	ause required- explain in Part VI). See instructions.			
3		s distributions carryover, if any, to 2018			
а	From	2013			
b	From	2014			
С	From	2015			
	From				
	From				
		of lines 3a through e			
		ed to underdistributions of prior years			
		ed to 2018 distributable amount			
i		over from 2013 not applied (see instructions)			
i		inder. Subtract lines 3g, 3h, and 3i from 3f.			
4		outions for 2018 from Section D,			
-	line 7:	. '			
а		ed to underdistributions of prior years			
		ed to 2018 distributable amount			
		inder. Subtract lines 4a and 4b from 4.			
5		ining underdistributions for years prior to 2018, if			
_		Subtract lines 3g and 4a from line 2. For result greater			
	,	tero, explain in Part VI. See instructions.			
6		ining underdistributions for 2018. Subtract lines 3h			
•		b from line 1. For result greater than zero, explain in			
		/I. See instructions.			
7		ss distributions carryover to 2019. Add lines 3j			
'	and 4	- I			
8		down of line 7:			
		s from 2014			
		s from 2015			
		s from 2016			
		ss from 2017			
е	⊨xces	s from 2018			

Schedule A (Form 990 or 990-EZ) 2018

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Organization type (check one):

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

2018

Name of the organization Employer identification number

CRISIS TEXT LINE INC. 46-5039599

Filers of:		Section:
Form 990) or 990-EZ	X 501(c)(3) (enter number) organization
		4947(a)(1) nonexempt charitable trust not treated as a private foundation
		527 political organization
Form 990).PF	501(c)(3) exempt private foundation
1 01111 000	· · ·	4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
		covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General	Rule	
	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special I	Rules	
	sections 509(a)(1) a any one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under nd 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from , during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; line 1. Complete Parts I and II.
	year, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the ions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the y to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address),
	year, contributions is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., aplete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year
but it mu	st answer "No" on I	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to le filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization Employer identification number

CRISIS TEXT LINE INC.

46-5039599

Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	

Name of organization **Employer identification number** CRISIS TEXT LINE INC. 46-5039599 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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 Open to Public Inspection

Name of the organization

CRISIS TEXT LINE INC.

Employer identification number 46-5039599

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds o	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
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 v	writing that the assets held in donor advised	d funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be u	sed only
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose co	onferring
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, Pa	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	,	rically important land area
	Protection of natural habitat	Preservation of a certif	ied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form of	
	day of the tax year.		Held at the End of the Tax Year
	Total number of conservation easements		
	Number of conservation easements on a certified historic stru		
d	Number of conservation easements included in (c) acquired a		I I
	listed in the National Register		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the c	organization during the tax
	year -		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per		□ Vaa □ Na
6	violations, and enforcement of the conservation easements it Staff and volunteer hours devoted to monitoring, inspecting,		
6	Starr and volunteer flours devoted to florintoning, inspecting,	mandling of violations, and emorcing conse	rvation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation	on essements during the year
•	► \$	illing of violations, and emoroling conservation	on casements during the year
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 170(h)	n(4)(B)(i)
Ŭ	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation		
_	include, if applicable, the text of the footnote to the organizat	•	•
	conservation easements.		3
Par	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Oth	er Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue stateme	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	nibition, education, or research in furtherand	ce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descril	bes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement a	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of publ	ic 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 treatments	asures, or other similar assets for financial (gain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		> \$
	Assets included in Form 990, Part X		🕨 \$
LHA	For Paperwork Reduction Act Notice, see the Instructions	s for Form 990.	Schedule D (Form 990) 2018

Par	t III Organizations Maintaining Co	ollections of Ar	t, Histo	orical Tre	easures, o	r Othe	r Sir	nilar As	sets	(continu	ed)	<u>go –</u>
3	Using the organization's acquisition, accession									,		
	(check all that apply):											
а	Public exhibition	d	ı 🔲 i	Loan or exc	hange progra	ams						
b	Scholarly research	е										
С	Preservation for future generations											
4	Provide a description of the organization's co	ollections and explain	n how the	ey further th	ne organizatio	n's exer	mpt p	urpose in	Part XII	II.		
5	During the year, did the organization solicit or											
	to be sold to raise funds rather than to be ma									Yes		No
Par	t IV Escrow and Custodial Arrang								t IV, line	e 9, or		
	reported an amount on Form 990, Par			· ·				ŕ	,	•		
	Is the organization an agent, trustee, custodia	an or other intermed	iary for c	ontribution	s or other ass	sets not	inclu	ded				
	on Form 990, Part X?		•							Yes		No
b	If "Yes," explain the arrangement in Part XIII a											
	g						Γ			mount		
С	Beginning balance							1c				
d	Additions during the year							1d				
۰ و	Distributions during the year							1e				
f	Ending balance							1f				
	Did the organization include an amount on Fo									Yes		No
	If "Yes," explain the arrangement in Part XIII.						•		—			NO
	t V Endowment Funds. Complete it											_
	The state of the s	(a) Current year		rior year	(c) Two year			hree years	hack 1	o) Four v	vaare h	nack
10	Beginning of year balance	(a) Current year	(D) F	noi yeai	(C) TWO year	15 Dack	(u) 1	iliee years	Dack (e j i our y	tais L	Jack
b	Contributions											
C	Net investment earnings, gains, and losses								-+			
d	Grants or scholarships											
е	Other expenditures for facilities											
_	and programs								-			
Ť	Administrative expenses											
g	End of year balance				<u> </u>							
2	Provide the estimated percentage of the curre			i, column (a)) held as:							
а	Board designated or quasi-endowment		_%									
b	Permanent endowment	%										
С	Temporarily restricted endowment	%										
	The percentages on lines 2a, 2b, and 2c shou											
3a	Are there endowment funds not in the posses	ssion of the organiza	tion that	are held ar	nd administer	ed for th	ne org	anization				
	by:										/es	No
	(i) unrelated organizations									3a(i)		
										3a(ii)		
b	If "Yes" on line 3a(ii), are the related organizate	tions listed as requir	ed on So	chedule R?						3b		
4	Describe in Part XIII the intended uses of the		wment fu	unds.								
Par	t VI Land, Buildings, and Equipm											
	Complete if the organization answered	d "Yes" on Form 990	, Part IV	, line 11a. S	See Form 990	, Part X,	line '	10.				
	Description of property	(a) Cost or o			t or other			nulated	(0	d) Book	value	
		basis (investr	nent)	basis	(other)	de	preci	ation	\perp			
1a	Land											
b	Buildings								1			
С	Leasehold improvements											
d	Equipment	I		9	0,841.		64	,357.		26	,48	4.
е	Other											
	. Add lines 1a through 1e. (Column (d) must ed		X. colum	n (B) line 1	0c.)	_ 		-		26	,48	4.

