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Return of Organization Exempt From Income Tax

2013

Department of the Treasury Internal Revenue Service

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

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

	A	For the	2013 calendar year, or tax year beginning	, 2013, and end	ding	, 20	
B Check if applicable C Name of organization COMMUNITY CRISIS INTERVENTION CENTE D Emplo							
		Address o	71-0526262				
	$\overline{}$	Name cha					
	一	initial retu	E Telephone number				
	$\overline{}$			(501) 623-4048			
	_	Terminate				359,257	
	$\overline{}$	Amended				G Gross receipts \$	
	.	Applicatio	n pending F Name and address of principal officer: JANIE SMITH		H(a) Is this a group re	eturn for C	
			Same as C above		H(a) Is this a group re subordinates?		
		Tax-exem		7	H(b) Are all subordin	ates included? Yes No list. (see instructions)	
	<u>J '</u>	Nebsite:	▶ N/A		H(c) Group exemption	n number	
	-			Year of formation 19	78 M State of le	gal domicile AR	
	Pa	rt I	Summary				
		1	Briefly describe the organization's mission or most significant activities PROVI	DE EMERGENC	Y ASSISTANCE	TO CITIZENS OF	
	æ		THE COMMUNITY				
	ä	ļ					
	Ę						
	Activities & Governance	2	Check this box ▶ ☐ if the organization discontinued its operations or disposed of r	more than 25% of	its net assets.		
	<u>ن</u>	3	Number of voting members of the governing body (Part VI, line 1a)		3	18	
	ş	4	Number of independent voting members of the governing body (Part VI, line 1b)		4		
	Ę	5			5		
	Ş	6			6		
	ĕ	7a	Total unrelated business revenue from Part VIII, column (C), line 12 · · · · ·				
		Ь	Net unrelated business taxable income from Form 990-T, line 34		71		
		1			Prior Year	·	
	<u>o</u>	8	Contributions and grants (Part VIII, line 1h)	 -		Current Year	
		9	Program service revenue (Part VIII, line 2g)	 	404,96	356,677	
	Ę	10	•	<u> </u>		0	
	Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-	6,57	2,580	
	œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0	
		12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		411,53		
_		13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	 		84,731	
MAY I 4 2010	₹-	14	Benefits paid to or for members (Part IX, column (A), line 4)	• • • • • • • • • • • • • • • • • • • •		0	
2	3 8	15	Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)	• • • • • • -	121,64	6 143,116	
A	Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	• • • • • •		0	
-	_ 8 _	þ	Total fundraising expenses (Part IX, column (D), line 25)	0			
يد	யி	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		169,54	5 124,580	
Z		18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25 CEN	/ED···	291,19	352,427	
		19	Revenue less expenses Subtract line 18 from line 12		120,34	4 6,830	
SCANNED	Net Assets or	<u> </u>	(8)	2014. JSO B	eginning of Current Year	End of Year	
Z	196	20	Total assets (Part X, line 16)	ZV14	765,63	796,776	
<i>\\</i>	\$	21	Total liabilities (Part X, line 26)		23,72		
ट	ž	22	Net assets or fund balances Subtract line 21 from line 20	1· 1 1 T · · ·	741,91		
カ	Pa	rt II	Signature Block UGDEN	۷, ۵۱			
	Under	penaltie	of penjury, I declare that I have examined this return, including accompanying schedules and statements, a	and to the best of my kno	wledge and belief, it is	~~~ <u>~~~~~~</u>	
	true, c	correct, ar	id complete Declaration of preparer (other than officer) is based on all information of which preparer has an	ny knowledge			
			A Carry Share			4-14-14	
	Sig	n	Signature of officer	········	Da	ite	
	Her	·e	JANIE SMITH, EXECUTIVE DIRECTOR				
			Type or print name and title				
			Print/Type preparer's name Preparer's signature	Pate	Charle III .	DTIN	
	Pai	d	The type property states	•	Check if	PTIN	
		u parer		4-13-2014	self-employed	P00840483	
		parer Only			Firm's EIN		
	US	, Om			Phone no		
			Hot Springs National P AR 71901		501-	624-6639	
	0/121/	THE IPS	discuse this return with the preparer shown above? (see instructions)			IYI Voc Ma	

For Paperwork Reduction Act Notice, see the separate instructions.

	n 990 (2013) COMMONITY CRISIS INTERVENTION CENTE 71-0526262 Page 2
Pa	Statement of Program Service Accomplishments
<u> </u>	Check if Schedule O contains a response or note to any line in this Part III
ì	Briefly describe the organization's mission
	PROVIDE EMERGENCY ASSISTANCE TO CITIZENS OF THE COMMUNITY
	Did the annual to the second of the second o
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
2	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? ••••••••••••••••••••••••••••••••••••
	— — — — — — — — — — — — — — — — — — —
	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 \$ including grants of \$) (Revenue \$)
44	
	ORGANIZATION PROVIDED EMERGENCY FOOD, SHELTER, TRANSPORTATION, CLOTHING AND MEDICAL HELP FOR
	THE NEEDY OF THE COMMUNITY
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)
7.0	/ Cooks / (Expenses #) (Nevenue #)
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services. (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
40	Total program service expenses

