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

OMB No 1545-0047 2016

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Depa Interr	rtment of the Tre nal Revenue Ser	easury Vice	Į	► Do not e	enter social secu	urity numbers of	n this form	e Code (except p as it may be mad twww.irs.gov/	le public.	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Open to Publi Inspection	С
			dar year, or tax	k year begi	nning		, 20	16, and ending	1		•	
	Check if applica		C	.,				,	<u>′—</u>	D Employer iden	tification number	
_	Address ch		Texas Hom	e Scho	ol Coalit	ion Asso	ociati	on	1	75-2908	8407	
	Name char		P. O. Box		or coarre	21011 11550	JCIGCI	011	ł	E Telephone nun		
	Initial retur		Lubbock,		93					806-744	1	
	$\vdash$		•						ŀ	800-744	-4441	
	Final return/to				-				Į	<b>C</b> • .	\$ 024.5	100
	Amended r		F		1				Ha) le this s	G Gross receipts a group return for su	1 1 2	177
	Application		F Name and add		оат оптсег				• •			A No
			Same As C			<del></del>	T . 2' . = 7		If 'No,'	subordinates include attach a list (see in	ed? Yes estructions)	∐ No
	Tax-exempt s			X 501(c) (	4 ) (	nsert no )	4947(a)(1)	or 1 525				
<u> </u>	Website:	<u> TH</u>	SC.org						H(c) Group e	exemption number		
≺_	Form of organ	nization	X Corporation	Trust	Association	Other -		L Year of formation	n 2000	M State of	legal domicile TX	
Pa	rt I 🔣 Su	mmar	у		<u> </u>					<u> </u>		
	1 Briefly	descri	be the organiz	ation's mis	sion or most	significant ac	tivities:T	he organi	zzatio	on provide	es legal	
ام			ce and ad									
Activities & Governance												
Ë												
욁	_	this bo						sposed of moi	re than 25	5% of its net as	ssets	
Ğ			ting members							3		12
S			dependent voti							4		12
흴			of individuals			ear 2016 (Pa	rt V, line	2a)		5		23
≧∣			of volunteers							6		50
욉			ed business re							7a	201,	<u>304.</u>
	<b>b</b> Net ur	related	business taxa	able income	e from Form 9	990-T, line 34	ļ			7b		0.
			_						P	rior Year	Current Yea	ar .
.			and grants (P							624,590.	726,3	387.
בַּ	9 Progra	am serv	rice revenue (F	Part VIII, lır	ne 2g)					189,910.	201,	
Hevenue	10 Invest	ment in	icome (Part VI	II, column	(A), lines 3, 4	1, and 7d)				765.		681.
뿔	11 Other	revenu	e (Part VIII, co	olumn (A),	lines 5, 6d, 8d	c, 9c, 10c, ar	nd 11e)			13,091.		811.
	12 Total	revenue	e – add lines 8	through 1	1 (must equa	l Part VIII, co	olumn (A)	, line 12)		828,356.	934,	<u> 183.</u>
	13 Grants	s and si	milar amounts	paid (Parl	IX, column (	(A), lines 1-3)	)			8,500.	\ 10,(	
- 1	14 Benef	its paid	to or for mem	bers (Part	IX, column (A	A), line 4)						
			er compensatio				nn (A). Iır	nes 5-10)		279,048.	363,4	115
S			fundraising fee		-		( 9,	,	<b> </b>	275,040.	303,	175.
Expenses			_	="						- 17 - 11	A	
۲			sing expenses						1 . 15			<u>n(~</u>
ן ש	<b>17</b> Other	expens	ses (Part IX, co	olumn (A),	lines 11a-11d	l, 11f-24e)				521,431.	739,3	112.
Ì	18 Total	expense	es Add lines 1	3-17 (mus	t equal Part D	X, <u>column</u> (A	), line 25)	)		808,979.	1,112,6	620.
- {	19 Rever	nue less	expenses Su	btract line	18 from line	12 DI	CEN	/En		19,377.	-178,4	
5 8							-UEI		Beginnin	g of Current Year		
	20 Total	assets	(Part X, line 16	5)		le!		2018	- 3	431,364.	276,	
Fund Balan			s (Part X, line	•		FF FF	B <b>0 8</b>	2018		164,290.	187,8	
5			fund balances	•	lino 21 from	1 1330		F. F.				
				Jubilact	mie Z1 110111				<u></u>	267,074.	88,6	<u>637.</u>
			e Block			1 11/4	MA	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<del></del>			
omt	r penalties of penalties of penalties Declaration	erjury, I de n of prepa	eclare that I have ex erer other than office	xamined this ricer) is based of	eturn, including ac in all information o	of which preparer	has any kno	tatements, and to to owledge	he best of m		elief, it is true, correct, a	and
		-	1	10					Dat	1-31-2	018	
Sig le	n re		James C	Penny	ton, At	Joiney						
			print name and titi			1					LOTIN .	
	Pr	rint/Type p	oreparer's name		Preparer's sig	nature)	)	Date	_	Check If	PTIN	
ai	id J	ames C	. Penningto	n, CPA		( . 1c		1/31/1	7	self-employed	P00012460	_
		rm's name		C. Pennı	ngton, CPA,	Attorney	at Law	17				
	- OI	rm's addre		ox 29073						Firm's ElN ►		
	, I.,				78029-0730						1) 277_01 4 4	
1	the IDS die	Clice th	is return with			ve? (see inct	ructions				X Yes	No
	117.7 (115		osteniu Willi		Surveyed All(1)		and an arranged				ini teresi	