Schedule D (Form 990) 2018

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost	t or end-or-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost	t or end-of-year market value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, I	ine 11d. See Form 990, Part X, line 15	j
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	e 15.)		▶
Complete if the organization answered "Yes"	on Form 990, Part IV. I	ine 11e or 11f. See Form 990. Part X.	line 25.
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2) DEFERRED RENT		95,800.	
		23,000.	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)		05.060	
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 25.) ►	95,800.	
2. Liability for uncertain tax positions. In Part XIII, provide		3	· —
organization's liability for uncertain tax positions under	FIN 48 (ASC 740). Che	eck here if the text of the footnote has	been provided in Part XIII

832053 10-29-18

Schedule D (Form 990) 2018

Par	TXI Reconciliation of Revenue per Audited Financial	Statements With Revenue	per Return.	
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1		
а	Net unrealized gains (losses) on investments			
b	Donated services and use of facilities			
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)	4b		
C	Add lines 4a and 4b			
5 Dar	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line rt XII Reconciliation of Expenses per Audited Financial	Statements With Expense	5	
Fai		•	es per neturn.	
	Complete if the organization answered "Yes" on Form 990, Part			
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	0-		
a	Donated services and use of facilities			
b	Prior year adjustments			
C	Other losses			
d	Other (Describe in Part XIII.)		20	
e o	Add lines 2a through 2d			
3 4	Subtract line 2e from line 1			
4 a	Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)			
	A 1.11: A 1.41		4c	
5	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, li			
	rt XIII Supplemental Information.	TE 10./		
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a	and 4: Part IV. lines 1b and 2b: Pa	rt V. line 4: Part X. line 2: Part	XI.
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide	· · · · · · · · · · · · · · · · · · ·		,
		•		

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990.

Open to Public

Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury

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

CRISIS TEXT LINE INC.

Employer identification number 46-5039599

			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		<u>X</u>
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
	The organization?	6a		<u>X</u>
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		<u>X</u>
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		<u>X</u>
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2018

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benents	(6)(1)(0)	reported as deferred on prior Form 990
(1) NANCY LUBLIN	(i)	135,000.	0.	0.	4,517.	35,229.	174,746.	0.
CEO, SECRETARY	(ii)	111,539.	0.	0.	0.	0.	111,539.	0.
(2) JASON BENNETT	(i)	350,000.	0.	0.	10,500.	29,745.	390,245.	0.
СТО	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) SARAH BERNARD	(i)	308,615.	0.	0.	9,415.	19,162.	337,192.	0.
C00	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MATTHEW MORRIS	(i)	147,500.	0.	0.	4,956.	13,535.	165,991.	0.
DIRECTOR, DIGITAL AND CONT	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ELANA JACOBS	(i)	152,308.	0.	0.	5,319.	24,333.	181,960.	0.
DIRECTOR OF CTL INTERNATIO	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) ROBERT W. FILBIN	(i)	156,750.	0.	0.	5,245.	12,503.	174,498.	0.
CHIEF DATA OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) SHAIRI TURNER-DAVIS	(i)	250,000.	0.	0.	2,692.	32,278.	284,970.	0.
CHIEF MEDICAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) JEFFREY FAIRCHILD	(i)	151,346.	0.	0.	3,617.	32,515.	187,478.	0.
LEAD DEV OPS ENGINEER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

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

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

CRISIS TEXT LINE INC.

Employer identification number 46-5039599

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

- A DEDICATED GROUP OF DATA SCIENTISTS THAT COLLECT AND SHARE DATA STATISTICAL DATA AND DEVELOP METRICS FROM TEXTING ACTIVITY AND CRISIS COUNSELOR DEMOGRAPHICS.

INTERNATIONAL EXPANSION - ALL COSTS ASSOCIATED WITH SETTING UP PARTNERSHIPS WITH ORGANIZATIONS OUTSIDE OF THE UNITED STATES TO EXPAND TEXTING SERVICES GLOBALLY

INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. EXPENSES \$ 1,640,407.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 HAS BEEN REVIEWED BY THE FINANCE COMMITTEE OF THE BOARD AS WELL AS BOARD MEMBERS WHO ARE RESPONSIBLE FOR FINANCIAL AND AUDIT MATTERS PRIOR TO FILING. THE FINAL FORM 990 (FILED WITH THE IRS) WILL BE AVAILABLE THE NEXT MEETING OF THE BOARD FOR INSPECTION. IN ADDITION, UPON REQUEST OF ANY BOARD MEMBER, A COPY WILL BE PROVIDED. IF THERE ARE ANY MATERIAL AN AMENDED FORM 990 WILL BE FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

THE ORGANIZATION ENFORCES THE CONFLICT OF INTEREST POLICY BY MONITORING KNOWN RELATIONSHIPS, QUESTIONNAIRES THAT INCLUDE INQUIRIES OF ANY NEW RELATIONSHIPS, AND NOTING ANY CHANGES IN DISCLOSED INFORMATION. ARE ANY CONFLICTS CIRCUMSTANCES ARE REVIEWED BY THE COMPANY GENERAL COUNSEL AND THE BOARD BEFORE A DECISION FOR APPROVAL.