Part IV Checklist of Required Schedules

			Yes	No
ì	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Χ	
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 98-197 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 provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete 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? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
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.			
8	• • • • • • • • • • • • • • • • • • • •			
	complete Schedule D, Part VI	11a	Х	
t	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
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
C	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
6		11e		Χ
f				
40.	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	• • • • • • • • • • • • • • • • • • • •			
	Schedule D, Parts XI and XII	12a		X
b	, , , , , , , , , , , , , , , , , , , ,			
40	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u>X</u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	ا		.,
45	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	ایرا		4,5
46	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	ایر		v
17		16		X
"	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX. column (A), lines 6 and 11e? If "Yes." complete Schedule G. Part I (see instructions)	ا ـ ـ ا		17
18	,	17		X
10	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	أير		₹.
19		18		X
13	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	4		v
20-	If "Yes," complete Schedule G, Part III	19		$\frac{x}{x}$
20a		20a		
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Scheudle I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
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
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		L
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		ļ
ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	ļ
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		ļ
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
••	Part I · · · · · · · · · · · · · · · · · ·	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
22	complete Schedule N, Part II	32		 -
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			١,,
24	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1			١,,
250		34		X
35a	and angular transfer of the state of the sta	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	25		,,
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
30	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
37	related organization? If "Yes," complete Schedule R, Part V, line 2	36		-
31	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			v
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	37		<u> </u>
JU	19? Note. All Form 990 filers are required to complete Schedule O	20	,,	
	10: Note. 741 1 0111 330 meis are required to complete Scriedule O	38	Χ	L

Form 990 (2013) COMMUNITY CRISIS INTERVENTION CENTE

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
•			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Х	
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 2a 6			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	l		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Χ
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)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	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?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
_	organization solicit any contributions that were not tax deductible as charitable contributions?	_6a		
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).	1	i	
а	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		<u> </u>
0	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	-		v
d	If "Yes," indicate the number of Forms 8282 filed during the year	7c		<u>X</u>
8	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		v
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u>X</u> X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	ŀ		
	organization, have excess business holdings at any time during the year?	8		Х
9	Sponsoring organizations maintaining donor advised funds.			 -
а	Did the organization make any taxable distributions under section 4966?	9a	i	Х
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · · ·			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter.			
а	Gross income from members or shareholders		İ	
þ	Gross income from other sources (Do not net amounts due or paid to other sources		Ì	
	against amounts due or received from them)		1	
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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	45		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
L	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
_	the organization is licensed to issue qualified health plans			
C 14a		14a		
14a	Did the organization receive any payments for indoor tanning services during the tax year?			<u>X</u>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 990 (2013) COMMUNITY CRISIS INTERVENTION CENTE Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in the Part VI ······· Section A. Governing Body and Management No Yes Enter the number of voting members of the governing body at the end of the tax year 18 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 Enter the number of voting members included in line 1a, above, who are independent 1b 18 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 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? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Х Each committee with authority to act on behalf of the governing body? Х 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) Did the organization have local chapters, branches, or affiliates? 10a Х If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization JANIE SMITH (501)623-4048, 705 MALVERN AVENUE, Hot Springs Nation, AR 71901

Form	990	(201	3)

COMMUNITY CRISIS INTERVENTION CENTE

71-0526262

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A)	(B)	(C)				(D)	(E)	(F)		
Name and Title	Average hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)				Reportable compensation from the organization	Estimated amount of other compensation from the			
·	organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations
(1) JANIE SMITH EXECUTIVE DIRECTOR	40.00			Х		Х		o	о .	0
(2) LARRY SHAFER DIRECTOR	8.00				Х			0	0	0
(3) PATSY WARE THRIFT SHOP MANAGER	30.00				Х			O	0	0
(4)				-						-
(5)										
(6)			-							
<u>(7)</u>										
<u>(8)</u>										
<u>(9)</u>										
<u>(10)</u>				_				-		,
(11)								, , <u>.</u>		
<u>(12)</u>										
(13)										
<u>(14)</u>		, ,								<u> </u>
	<u> </u>		Щ.	ليبا			نــــا		L	

4	$^{\circ}$	- ^	-	62	
-	u:	"	n /	n/	

	VII Section A. Officers, Directors, Trustees, (A) Name and title	(B) Average hours per week (list any hours for	(do no box, u office	ot che	Positi ck mo persi direct) tion ore tha on is b	an one ooth an stee)		(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	em com	(F) timated nount of other pensation
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(WZ 1835 MILOS)	org an	anization d related anizations
5)								,				
6)												
<u>7) </u>												
8)												
9)												
0)												
1)												
2)												
<u>3) </u>												
4)												
5)												
c	Sub-total	on A .				· · ·		* *	o	0		
2	Total number of individuals (including but not limited reportable compensation from the organization				/ho r	ecen	ved m	оге		0	L	······································
	Did the organization list any former officer, director, employee on line 1a? If "Yes," complete Schedule J					_			ensated		3	Yes
4	For any individual listed on line 1a, is the sum of rep organization and related organizations greater than	ortable comp \$150,000? If	ensatı "Yes,"	on a	nd o	ther Sch	comp nedule	ensa e J fo	ation from the or such		-	
5	individual	ompensation	from a	ny u	nrela	ated	organ	izatı			5	
	on B. Independent Contractors		340.0		-	. ро.	00.7					
	Complete this table for your five highest compensate compensation from the organization. Report compensation are seen to the compensation of the c											
	(A)			-					(B)	1		C)
	Name and business address								Description of	Services	Comp	ensation
-									+			