FORM 990, PART VI, SECTION B, LINE 15:

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2018)

832211 10-10-18

Name of the organization CRISIS TEXT LINE INC.	Employer identification number 46-5039599
THE COMPANY HIRED A HEAD OF HUMAN CAPITAL TO MONITOR AND H	IRE AN OUTSIDE
CONSULTING FIRM TO CONDUCT COMPENSATION REVIEWS AS WELL AS	MEET ON AN
ANNUAL BASIS WITH COMPENSATION COMMITTEE OF THE BOARD. IN	ADDITION,
PERIODIC REVIEWS OF CURRENT PUBLISHED DATA FROM KNOWN WEBS	ITES, INCLUDING
GUIDESTAR, CHARITY NAVIGATOR, AND NY NON-PROFIT NETWORK AN	NUAL SALARY
SURVEY, ARE PERFORMED TO GATHER STATISTICAL DATA.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTERE	ST POLICY, AND
FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.	
	_

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

CRISIS TEXT LI	NE INC.					46-50395	99	
Part I Identification of Disregarded Entities. Complet	e if the organization answered "Yes	on Form 990, Part IV, line 33	3.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state o foreign country)	(d) Total inco	me End-of-year		Direct o	(f) controlling ntity	9
CRISIS TEXT LINE INTERNATIONAL								
PO BOX 1144								
NEW YORK, NY 10159		NEW YORK				CRISIS TEXT	LINE I	NC.
Part II Identification of Related Tax-Exempt Organizations during the tax year.	tions. Complete if the organization	answered "Yes" on Form 990), Part IV, line 34, t	pecause it had one	or more	related tax-exe	mpt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	Dire	(f) ct controlling entity	conti	g) 512(b)(13) rolled tity?
		g.,		501(c)(3))			Yes	No

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(I	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	I	ortionate itions?	ate Code V-UBI amount in box 20 of Schedule		Percentage ownership
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes No	<u> </u>
	1										
	1										
	1										
	1										
	1										
	1										
	1										
-	1										
	1										
-	1										
							L		<u> </u>		

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	tion b)(13) rolled tity?
LORIS.AI, INC 82-3659156		country)						Yes	No
PO BOX 1144 NEW YORK, NY 10159	DEVELOP EMPATHY TRAINING TOOLS		CRISIS TEXT LINE INC.	C CORP	0.	1,034,811.	53.00%		X
		141		0 00112	•	2,001,011.	30,001		

1a

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Yes No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b	Gift, grant, or capital contribution to related organization(s)				1b		_ <u>x</u>	
С	d Loans or loan guarantees to or for related organization(s) e Loans or loan guarantees by related organization(s) f Dividends from related organization(s) g Sale of assets to related organization(s) h Purchase of assets from related organization(s) i Exchange of assets with related organization(s) j Lease of facilities, equipment, or other assets to related organization(s) k Lease of facilities, equipment, or other assets from related organization(s) Performance of services or membership or fundraising solicitations for related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) n Sharing of paid employees with related organization(s) o Sharing of paid employees with related organization(s) p Reimbursement paid to related organization(s) for expenses q Reimbursement paid by related organization(s) for expenses c Other transfer of cash or property from related organization(s) s Other transfer of cash or property from related organization(s) If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresho (a) Name of related organization Method of determining (b) Transaction Type (a·s)							
					1d		_X_	
е	Loans or loan guarantees by related organization(s)				1e		_X_	
f	Dividends from related organization(s)				1f		X	
g	Sale of assets to related organization(s)				1g		X	
					1h		X	
i	Exchange of assets with related organization(s)				1i		X	
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		_X_	
							X	
i Exchange of assets with related organization(s) j Lease of facilities, equipment, or other assets to related organization(s) k Lease of facilities, equipment, or other assets from related organization(s) l Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) o Sharing of paid employees with related organization(s) p Reimbursement paid to related organization(s) for expenses q Reimbursement paid by related organization(s) for expenses r Other transfer of cash or property to related organization(s) s Other transfer of cash or property from related organization(s) 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.								
					11		X	
					1m	Х	_X_	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)								
р	Reimbursement paid to related organization(s) for expenses				1p		X	
q	Reimbursement paid by related organization(s) for expenses				1q		X	
					1r		<u>X</u>	
	P Reimbursement paid to related organization(s) for expenses Reimbursement paid by related organization(s) for expenses T Other transfer of cash or property to related organization(s) S Other transfer of cash or property from related organization(s) If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. (a) (b) (c) (d) Method of determining amount in type (a-s) Method of determining amount in type (a-s)			1s		X		
2	If the answer to any of the above is "Yes," see the instructions for information on w	ho must complete th	nis line, including covered rela	tionships and transaction thresholds.				
	(a)			(d)				
	Name of related organization		Amount involved	Method of determining amount in	volved			
		type (a-s)						
(1)								
(2)								
(3)								
(4)								
/E\								
(5)								
(6)								
(6)	10.00.10	<u> </u>		Cahadula	D (Eor	n 000\	2019	
332163	10-02-18	2.5		Schedule	n (For	11 990)	2018	

Page 4

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Dispretion allocat	opor- late tions?	General manage partner	(k) Al or Percentage ownership
									+
									000) 0040

NOTICE 2018-100

Form	990-T	Ŀ	l	OMB No. 1545-0687					
			(and pr		0040				
		For ca	lendar year 2018 or other tax year beginni	ing		, and ending			2018
	ment of the Treasury		•			ns and the latest inform			Open to Public Inspection for
A	Check box if address changed		Do not enter SSN numbers on the Name of organization (Ch			and see instructions.)	((3).	D Emplo	501(c)(3) Organizations Only oyer identification number oyees' trust, see
D F:		D-!	CRISIS TEXT LIN	TE TMC					ctions.) 6 – 5 0 3 9 5 9 9
	empt under section $ 501(\mathbf{c})(3) $	Print or	Number, street, and room or suit		caa in	etructions		E Unrela	ated business activity code
	408(e) 220(e)	Туре	PO BOX 1144	.0.10.11 41 .0. 50	, 300 111	Structions.		(See ir	nstructions.)
	408A 530(a)		City or town, state or province, c	ountry, and ZIP or	foreigi	n postal code		1	
	529(a)			L0159					
C Boo	k value of all assets nd of year 36,378,3	٥.	F Group exemption number (See		<u> </u>				
			G Check organization type ►				401(a)		Other trust
		-	tion's unrelated trades or business EE STATEMENT 1	ses. \blacktriangleright	1		the only (or first) un		4han ana
			ice at the end of the previous sente	nnca complete Da	rte I and		complete Parts I-V.		
	iness, then complete		·	ance, complete r ai	ito i aiii	a II, complete a Schedule	IVI IOI Each addition	ai iiaut	OI .
			ooration a subsidiary in an affiliated	d group or a paren	t-subsi	diary controlled group?	▶ [Ye	s X No
			tifying number of the parent corpo						
J The			THE ORGANIZATION	1		Telepho	one number 🕨 6	31-	509-2797
Par	t I Unrelated	Trac	de or Business Income			(A) Income	(B) Expenses	3	(C) Net
	Gross receipts or sale								
	Less returns and allow			ance ►	1c				
	Cost of goods sold (S Gross profit. Subtract		A, line 7)		3				
	•		rom line 1c h Schedule D)		4a				
			art II, line 17) (attach Form 4797)		4b				
			sts		4c				
			ship or an S corporation (attach sta		5				
	Rent income (Schedu	, .			6				
			ne (Schedule E)		7				
			nd rents from a controlled organiza		8				
			on 501(c)(7), (9), or (17) organizat		9				
			me (Schedule I)		10 11				
			e J) ns; attach schedule)		12				
	Total. Combine lines		ah 12			0.			
Par			ot Taken Elsewhere (See	e instructions fo	r limita				
			utions, deductions must be dire	•			,		
14			rectors, and trustees (Schedule K)					14	
15								15	
16								16	
17 18	Interest (attach sche	ا	ee instructions)					17 18	
19			ee instructions)					19	
20	Charitable contribution	ons (Se	e instructions for limitation rules)					20	
21			562)						
22			n Schedule A and elsewhere on ret					22b	
23	Depletion							23	
24			mpensation plans					24	
25								25	
26 27			chedule I)					26	_
27 28			hedule J)					27 28	
20 29			nedule) 14 through 28					29	0.
30			ncome before net operating loss de					30	0.
31			loss arising in tax years beginning					31	
32	Unrelated business t	axable ii	ncome. Subtract line 31 from line 3	30		,		32	0.

823701 01-09-19 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-T** (2018)

Part I	Total Unrelated Business Taxa	ble Income				
33	Total of unrelated business taxable income compu	ted from all unrelated trades or business	es (see instructions)		. 33	3 0.
34	Amounts paid for disallowed fringes				34	33,421.
35	Deduction for net operating loss arising in tax year	s beginning before January 1, 2018 (see	instructions)		35	5
36	Total of unrelated business taxable income before					
	lines 33 and 34	·			36	6 33,421.
37	Specific deduction (Generally \$1,000, but see line				37	6 33,421. 7 1,000.
38	Unrelated business taxable income. Subtract line					
	anter the smaller of zero or line 26		,		38	32,421.
Part I	/ Tax Computation					-
39	Organizations Taxable as Corporations. Multiply	line 38 by 21% (0.21)		•	- 39	6,808.
40	Trusts Taxable at Trust Rates. See instructions for				-	
-10	Tax rate schedule or Schedule D (Fo				- 40	0
41	Proxy tax. See instructions				4	
42	Alternative minimum tax (trusts only)				42	
43	Tax on Noncompliant Facility Income. See instru	ctions				
44	Total . Add lines 41, 42, and 43 to line 39 or 40, wh	nichever annlies			44	5 000
Part \		попочет цррпоз			4-	• 0,000
	Foreign tax credit (corporations attach Form 1118;	trusts attach Form 1116)	45a			
b						
C	General business credit. Attach Form 3800					
d	Credit for prior year minimum tax (attach Form 88					
_	Total credits. Add lines 45a through 45d				45	ie
46	Subtract line 45e from line 44				46	C 000
47	Other taxes. Check if from: Form 4255	Form 8611 Form 8697 Fo	rm 8866 Other	(attach schedule)		
48	Total tax. Add lines 46 and 47 (see instructions)					C 000
49	2018 net 965 tax liability paid from Form 965-A or					•
	Payments: A 2017 overpayment credited to 2018					
	2018 estimated tax payments					
	Tax deposited with Form 8868			7,000		
d	Foreign organizations: Tax paid or withheld at sour	ce (see instructions)	50d	<u> </u>		
	Backup withholding (see instructions)					
	Credit for small employer health insurance premiu					
	Other credits, adjustments, and payments:					
·		Other Total	▶ 50g			
51	Total payments. Add lines 50a through 50g		•		5	7,000.
52	Estimated tax penalty (see instructions). Check if F	orm 2220 is attached 🕨 🗓			52	•
53	Tax due. If line 51 is less than the total of lines 48,			•	- 53	3
54	Overpayment. If line 51 is larger than the total of I	ines 48, 49, and 52, enter amount overpa	aid	>	54	100
55	Enter the amount of line 54 you want: Credited to	2019 estimated tax	192. R	efunded >	- 55	5 0.
Part \	Statements Regarding Certain	Activities and Other Inform	nation (see instru	uctions)		
56	At any time during the 2018 calendar year, did the	organization have an interest in or a sigr	nature or other author	ity		Yes No
	over a financial account (bank, securities, or other)	in a foreign country? If "Yes," the organ	ization may have to fi	e		
	FinCEN Form 114, Report of Foreign Bank and Fina	ancial Accounts. If "Yes," enter the name	of the foreign country			
	here					X
57	During the tax year, did the organization receive a	distribution from, or was it the grantor of	f, or transferor to, a fo	oreign trust?		X
	If "Yes," see instructions for other forms the organ	zation may have to file.				
58	Enter the amount of tax-exempt interest received o					
Sign	Under penalties of perjury, I declare that I have examined correct, and complete. Declaration of preparer (other that				nedge ar	ιια pellet, it is true,
Here		l			-	e IRS discuss this return with
	Signature of officer	Date CEO Title				parer shown below (see
	T- : -	T	Т	<u> </u>	instruct	12 .00
	Print/Type preparer's name	Preparer's signature	Date	Check		PTIN
Paid	CADAU ATTEDY		00/00/10	self- employe		D01470672
Prepa			09/09/19	Finnel: FIN B		P01470673 13-1610809
Use C		ROCK AVENUE, SUITE	7 200	Firm's EIN		TO-TOTOODA
		ER, NJ 07936	200	Phone no.	(97	73) 929-3500
823711 01	<u> </u>	LIC, 110 07550		i nono no.	, , , ,	Form 990-T (2018
						. 5 3 - 12010