Form 990 (2013) COMMUNITY

Part VIII Statement of Revenue

		Check if Schedule O contains a response or no	te to any line in this	s Part VIII			
_			-	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<u> </u>	1a	Federated campaigns 1a					
ᅙᆵ	b	Membership dues 1b			ĺ		
% 4 ⊕ €	C	Fundraising events 1c					
E E	d	Related organizations 1d					
ê,E	9	Government grants (contributions) · · 1e			i		
<u> </u>	f	All other contributions, gifts, grants,					
E E		and similar amounts not included above 1f	356,677				
ΞŎ	g	Noncash contributions included in lines 1a-1f \$	88,416		ļ		
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f		356,677			
			Business Code				
Program Service Revenue	2a						
Reve	Ь						
92	С						
Sez	ď						
Ë	Θ						
Б	f	All other program service revenue					
<u> </u>	g	Total. Add lines 2a-2f					
	3	Investment income (including dividends, interest,					
		and other similar amounts)		2,580	2,580		
	ſ	Income from investment of tax-exempt bond proce					
	5	Royalties					
		(ı) Real	(ii) Personal				
	į.	Gross rents · · · · · ·					
	f	Less rental expenses · · · ·					
		Rental income or (loss) · · ·		-			
	d	Net rental income or (loss)					
	7a	Gross amount from sales of (i) Securities	(II) Other				
		assets other than inventory					
	b	Less cost or other basis					
		and sales expenses · · · ·					
	h	Gain or (loss)					
•		Net gain or (loss)					
enne	8a	Gross income from fundraising					
		events (not including \$					
Æ		of contributions reported on line 1c)			İ		
Other Rev	١.	See Part IV, line 18 · · · · · · · a					
0		Less direct expenses b					
	ya	Gross income from gaming activities			Ì		
	١.	See Part IV, line 19 · · · · · · · a	· · · · · · · · · · · · · · · · · · ·				
	1	Less direct expenses b					
		Net income or (loss) from gaming activities					- *
	10a	Gross sales of inventory, less returns and allowances a					
	ь	Less cost of goods sold b					
		Net income or (loss) from sales of inventory · ·		1			
		Miscellaneous Revenue	Business Code				
	11a						
	b						
	С						
	d	All other revenue					
	0	Total. Add lines 11a-11d					
	12	Total revenue. See instructions · · · · · ·	▶	359,257	2,580	0	0

Part IX | Statement of Functional Expenses

	Anagement and general expenses	(D) Fundraising expenses
organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 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) Other salanes and wages 131,237 131,237 131,237 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 10 Payroll taxes 11,879 11,879		
2 Grants and other assistance to individuals in the United States See Part IV, line 22		
the United States See Part IV, line 22		
Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16		
Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16		
organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 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) Other salanes and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 10 Payroll taxes 11,879		
United States See Part IV, lines 15 and 16		
Benefits paid to or for members		
5 Compensation of current officers, directors, trustees, and key employees		
trustees, and key employees		
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		
persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salanes and wages		····
persons described in section 4958(c)(3)(B)		
7 Other salanes and wages		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits		
section 401(k) and 403(b) employer contributions)		
9 Other employee benefits 11,879 10 Payroll taxes 11,879		
10 Payroll taxes		
11 Fees for services (non-employees)		
a Management · · · · · · · · · · · · · · · · · · ·		
b Legal · · · · · · · · · · · · · · · · · · ·		
c Accounting	7,150	
d Lobbying · · · · · · · · · · · · · · · · · · ·		
Professional fundraising services See Part IV, line 17		
f Investment management fees · · · · · · · · · ·		
g Other (If line 11g amount exceeds 10% of line 25, column		
(A) amount, list line 11g expenses on Schedule O.)		
12 Advertising and promotion	4,658	
13 Office expenses	6,827	-,-
14 Information technology · · · · · · · · · ·		···········
15 Royalties · · · · · · · · · · · · · · · · · · ·		
16 Occupancy		
17 Travel	2,205	
18 Payments of travel or entertainment expenses	2,205	
for any federal, state, or local public officials		
19 Conferences, conventions, and meetings		
	-	
21 Payments to affiliates · · · · · · · · · · · · · · · · · · ·		
22 Depreciation, depletion, and amortization · · · · · ·	-	
23 Insurance		
24 Other expenses Itemize expenses not covered		
above (List miscellaneous expenses in line 24e If		
line 24e amount exceeds 10% of line 25, column		
(A) amount, list line 24e expenses on Schedule O)		
a TELEPHONE 4,750 4,750		
b SECURITY 7,429 7,429		
c delivery 1,385 1,385		
d POSTAGE		
e All other expenses 46,721 46,721		
25 Total functional expenses. Add lines 1 through 24e 352,427 331,587	20,840	0
26 Joint costs. Complete this line only if the		
organization reported in column (B) joint costs		
from a combined educational campaign and	<u> </u>	
fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720) · · · · · · · · ·		

Part X Balance Sheet

1	•		Check if Schedule O contains a response or note to any line in this Part X	(A)		(B)
1 Cash - non-interest-bearing 37, 872 1 59,219				• •		
2 Savings and temporary cash investments 324,253 2 360,722		4	Cook, non-intercent honoring			
3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 Accounts receivable, net 4 Accounts receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule 5 S S S S S S S S S			g	•	+ +	
4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5		_		324,233	+ +	360,122
S Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. S						
### Tutulese, key employees, and highest compensated employees.			 		 •	
Complete Part I of Schedule L Lorn and other reconvables them other dequalified persons (as detired under section 455(0)(1)), persons described in action 455(0)(3)(4), and contributing employers and sportsorring organizations of section 501(0)(4) voluntary employers beneficiary organizations (see withouting Complete Part I of Schedule L 8 reventiones for sale of use 9 Prepaid expenses and deferred charges 10 Land, buildings, and equipment cost or other basis Complete Part V of Schedule D 11 Investments - publicly traded securities 11 Investments - program-related See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 Investments - program-related See Part IV, line 11 14 Intragible assets See 15 Other assets See Part IV, line 11 16 Total assets Add Intes 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 20 Tax-exempt bond labelities 21 Excover or custodial account liabelity Complete Part IV of Schedule D 21 Excover or custodial account liabelity Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and complete lines 27 through 23, and lines 33 and 34. 10 Total Itabilities. Add lines 17 through 25 27 Total Itabilities. Add lines 17 through 25 28 Total Itabilities. Add lines 17 through 25 29 Permanently restricted net assets 10 Crapanizations that do not follow SFAS 117 (ASC 958), check here based and complete lines 30 through 34. 20 Crapanizations that do not follow SFAS 117 (ASC 959), check here based and complete lines 30 through 34. 21 Relatined earnings, endowment, accumulation, or outperfunds 22 Relatined earnings, endowment, accumulation or, or other funds 23 Relatined earnings, endowment, accumulation or other funds 24 Relatined earnings, endowment, accumulation or			· · · · · · · · · · · · · · · · · · ·			
Section Communication C					_	
4958(0)(1), persons described in sector 4958(c)(3)(8), and contributing employers lawficiary organizations (see institutions) Complete Priority of Schedule D 7 7 7 7 7 7 7 7 7		ı R	· •		+ + +	
Space Spa			· · ·			
To Notes and loans receivable, net To Notes and					1 1	
7 Notes and loans receivable, net 7					اءا	
8 Inventiones for sale or use 8 9 Prepaid expenses and deferred charges 9 9 Prepaid expenses and deferred charges 9 9 9 9 9 9 9 9 9		7	ľ		+ + +	
10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	ets		· · · · · · · · · · · · · · · · · · ·			
10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	88					
Secure Part VI of Schedule D 10a 376,835 10c 376,835 10b 363,513 10c 376,835 10b 363,513 10c 376,835 10b 363,513 10c 376,835 10b 363,513 10c 376,835 11c 11	•		i i			
b Less accumulated depreciation 10b 363,513 10c 376,835 11						
11 Investments - publicity traded securities 11 12 12 12 12 13 11 13 13		h	•	262 512	100	276 225
12 Investments - other securities. See Part IV, line 11			·	363,513	 	376,835
13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 15 15 15 15 15 16 Total assets See Part IV, line 11 15 15 16 Total assets See Part IV, line 11 16 Total assets See Part IV, line 11 17 18 18 19 19 17 18 18 19 19 19 19 19 19			· · ·		+ +	
14 Intangible assets 14 15 16 16 16 16 16 16 16					 	
15 Other assets See Part IV, line 11 16 16 170tal assets. Add lines 1 through 15 (must equal line 34) 765,638 16 796,776 17 Accounts payable and accrued expenses 23,720 17 26,848 18 19 Deferred revenue 19 19 19 19 19 19 19 1					 	
16 Total assets. Add lines 1 through 15 (must equal line 34) 765,638 16 796,776 17 Accounts payable and accrued expenses 23,720 17 26,848 18 Grants payable 18 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties 24 26 Total liabilities. Add lines 17 through 25 25 27 Total liabilities. Add lines 17 through 25 23,720 26 26,848 Organizations that follow SFAS 117 (ASC 958), check here 28 29 Permanently restricted net assets 741,918 27 769,928 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Pad-in or capital surplus, or land, building, or equipment fund 31 30 Retained earnings, endowment, accumulated income, or other funds 32 31 Total net assets or fund balances 741,918 33 769,928			=		+ +	
17			h in the second of the second	7.05 .000	 	706 776
18 Grants payable 18 18 19 Deferred revenue 19 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities, continuing federal income tax, payables to related third parties 25 Other liabilities and times 17 through 25 25 25 25 25 25 25 26 26				·-··· · · · · · · · · · · · · · · · · ·	 	
19 Deferred revenue				23,120	 	26,848
20 Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 24 25 25 25 26 26 26 26 26 26 26 26 26 26 26 26 26			` -			
21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal moome tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 27 Complete lines 27 through 29, and lines 33 and 34. 28 Temporanty restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 31 Total net assets or fund balances 32 Total net assets or fund balances 33 Total net assets or fund balances 34 Total net assets or fund balances 35 Total net assets or fund balances 36 Total net assets or fund balances 37 Total net assets or fund balances 37 Total net assets or fund balances 38 Total net assets or fund balances 39 Total net assets or fund balances		_				
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trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 27 Total liabilities. Add lines 17 through 25 28 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 30 Total net assets or fund balances 31 Total net assets or fund balances 32 Total net assets or fund balances 33 Total net assets or fund balances 34 Total net assets or fund balances 35 Total net assets or fund balances	ç		·			
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23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	abii			•	22	•
24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	Ë	23	· · · · · · · · · · · · · · · · · · ·		 	
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			- Indiana Indiana Payana ta anno ana panasa	·		
of Schedule D						
Total liabilities. Add lines 17 through 25			, , ,		25	
Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets		26	,	23 720	 	26 040
Complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets				23,720		20,040
33 Total net assets or fund balances	es es		· · · · · · · · · · · · · · · · · · ·			
33 Total net assets or fund balances	auc	27		741 010	27	760 029
33 Total net assets or fund balances	3ali			741,510	+	103,320
33 Total net assets or fund balances	Ē				 	
33 Total net assets or fund balances	ᆵ	-				·
33 Total net assets or fund balances	5		- · · · · · · · · · · · · · · · · · · ·			
33 Total net assets or fund balances	ets	30	_		30	
33 Total net assets or fund balances	88				 	
33 Total net assets or fund balances	et /		- · · · · · · · · · · · · · · · · · · ·		 	
741,310 00 709,328	Ž		·	741 Q1Q	+	769 929
		34	-			

Form	1990 (2013) COMMUNITY CRISIS INTERVENTION CENTE	71-05	26262	P	age 12
	rt XI Reconciliation of Net Assets	, 1 00			
L	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	359,2	
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	352,4	127
3	Revenue less expenses Subtract line 2 from line 1	3		6,8	330
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		741,9	918
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Pnor 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	į	748,7	748
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				- 🗆
				Yes	No
1	Accounting method used to prepare the Form 990. Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	<i></i>	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				
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
	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		İ		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				

2c

Χ

Form 990 (2013)

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

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

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

Schedule O.