42

2018.04020 CRISIS TEXT LINE INC.

Schedule A - Cost of Good	s Sold. Enter	method of inver	ntory v	aluation > N/A					_
1 Inventory at beginning of year				Inventory at end of year			6		
2 Purchases				Cost of goods sold. Su					
3 Cost of labor				from line 5. Enter here	and in I	Part I,			
4a Additional section 263A costs				line 2			7		
(attach schedule)	4a		8	Do the rules of section	263A (with respect to		Yes N	lo
b Other costs (attach schedule)				property produced or a	cquirec	for resale) apply to			
5 Total. Add lines 1 through 4b	5			the organization?					
Schedule C - Rent Income (see instructions)	(From Real	Property and	l Per	sonal Property L	ease	d With Real Prope	rty)		
Description of property									
(1)									_
(2)									_
(3)									_
(4)									_
_ (/	2. Rent receiv	ed or accrued							
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	e than	of rent for p	personal	onal property (if the percentag property exceeds 50% or if ed on profit or income)	ge	3(a) Deductions directly or columns 2(a) and	onnected with the inc 2(b) (attach schedule	ome in	
(1)									_
(2)									
(3)									
(4)									
Total	0.	Total			0.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	n (A)	▶			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	•	0).
Schedule E - Unrelated Del	ot-Financed	Income (see	instru	ctions)		•			
			2	. Gross income from or allocable to debt-	, ,	3. Deductions directly conne to debt-financed	d property		
1. Description of debt-fi	inanced property			financed property	(a)	Straight line depreciation (attach schedule)	(b) Other ded (attach sch		
(1)									_
(2)									_
(3)									_
(4)									_
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis allocable to nced property h schedule)	6	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	8. Allocable of (column 6 x total 3(a) and	l of column	
(1)			1	%					_
(2)				%					_
(3)				%					_
(4)				%					_
	•			70		Enter here and on page 1, Part I, line 7, column (A).	Enter here and o		
Totals						0.		0).
Total dividende-received deductions							 		÷

Form **990-T** (2018)

Schedule F - Interest,	Annuities	s, Royalt	ies, an					tions	see ins	struction	ns)
				Exempt (Controlled O	rganizatio	ons				
Name of controlled organiza	ition	2. Emp identific numb	ation	3. Net unr (loss) (see	elated income instructions)	4. Tota payn	al of specified nents made	includ	t of column 4 ded in the contration's gross i	rolling	6. Deductions directly connected with income in column 5
(1)											
(2)											
(3)											
(4)											
Nonexempt Controlled Organ	izations			-							
7. Taxable Income		related income ee instructions)		9. Total	of specified payr made	ments	10. Part of coluin the controlli gross		nization's	11 . De wit	eductions directly connected th income in column 10
(1)											
(2)											
(3)											
(4)											
							Add colun Enter here and line 8, o		1, Part I,		dd columns 6 and 11. here and on page 1, Part I, line 8, column (B).
Totals						▶			0.		0.
Schedule G - Investme		ne of a S	ection	501(c)(7	'), (9), or (17) Org	anization				
(see inst	tructions)				1				1		
1 . Des	cription of incon	ne			2. Amount of	income	 Deduction directly connected (attach sched) 	cted	4. Set- (attach s	asides schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)											
(2) (3)											
(3)											
(4)											
					Enter here and Part I, line 9, co						Enter here and on page 1, Part I, line 9, column (B).
Totals				<u></u>	<u> </u>	0.					0.
Schedule I - Exploited (see instr	-	Activity	Income	e, Other	Inan Adv	/ertisin	g Income				
1. Description of exploited activity	2. Gi unrelated l income trade or b	ousiness from	directly o with pro of unr	penses connected oduction related s income	4. Net incon from unrelated business (co minus colum gain, comput through	trade or blumn 2 n 3). If a e cols. 5	5. Gross incompression from activity is not unrelated business incompressions.	hat ed	6. Exp attribut colur	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)											
(1) (2) (3) (4)											
(3)											
(4)											
	Enter here page 1, line 10, c	Part I,	page 1	re and on I, Part I, col. (B).							Enter here and on page 1, Part II, line 26.
Totals	•	0.		0.							0.
Schedule J - Advertisi											
Part I Income From	Periodica	als Repo	rted or	n a Cons	solidated	Basis					
1. Name of periodical		2. Gross advertising income		3. Direct ertising costs	or (loss) (c col. 3). If a g	tising gain ol. 2 minus ain, compute nrough 7.	5. Circula income		6. Reade		7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) (2) (3) (4)											-
(3)	- 		+								-
(4)	- 		+								-
\''											
Totals (carry to Part II, line (5))	>	0	•	0							0.
											Form 990-T (2018)

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5)	0.	0.				0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14	0.		