EEA

the Single Audit Act and OMB Circular A-133?

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

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No 1545-0047

2013

Open to Public

► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection

Employer identification number

COM	MUN	ITY CRISIS INT								526262			
Pa	rt I	Reason for P	ublic Charity	Status (All organiz	ations m	ust com	plete this	part)	See ınstı	ructions			
The	orgar	nization is not a private	e foundation becau	se it is (For lines 1 throu	ıgh 11, che	ck only one	e box)						
1		A church, convention	of churches, or as	sociation of churches de	escribed in	section 17	⁷ 0(b)(1)(A)(i).					
2		A school described in	section 170(b)(1)(A)(ii). (Attach Schedule	εE)								
3		A hospital or a coope	erative hospital sen	vice organization describ	ed in secti	on 170(b)(1)(A)(iii).						
4		A medical research of	organization operate	ed in conjunction with a h	hospital de	scribed in s	section 170	(b)(1)(A)	iii). Enter	the			
		hospital's name, city,	and state.										
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in											
		section 170(b)(1)(A)	(iv). (Complete Pa	rt II.)									
6		A federal, state, or lo	cal government or	governmental unit descri	ibed in sec	tion 170(b)(1)(A)(v).						
7	X	An organization that	normally receives a	a substantial part of its su	upport from	a governn	nental unit o	r from the	e general p	oublic			
		described in section											
8		A community trust de	escribed in section	170(b)(1)(A)(vi). (Comp	lete Part II)							
9		An organization that	normally receives	(1) more than 33 1/3% o	f its suppo	t from con	tributions, m	nembersh	ıp fees, an	d gross			
				mpt functions - subject to						-			
		support from gross in	vestment income	and unrelated business t	axable inco	me (less s	ection 511 t	ax) from	businesses	5			
		acquired by the organ	nızatıon after June	30, 1975 See section 5	i09(a)(2). (Complete F	Part III.)						
10		An organization orga	nized and operated	exclusively to test for pu	ublic safety	See secti	ion 509(a)(4	1).					
11		An organization orga	nized and operated	d exclusively for the bene	efit of, to pe	rform the f	unctions of,	or to can	y out the				
		purposes of one or m	nore publicly suppo	rted organizations descri	ıbed ın sec	tion 509(a)	(1) or sectio	n 509(a)(2). See se	ction			
		509(a)(3). Check the	box that describes	the type of supporting o	rganızatıon	and comp	lete lines 11	e throug	n 11h				
		a 🔲 Typel	b 🗌 Турс	ell c. ∏ Type	III-Function	nally integra	ated	d [Type III-	Non-funtio	onally inte	grated	
0		By checking this box,	I certify that the or	rganization is not controll	led directly	or indirectl	y by one or	more disc	qualified pe	ersons			
		other than foundation	managers and oth	ner than one or more put	olicly suppo	rted organ	izations des	cribed in	section 50	9(a)(1)			
		or section 509(a)(2)											
f		If the organization re-	ceived a written de	termination from the IRS	that it is a	Type I, Typ	e II, or Type	e III suppo	orting				
		organization, check t	his box										🗆
g		Since August 17, 200	06, has the organiza	ation accepted any gift or	r contribute	on from any	y of the						
		following persons?											
		(i) A person who d	rectly or indirectly	controls, either alone or t	together w	th persons	described i	n (II) and				Yes	No
		(iri) below, the g	overning body of the	ne supported organization	n? .						11g(i)		
		(ii) A family member	er of a person desc	ribed in (ı) above? • •	• • • • •	• • • •					11g(ii)		
		(iii) A 35% controlle	d entity of a persor	n described in (i) or (ii) at	oove? .						11g(iii)		
<u>h</u>		Provide the following	information about	the supported organizate	on(s).								
	(i) Na	ime of supported organization	(ii) EIN	(iii) Type of organization	(iv) is the o	-	(v) Did you		(vi) :		(vii) Amou		netary
		organization		(described on lines 1-9 above or IRC section	governing of	-	the organization col (i) of		organizati (i) organiz		1 '	support	
				(see instructions))		,	suppo			S?	1		
					Yes	No	Yes	No	Yes	No	<u>.</u>		
(A)													
				·	<u> </u>		_				<u> </u>		
(B)			•			ľ							
						ļ							
(C)													
					ļ	ļ					ļ		
(D)													
, ,,,					 				ļ		ļ		
(E)]							
					 	ļ	 		 	ļ	 		
Tota													
BJU			l .	1	1	1				1	1		

71-0526262

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			<u></u>		· · · · · · · · · · · · · · · · · · ·	
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	264,619	233,529	240,327	308,582	268,261	1,315,318
2	Tax revenues levied for the organization'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	264,619	233,529	240,327	308,582	268,261	1,315,318
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly	!					
	supported organization) included on			i			
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						135,082
6	Public support. Subtract line 5 from line 4 · ·						1,180,236
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	264,619	233,529	240,327	308,582	268,261	1,315,318
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,556	2,190	286	6,572	2,580	14,184
9	Net income from unrelated business activities, whether or not the business is regularly carned on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10 -						1,329,502
12	Gross receipts from related activities, etc. (s	ee instructions)				12	
13	First five years. If the Form 990 is for the or organization, check this box and stop here						▶□
	tion C. Computation of Public Su	• •			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · · · ·	
14	Public support percentage for 2013 (line 6, c				• • • • • • • •		88.77 %
15	Public support percentage from 2012 Sched						87.28 %
16a	33 1/3% support test - 2013. If the organiza				•		
	box and stop here. The organization qualified					• • • • • • • • • •	▶ 🔯
ь	33 1/3% support test - 2012. If the organiza				•		
4= .	check this box and stop here. The organization		• • •				▶ ∐
17a							
	10% or more, and if the organization meets to				•		
	Part IV how the organization meets the "fact		•	•			
_	organization · · · · · · · · · · · · · · · · · · ·						▶ 📋
b	10%-facts-and-circumstances test - 2012.					•	
	15 is 10% or more, and if the organization m				•		
	Explain in Part IV how the organization meet					•	. 🗖
18	supported organization · · · · · · · · · · · · · · · · · · ·						▶ ⊔
10	Instructions						▶ ጦ
					