Form **990-T** (2018)

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 1
BUSINESS ACTIVITY

QUALIFIED TRANSPORTATION FRINGE BENEFITS

TO FORM 990-T, PAGE 1

FORM 990-T UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s)				Identifying N	umber
CRISIS TEX	T LINE INC.			46-50	39599
(A)	(B)	(C)	(D)	(E)	(F)
*Date	Amount	Adjusted Balance Due	Number Days Balance Due	Daily Penalty Rate	Penalty
		-0-			
04/15/18	1,702.	1,702.	61	.000136986	14.
06/15/18	1,702.	3,404.	92	.000136986	43.
09/15/18	1,702.	5,106.	91	.000136986	64.
12/15/18	1,702.	6,808.	16	.000136986	15.
12/31/18	0.	6,808.	135	.000164384	151.
Penalty Due (Sum of Colu	umn F).				

^{*} Date of estimated tax payment, withholding credit date or installment due date.

FORM 990-T (WAIVER) UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s)				Identifying No	umber
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			
12/31/18	0.	0.	135	.000164384	
enalty Due (Sum of Colum			1		

^{*} Date of estimated tax payment, withholding credit date or installment due date.

Underpayment of Estimated Tax by Corporations

Attach to the corporation's tax return.

FORM 990-T

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form2220 for instructions and the latest information.

2018

Name

CRISIS TEXT LINE INC.

Employer identification number 46-5039599

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220.

F	Part I Required Annual Payment		,					
	- /							6 000
1	Total tax (see instructions)					·····	1	6,808.
2 :	a Personal holding company tax (Schedule PH (Form 1120), line	26)	included on line 1		2a			
	b Look-back interest included on line 1 under section 460(b)(2)							
•	contracts or section $167(g)$ for depreciation under the income		· -		2b			
	continuous of coordinates (g) for depressions under the moonie							
c	c Credit for federal tax paid on fuels (see instructions)				2c			
	d Total. Add lines 2a through 2c						2d	
3	Subtract line 2d from line 1. If the result is less than \$500, do	not (complete or file this form.	The corpo	ation			
	does not owe the penalty						3	6,808.
4	Enter the tax shown on the corporation's 2017 income tax retu	ırn. S	See instructions. Caution:	If the tax	is zero			
	or the tax year was for less than 12 months, skip this line an	ıd en	ter the amount from line :	3 on line 5			4	
5	Required annual payment. Enter the smaller of line 3 or line	4. If	the corporation is required	d to skip lii	ne 4,			6 000
	enter the amount from line 3 Part II Reasons for Filing - Check the boxes belo						5	6,808.
	even if it does not owe a penalty. See instructions.	w tna	at apply. It any boxes are c	пескеа, тп	e corporation	must file Form 2220)	
_	The corporation is using the adjusted seasonal installn	mant.	mathad					
6 7	The corporation is using the annualized income installing							
ν Ω	The corporation is a "large corporation" figuring its firs			the prior	vaarie tav			
Ů	Part III Figuring the Underpayment	stieu	uneu mstammem baseu or	i ille prior	year 5 tax.			
			(a)		(b)	(c)		(d)
9	Installment due dates. Enter in columns (a) through		(4)		(-)	(6)		(-)
	Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers:							
	Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	9	04/15/18	06/	15/18	09/15/1	8	12/15/18
10	Required installments. If the box on line 6 and/or line 7							
	above is checked, enter the amounts from Sch A, line 38. If							
	the box on line 8 (but not 6 or 7) is checked, see instructions							
	for the amounts to enter. If none of these boxes are checked,							
	enter 25% (0.25) of line 5 above in each column	10	1,702.		1,702.	1,70	2.	1,702.
11	Estimated tax paid or credited for each period. For							
	column (a) only, enter the amount from line 11 on line 15.							
	See instructions	11						
	Complete lines 12 through 18 of one column							
	before going to the next column.							
	Enter amount, if any, from line 18 of the preceding column	12						
	Add lines 11 and 12	13			4 500			- 105
	, ,	14	0		1,702.	3,40		5,106.
15	, , , , , , , , , , , , , , , , , , , ,	15	0.		0.		0.	0.
16	If the amount on line 15 is zero, subtract line 13 from line	_			1 700	2 40	,	
	14. Otherwise, enter -0-	16			1,702.	3,40	4.	
17	Underpayment. If line 15 is less than or equal to line 10,							
	subtract line 15 from line 10. Then go to line 12 of the next	_	1 700		1 700	1 70	<u></u>	1 700
40	column. Otherwise, go to line 18	17	1,702.		1,702.	1,70	۷٠	1,702.
18								
	from line 15. Then go to line 12 of the next column	18						

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

For Paperwork Reduction Act Notice, see separate instructions.