71-0526262

COMMUNITY CRISIS INTERVENTION CENTE

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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 performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus under sec 513 · · · ·			:			
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5 · · · · · · ·						
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)						
Se	ction B. Total Support	·	<u></u>				
Cale	endar year (or fiscal year beginning in) 🕒	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6				ļ		ļ
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 IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14							▶ □
Se	ction C. Computation of Public Su	 	-				
15	Public support percentage for 2013 (line 8, co		•))	· • • • • • • • • • • • • • • • • • • •	15	%
16	Public support percentage from 2012 Schedu					16	%
	ction D. Computation of Investmen			(0)		1 4= 1	
17 18	Investment income percentage for 2013 (line Investment income percentage from 2012 Sci		•	lumn (f))	• • • • • • • • •		<u>%</u>
	33 1/3% support tests - 2013. If the organiza	ition did not checl	k the box on line 14,	and line 15 is mo	re than 33 1/3%, a		<u>%</u> ▶ □
b	17 is not more than 33 1/3%, check this box a 33 1/3% support tests - 2012. If the organiza line 18 is not more than 33 1/3%, check this b	tion did not checl	k a box on line 14 or	line 19a, and line	16 is more than 3	3 1/3%, and	▶□
20	Private foundation. If the organization did no	t check a box on	line 14, 19a, or 19b	, check this box a	nd see instructions		▶ 📗

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

scribed below. Attach to Form 990 or Form 990-EZ. Information about Schedule C (Form 990 or 990-EZ) and its Instructions is at www.irs.gov/form990.

2013

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Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

Section 501(c)(3) organizations Complete Parts I-A and B. Do not complete Part I-C.

See separate instructions.

Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B

Complete if the organization is described below.

Section 527 organizations Complete Part I-A only

Section 501(c)(4), (5), or (6) organizations. Complete Part III.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

Nam	e of organization			- 1	Employer	identification numbe	∍ Γ
CC	MMUNITY CRISIS INTERVENTION				71-052	5262	
Pa	rt I-A Complete if the organ	ization is exempt under secti	on 501(c) or is	s a section (527 orga	nization.	
1	Provide a description of the organization's						
2	Political expenditures						
3	Volunteer hours	• • • • • • • • • • • • • • • • • • • •					
Pa	rt I-B Complete if the organ	ization is exempt under secti	on 501/c)/3)		· · · · · · · · · · · · · · · · · · ·		
1	Enter the amount of any excise tax incurre				b c		
2	Enter the amount of any excise tax incurre	ed by are organization managers under section	ion 4055		• • —		
3	If the organization incurred a section 4955						No
4a	Was a correction made?						No
b	If "Yes," describe in Part IV					. П њ. П	140
		ization is exempt under secti	on 501(c), exc	ept section	501(c)(3	3).	
1	Enter the amount directly expended by the	· · · · · · · · · · · · · · · · · · ·			(-)(-	- <u> </u>	
	activities				► s		
2	Enter the amount of the filing organization				*		
	527 exempt function activities				▶ s		
3	Total exempt function expenditures Add I				*		
					▶ \$		
4	line 17b						
5	Enter the names, addresses and employe						
	organization made payments. For each or						
	the amount of political contributions receiv	•					
	as a separate segregated fund or a politic	• • • •				/	
	(a) Name	(b) Address	(c) EIN	(d) Amount p		(e) Amount of political	
	(a) Name	(b) Address	(6) 2114	filing organi		contributions received	
				funds If none,	enter -0-	promptly and directl	•
						delivered to a separa political organization	
						none, enter -0-	-
/4\							
(1)							
12)							_
(2)							
(3)					_		
(4)							
/	· · · · · · · · · · · · · · · · · · ·						
(5)							
·- <i>,</i>							
(6)							
,							

Pi	art II-A Complete if the organization	on is exempt ur	nder section 50	01(c)(3) and filed	Form 5768 (elec	tion under
	section 501(h)).	·				
A	Check Inf the filing organization belongs to			• ,	ember's	
_	name, address, EIN, expenses, a			•		
<u>R</u>	Check ► ☐ If the filing organization checked b			lly	1	
		bying Expenditure			(a) Filing	(b) Affiliated
_	(The term "expenditures" i	-			organization's totals	group totals
1a	, o		• •			
b	in the control of the					
C		•				
d	Other exempt purpose experiances		• • • • • • • • •			
	Total exempt purpose expenditures (add lines 10					
Ţ	Lobbying nontaxable amount. Enter the amount	from the following ta	ble in both			
	columns					•
	If the amount on line 1e, column (a) or (b) is:		nontaxable amou	nt is :		
	Not over \$500,000		ount on line 1e			
	Over \$500,000 but not over \$1,000,000		15% of the excess			
	Over \$1,000,000 but not over \$1,500,000		10% of the excess			
	Over \$1,500,000 but not over \$17,000,000		5% of the excess o	ver \$1,500,000		
	Over \$17,000,000	\$1,000,000				
9	·	•				
h						
!	Subtract line 1f from line 1c If zero or less, enter		<u></u>			
J	If there is an amount other than zero on either lin		_			
	reporting section 4911 tax for this year?	· · · · · · · · · ·	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	∐ Yes ∐ No
	(Some organizations that		1(h) election do no			
	Lobb	ying Expenditures	During 4-Year Ave	raging Period		
	Calendar year (or fiscal year	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
	beginning in)					
2a	Lobbying nontaxable amount					
	Lobbying ceiling amount (150% of line 2a, column (e))					
	Total lobbying expenditures					
d	Grassroots nontaxable amount					
- е	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2013 COMMUNITY CRISIS INTERVENTION CENTE 71-0526262

Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768

	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed		a)	(b)		
	For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.					
1	cription of the lobbying activity.	Yes	No	A	lmoun	t
	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or	'				
	referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
0	Publications, or published or broadcast statements?	L				
f	Grants to other organizations for lobbying purposes?					
9	Direct contact with legislators, their staffs, government officials, or a legislative body?	<u> </u>				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	<u> </u>				
- 1	Other activities?					
j	Total Add lines 1c through 1ı · · · · · · · · · · · · · · · · · ·					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	 	ļ <u>.</u>			
b	If "Yes," enter the amount of any tax incurred under section 4912	1				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
TD-	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	1		- 4.9		
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5),	or se	ction		
	501(c)(6).				Tvan	T 100
1	Were substantially all (90% or more) dues received nondeductible by members?			1	Yes	No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	+	\vdash
2	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	+	
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c				٠	
<u> </u>	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O					3. is
	answered "Yes."	(~)		,		-,
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of					
	political expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
b	Carryover from last year		2b			
C	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the				·	
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying					
	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5		•	
Pa	rt IV Supplemental Information					
	ide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lin II-B, line 1. Also, complete this part for any additional information	e 2, ar	ıd			
01	. Activities to influence legislation (Part II-B, lines 1a		1h)			
SEC	TION C LINE 19:					
	ERNING DOCUMENTS ETC ARE AVAILABLE UPON REQUEST.					
<u>GOV</u>						
GOV						
GOV						
GOV						
GOV			···-	-		
GOV						

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

2013

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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Name	of the organization	Employer identification number
CO	MMUNITY CRISIS INTERVENTION CENTE	71-0526262
Pa	organizations Maintaining Donor Advised Funds or Other Similar Funds or Account	ts.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year · · · · · · · · · · · · · · · · · · ·	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised	
	funds are the organization's property, subject to the organization's exclusive legal control?	· · · · · · · · · · · · · · · · · · ·
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose	
	conferring impermissible private benefit?	····· No
Pa	rt II Conservation Easements	
<u> </u>	Complete if the organization answered "Yes" to Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply)	
	Preservation of land for public use (e.g., recreation or education)	important land area
	Protection of natural habitat	•
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation	ervation
	easement on the last day of the tax year.	Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
C	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a	
_	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organiza	
·	tax year	ation during the
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
Ū	violations, and enforcement of the conservation easements it holds?	····· TYes 🗆 No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the y	<u></u>
٠	State and volunteer flours devoted to monitoring, inspecting, and emorcing conservation easements during the y	real
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year	
•	S sincured in monitoring, inspecting, and emorcing conservation easements during the year	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)	
0		
0	(i) and section 170(h)(4)(B)(ii)?	······· [] Yes [] No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statements and expense statements are also as a second of the forest statements.	·
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that d	escribes the
Da	organization's accounting for conservation easements rt III Organizations Maintaining Collections of Art, Historical Treasures, or Other	or Cimilar Acceta
Га		er Similar Assets.
4-	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and I	
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furth	erance of
	public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and bala	
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furth	erance of
	public service, provide the following amounts relating to these items:	
	(i) Revenues included in Form 990, Part VIII, line 1	T
	(ii) Assets included in Form 990, Part X · · · · · · · · · · · · · · · · · ·	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, pro	ovide the
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items.	
а	Revenues included in Form 990, Part VIII, line 1	· · · · · • \$
b	Assets included in Form 990, Part X	> \$