Form 2220 (2018)

Part IV Figuring the Penalty

			(a)	(b)	(c)	(d)
9	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19				
n	Number of days from due date of installment on line 9 to the	13				
,	date shown on line 19	20				
ı	Number of days on line 20 after 4/15/2018 and before 7/1/2018	21				
2	Underpayment on line 17 x Number of days on line 21 x 5% (0.05) 365	22	\$	\$	\$	\$
3	Number of days on line 20 after 06/30/2018 and before 10/1/2018	23				
4	Underpayment on line 17 x Number of days on line 23 x 5% (0.05)	24	\$	\$	\$	\$
5	Number of days on line 20 after 9/30/2018 and before 1/1/2019	25				
6	Underpayment on line 17 x Number of days on line 25 x 5% (0.05)	26	\$	\$	\$	\$
7	Number of days on line 20 after 12/31/2018 and before 4/1/2019	27	SEI	ATTACHED	WORKSHEET	
В	Underpayment on line 17 x Number of days on line 27 x 6% (0.06)	28	\$	\$	\$	\$
9	Number of days on line 20 after 3/31/2019 and before 7/1/2019	29				
)	Underpayment on line 17 x Number of days on line 29 x *% 365	30	\$	\$	\$	\$
ı	Number of days on line 20 after 6/30/2019 and before 10/1/2019	31				
2	Underpayment on line 17 x Number of days on line 31 x *% 365	32	\$	\$	\$	\$
3	Number of days on line 20 after 9/30/2019 and before 1/1/2020	33				
ļ	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$	\$
5	Number of days on line 20 after 12/31/2019 and before 3/16/2020	35				
3	Underpayment on line 17 x Number of days on line 35 x *%	36	\$	\$	\$	\$
	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$	\$

^{*} Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

**SEE WAIVER 2220

Form **2220** (2018)

FORM 990-T UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s)				Identifying N	umber
CRISIS TEXT	LINE INC.			46-50	39599
(A)	(B)	(C)	(D)	(E)	(F)
*Date	Amount	Adjusted Balance Due	Number Days Balance Due	Daily Penalty Rate	Penalty
		-0-			
04/15/18	1,702.	1,702.	61	.000136986	14
06/15/18	1,702.	3,404.	92	.000136986	43
09/15/18	1,702.	5,106.	91	.000136986	64
12/15/18	1,702.	6,808.	16	.000136986	15
12/31/18	0.	6,808.	135	.000164384	151
nalty Due (Sum of Colu	mn F).				287

^{*} Date of estimated tax payment, withholding credit date or installment due date.

Department of the Treasury

Internal Revenue Service

RECALCULATION FOR WAIVER OF PENALTY

Underpayment of Estimated Tax by Corporations

Attach to the corporation's tax return.

► Go to www.irs.gov/Form2220 for instructions and the latest information.

OMB No. 1545-0123

2018

Name

CRISIS TEXT LINE INC.

Employer identification number 46-5039599

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220.

F	Part I Required Annual Payment							
1	Total tax (see instructions)						1	6,808.
					1 1			
	Personal holding company tax (Schedule PH (Form 1120), line				2a			
b	Look-back interest included on line 1 under section $460(b)(2)$							
	contracts or section $167(g)$ for depreciation under the income	fore	cast method		2b			
	Credit for federal tax paid on fuels (see instructions)							
	Total. Add lines 2a through 2c						2d	
3	Subtract line 2d from line 1. If the result is less than \$500, $\ensuremath{\text{do}}$	not (complete or file this form.	The corpo	ration			6 000
	does not owe the penalty						3	6,808.
4	Enter the tax shown on the corporation's 2017 income tax retu							
	or the tax year was for less than 12 months, skip this line ar	id en	ter the amount from line	3 on line 5	j		4	
_					_			
5	Required annual payment. Enter the smaller of line 3 or line			•	-		_	C 000
Г	enter the amount from line 3 Part II Reasons for Filing - Check the boxes belo						5	6,808.
	even if it does not owe a penalty. See instructions.	w m	at apply. If any boxes are	спескеа, п	ie corporation	must tile Fortil 22	220	
_								
6	The corporation is using the adjusted seasonal installr							
7	The corporation is using the annualized income install							
8	The corporation is a "large corporation" figuring its firs Part III Figuring the Underpayment	st rec	uirea installment basea o	n the prior	year's tax.			
•	art iii Tiguring the Onderpayment		(-)		/b)	(2)		(4)
٨	Installment due dates. Enter in columns (c) through		(a)		(b)	(c)		(d)
9	Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers; Use 5th month), 6th, 9th, and 12th months of the							
	Use 5th month), 6th, 9th, and 12th months of the	9	04/15/18	067	15/18	09/15/	1 2	12/15/18
10	corporation's tax year Required installments. If the box on line 6 and/or line 7	פ	04/13/10	007	13/10	05/15/	<u> </u>	12/13/10
10	above is checked, enter the amounts from Sch A, line 38. If							
	the box on line 8 (but not 6 or 7) is checked, see instructions							
	for the amounts to enter. If none of these boxes are checked.							
	enter 25% (0.25) of line 5 above in each column	10						
11	Estimated tax paid or credited for each period. For	10						
' '	column (a) only, enter the amount from line 11 on line 15.							
	See instructions	11						
	Complete lines 12 through 18 of one column							
	before going to the next column.							
12	Enter amount, if any, from line 18 of the preceding column	12						
	Add lines 11 and 12	13						
	Add amounts on lines 16 and 17 of the preceding column	14						
	Subtract line 14 from line 13. If zero or less, enter -0-	15						
	If the amount on line 15 is zero, subtract line 13 from line							
	14. Otherwise, enter -0-	16						
17	Underpayment. If line 15 is less than or equal to line 10,							
	subtract line 15 from line 10. Then go to line 12 of the next							
	column. Otherwise, go to line 18	17						
18	Overpayment. If line 10 is less than line 15, subtract line 10	<u> </u>						
	from line 15. Then go to line 12 of the next column	18						
	g g or another obtaining							

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed. For Paperwork Reduction Act Notice, see separate instructions.

Form 2220 (2018)

Form 2220 (2018)

Part IV Figuring the Penalty

		(a)	(b)	(c)	(d)
ne date of payment or the 15th day of the 4th month e close of the tax year, whichever is earlier. orations with tax years ending June 30 corporations: Use 3rd month instead of 4th month. 90-PF and Form 990-T filers: Use 5th month of 4th month.) See instructions	19				
of days from due date of installment on line 9 to the					
wn on line 19	20				
of days on line 20 after 4/15/2018 and before 7/1/2018	21				
yment on line 17 x N <u>umber of days on line 21 x 5% (0.05)</u> 365	22	\$	\$	\$	\$
of days on line 20 after 06/30/2018 and before 10/1/2018	23				
yment on line 17 x Number of days on line 23 x 5% (0.05)	24	\$	\$	\$	\$
of days on line 20 after 9/30/2018 and before 1/1/2019	25				
yment on line 17 x Number of days on line 25 x 5% (0.05)	26	\$	\$	\$	\$
of days on line 20 after 12/31/2018 and before 4/1/2019	27				
yment on line 17 x N <u>umber of days on line 27 x</u> 6% (0.06)	28	\$	\$	\$	\$
of days on line 20 after 3/31/2019 and before 7/1/2019	29				
yment on line 17 x Number of days on line 29 x *%	30	\$	\$	\$	\$
of days on line 20 after 6/30/2019 and before 10/1/2019	31				
yment on line 17 x N <u>umber of days on line 31 x</u> *%	32	\$	\$	\$	\$
of days on line 20 after 9/30/2019 and before 1/1/2020	33				
yment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$	\$
of days on line 20 after 12/31/2019 and before 3/16/2020	35				
yment on line 17 x N <u>umber of days on line 35 x</u> *%	36	\$	\$	\$	\$
s 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$	\$
s 2:	366 2, 24, 26, 28, 30, 32, 34, and 36	366 2, 24, 26, 28, 30, 32, 34, and 36 Add columns (a) through (d) of line 37. Enter the total he	366 2, 24, 26, 28, 30, 32, 34, and 36 Add columns (a) through (d) of line 37. Enter the total here and on Form 1120,	366 2, 24, 26, 28, 30, 32, 34, and 36 37 \$ \$ Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the compara	366 2, 24, 26, 28, 30, 32, 34, and 36 37 \$ \$ \$ Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable

^{*} Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Form **2220** (2018)

NOTICE 2018-100

FORM 990-T (WAIVER) UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s)	Identifying N	Identifying Number			
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			
12/31/18	0.	0.	135	.000164384	
Penalty Due (Sum of Col	umn F)			•	0.

^{*} Date of estimated tax payment, withholding credit date or installment due date.

(Rev. January 2019)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-1709

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit https://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only support or capital to a copies peopled.

Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or Type or print CRISIS TEXT LINE INC. 46-5039599 File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for filina vour PO BOX 1144 return. See instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10159 Enter the Return Code for the return that this application is for (file a separate application for each return) Return Application Application Return Code Is For Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) Form 4720 (other than individual) 09 10 Form 990-PF 04 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 THE ORGANIZATION ullet The books are in the care of lacktriangle PO BOX 1144 - NEW YORK, NY 10159Telephone No. ► 631-509-2797 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box 🕨 🔲 . If it is for part of the group, check this box 🕨 🦳 and attach a list with the names and EINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15, 2019, to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2018 or tax year beginning , and ending | Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less

c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by
using EFTPS (Electronic Federal Tax Payment System). See instructions.

3c \$ 0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

any nonrefundable credits. See instructions.

Form 8868 (Rev. 1-2019)

3b

instructions

0.

(Rev. January 2019)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-1709

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corp	orations required to file an income tax return other than Fo	orm 990-T	(including 1120-C filers), partnership	s, REMICs	s, and trusts		
must us	e Form 7004 to request an extension of time to file incom-	e tax retur	ns.				
				Enter file	er's identifying n	umber	
Type or	Name of exempt organization or other filer, see instru-	Employer identification number (EIN) or					
print							
Elle les Alex	CRISIS TEXT LINE INC.				46-5039599		
File by the due date for				Social security number (SSN)			
filing your return. See	PO BOX 1144						
instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10159						
Enter th	e Return Code for the return that this application is for (file	e a separa	te application for each return)			0 7	
Application		Return	Application			Return	
ls For		Code	Is For			Code	
Form 99	00 or Form 990-EZ	01	Form 990-T (corporation)			07	
Form 99	00-BL	02	Form 1041-A			08	
	'20 (individual)	03	Form 4720 (other than individual)			09	
Form 99		04 05	Form 5227			10	
Form 990-T (sec. 401(a) or 408(a) trust)			Form 6069			11	
Form 990-T (trust other than above) 06						12	
Telep	pooks are in the care of \blacktriangleright PO BOX 1144 - 19 when Pooks are in the care of \blacktriangleright PO BOX 1144 - 19 when Pooks Pooks are in the care of -2797 organization does not have an office or place of business is for a Group Return, enter the organization's four digit (s in the Un Group Exe	Fax No. ▶ited States, check this box	f this is fo	r the whole group	,	
1 I request an automatic 6-month extension of time until NOVEMBER 15, 2019 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ▶ X calendar year 2018 or ▶ tax year beginning, and ending 2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period							
	3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.					7,000.	
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and					s	^	
estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b						0.	
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by						7 000	
	sing EFTPS (Electronic Federal Tax Payment System). See			3c	\$	7,000.	
instructi	 If you are going to make an electronic funds withdrawal ons. 	(direct del	oit) with this Form 8868, see Form 84	153-EO an	a Form 88/9-EO	tor payment	

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2019)