Га	rt.iii Organizations Maintaining Co	HECHOIIS OF	AIL, HISLUI	icai iitasuies,	or Our	ei Sillillai ASS	ers (con	unae	<u>u) </u>
3	Using the organization's acquisition, accession, and	d other records,	check any of	the following that are a	a significa	ant use of its			
•	collection items (check all that apply)	_							
а	Public exhibition	d 📗 Lo	oan or exchan	ge programs					
b	Scholarly research	e 🗌 O	ther						
C	Preservation for future generations								
4	Provide a description of the organization's collection	ns and explain h	ow they furthe	er the organization's e	xempt pu	irpose in Part			
	XIII	•	•	•		•			
5	During the year, did the organization solicit or receiv	ve donations of	art. historical t	reasures, or other sim	nılar				
	assets to be sold to raise funds rather than to be m						. Ye	sГ	No
Pa	rt IV Escrow and Custodial Arrange						<u> </u>	<u> </u>	1
	Complete if the organization ansv 990, Part X, line 21.		to Form 99	0, Part IV, line 9,	or rep	orted an amoun	t on For	m	
4-									
1a	Is the organization an agent, trustee, custodian or o		-				т.	_	1
	•			• • • • • • • • • •			. ∐ Ye	s L	No
b	If "Yes," explain the arrangement in Part XIII and co	mplete the follo	wing table			-,			
						Amo	ount		
C	-5 5			• • • • • • • • • • •		;			
d	Additions during the year					1			
8	3 ,					•]			
f	Ending balance				· · 1f				
2a	Did the organization include an amount on Form 99	0, Part X, line 2	1?				. Ye	s [No
b	If "Yes," explain the arrangement in Part XIII Check	here if the expl	lanation has b	een provided in Part >	CHI			[]
Pa	rt V Endowment Funds.								
	Complete if the organization answ	wered "Yes"	to Form 99	0, Part IV, line 10).				
		(a) Current year	(b) Pnor			(d) Three years back	(e) Four	oore he	<u></u>
1a	Beginning of year balance	(.,	(3,7,1,1,1)	(0, 1.1.5)		(Ly Thirds yould book	(0, 100,)	ouro bu	
ь	Contributions					· · · · · · · · · · · · · · · · · · ·	 		
_		· · · · · · · · · · · · · · · · · · ·		 			 		—
С	Net investment earnings, gains, and								
	losses					·	 		
đ	Grants or scholarships						 		
0	Other expenditures for facilities and								
	programs	·····							
f	Administrative expenses						_		
g	End of year balance								
2	Provide the estimated percentage of the current ye	ar end balance ((line 1g, colum	ın (a)) held as.					
а	Board designated or quasi-endowment	%							
b	Permanent endowment > %								
C	Temporanly restricted endowment	%							
	The percentages in lines 2a, 2b, and 2c should equ	al 100%							
3a	Are there endowment funds not in the possession of		on that are hel	d and administered fo	r the				
	organization by	•					Ţ.	Yes	No
	(i) unrelated organizations · · · · · · · · · · · · · · · · · · ·						3a(i)		
	(ii) related organizations · · · · · · · · · · · · · · · · · · ·						3a(ii)		
ь	If "Yes" to 3a(ii), are the related organizations listed	an engineerd on	Cabadula D2						
4		•					3b	<u> </u>	
Dai	Describe in Part XIII the intended uses of the organ		ment tunas						
Fai	rt VI Land, Buildings, and Equipmer		to Form 00	O Dort IV line 44	- C	F 000 D	4 V - 15	4.0	
	Complete if the organization answ				T	· · · · · · · · · · · · · · · · · · ·	LA, line	1 U.	
	Description of property	(a) Cost or o	E	(b) Cost or other basis	1	Accumulated	(d) Book	valu e	
		(invest	ment)	(other)	_ d	epreciation			
1a	Land	•		43,500	ļ		4	3,50)0
þ	Buildings	•		303,955			30	3,95	55
C	Leasehold improvements	•							
d	Equipment	•		29,380			2	9,38	30
9	Other				[******			
Total	I. Add lines 1a through 1e (Column (d) must equal F	Form 990. Part >	(, column (B).	line 10(c).) · ·			37	6.83	35

Part VII	Complete if the organization answere	d "Yes" to Form 990. F	eart IV, line 11b. See Form 990, Part X, line 12
,	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial d	lerivatives		
(2) Closely-hel	ld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
	must equal Form 990, Part X, col (B) line 12)		
Part VIII	Investments - Program Related.		
	Complete if the organization answere	d "Yes" to Form 990, P	art IV, line 11c. See Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Fotal. (Column (b)	must equal Form 990, Part X, col (B) line 13)		
Part IX	Other Assets.		
	Complete if the organization answere	d "Yes" to Form 990, P	art IV, line 11d. See Form 990, Part X, line 15.
	(a) D	escription	(b) Book value
(1)			
(2)		····	
(3)			
(4)		··	
(5)			
(6)			
(7)			
(8)			
(9)	n (b) must equal Form 990, Part X, col (B) line 15)		
	n (D) must equal Form 990. Part X. col. (B) line 15)	* * * * * * * * * * * * * * * * * * * *	
Part X	Other Liabilities.	d "Yes" to Form 990, P	art IV, line 11e or 11f. See Form 990, Part X,
Part X	Other Liabilities. Complete if the organization answere	d "Yes" to Form 990, P	art IV, line 11e or 11f. See Form 990, Part X,
Part X	Other Liabilities. Complete if the organization answere line 25. (a) Description of liability		art IV, line 11e or 11f. See Form 990, Part X,
Part X	Other Liabilities. Complete if the organization answere line 25. (a) Description of liability		art IV, line 11e or 11f. See Form 990, Part X,
Part X 1. (1) Federal in	Other Liabilities. Complete if the organization answere line 25. (a) Description of liability		art IV, line 11e or 11f. See Form 990, Part X,
1. (1) Federal ii (2)	Other Liabilities. Complete if the organization answere line 25. (a) Description of liability		art IV, line 11e or 11f. See Form 990, Part X,
(1) Federal in (2) (3)	Other Liabilities. Complete if the organization answere line 25. (a) Description of liability		art IV, line 11e or 11f. See Form 990, Part X,
1. (1) Federal is (2) (3) (4)	Other Liabilities. Complete if the organization answere line 25. (a) Description of liability		art IV, line 11e or 11f. See Form 990, Part X,
1. (1) Federal is (2) (3) (4) (5)	Other Liabilities. Complete if the organization answere line 25. (a) Description of liability		art IV, line 11e or 11f. See Form 990, Part X,
1. (1) Federal is (2) (3) (4) (5) (6)	Other Liabilities. Complete if the organization answere line 25. (a) Description of liability		art IV, line 11e or 11f. See Form 990, Part X,

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

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2013

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization Employer identification number					
COMMUNITY CRISIS INTERVENTION CENTE	71-0526262				
01. Form 990 governing body review (Part VI, line 1	1)				
no review was conducted					
02. Governing documents, etc, available to public (Part VI, line 19)				
governing documens available for review upon reasonable request					
	70. 70. 10. 10. 10. 10. 10. 10. 10. 10. 10. 1				
1. 1874 - 1. 1874 - 1874 - 1874 - 1874 - 1874 - 1874 - 1874 - 1874 - 1874 - 1874 - 1874 - 1874 - 1874 - 1874 -	7.00				