Forn	n 990 (2016) Texas Home School Coalition Association	75~290	840	7	F	age 2
Pai	till 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'					
	The organizzation provides legal assistance and advocacy for hor	neschools	3.			
2	Did the organization undertake any significant program services during the year which were not listed on the p	rior				
	Form 990 or 990-EZ?			Yes	X	No
	If 'Yes,' describe these new services on Schedule O		ـــا			
3	Did the organization cease conducting, or make significant changes in how it conducts, any program s	ervices?		Yes	X	No
	If 'Yes,' describe these changes on Schedule O					
4	Describe the organization's program service accomplishments for each of its three largest program se	rvices, as me	asure	d bv e	expen	ses
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation and revenue, if any, for each program service reported	ons to others,	the to	otaľ e	xpens	es,
4:	a (Code ) (Expenses \$ 687,814. including grants of \$ )	(Revenue \$		62	8,8	78.)
	Advocacy activities both direct and at the grassroots level. Ac	lvancing	mor			
	responsibility and less government regulation and intervention :					
	parents to direct the education of their children.					
	*					
					<b>-</b>	
4	·	(Revenue \$			1,30	)4.)
	Review magazine published quarterly mailed to homeschoolers acro			e_ <u>o</u> f	: 	
	Texas. Purpose is to educate on issues affecting homeschoolers,		.ng_			
	information on curricula suppliers and various education opportu	<u>ınities.</u>				
			_ <b></b> _	. <b></b>		
4	c (Code ) (Expenses \$ 104,127. including grants of \$ ) (	(Revenue \$		3	2,72	24.)
	Legal assistance for members: In the event that a member who ho	omeschool	s i		<u> </u>	
	threatened with legal action related to its homeschool, THSCA st				 ot. t	0
	resolve the matter. If it cannot be resolved by THSCA, legal as					
		.5	_ =-	P='		<u></u>
				- <b>-</b> -		<del>-</del>
				<b>-</b>		
			- <b>-</b> -			
						- <b></b>
				<b>-</b>		
	d Other program services (Describe in Schedule O.)					
4 (		ł			`	
					<i>,</i>	
4	e Total program service expenses ► 993,119.		_			

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Yes No

75-2908407

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 (see instructions)?	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		
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	Х	
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		х
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		Х
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, VIII, IX, or X as applicable			1
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	X	
b	Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 ь		х
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	11 c		_X
c	I 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	11 d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	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	11 f		Х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
t	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	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 for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15	_	Х
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		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (Å), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		Х
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		Х
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		Х

			Yes	No
<b>20</b> a	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
ŧ	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20ь		
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	
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		x
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		х
24	a 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		х
	<b>b</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		
-	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
j	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		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II	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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
i	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
1	<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b		Х
(	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		_X
29		29		X
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
	Did the organization liquidate, terminate, or dissolve and cease operations? 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 Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		_X
	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	34	X	
	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	<b>b</b> If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
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	Note. All Form 990 filers are required to complete Schedule O .	38		<u>X</u>
BAA	A	Form	990 (	2016)

Check if Schedule O contains a response or note to any line in this Part V				Γ
			Yes	No
1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a  (	) [[]	4/19	12.8
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 b (	וֹל		
c Did the organization comply with backup withholding rules for reportable payments to vendors and r (gambling) winnings to prize winners?	eportable gaming	1 c		
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	<b>2</b> a 23		7.	1773
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employmen		2 b	X	4.8.
<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see in		3 ***	201	<del>,</del>
3a Did the organization have unrelated business gross income of \$1,000 or more during the year	•	3 a	* - * - *	8.5
<b>b</b> If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O</i>		3 b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other financial account in a foreign country (such as a bank account, securities account, or other financial account.)	er authority over, a inancial account)?	4a		Х
<b>b</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	, ,	ii "i	k.i	X
5a Was the organization a party to a prohibited tax shelter transaction at any time during the ta	<del>-</del>	5 a	<b>├</b>	
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shell	ter transaction?	5 b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c	ļ .	<u> </u>
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible as charitable contributions?	and did the organization	6 a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contribut not tax deductible?	tions or gifts were	6 b		
7 Organizations that may receive deductible contributions under section 170(c).		117		N.
a Did the organization receive a payment in excess of \$75 made partly as a contribution and payment services provided to the payor?	partly for goods and	7 a		li.
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b	<u> </u>	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it is		<del></del>	-	-
Form 8282?		7 c		
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d			-1
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal		7 e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal ber		7 f		
g If the organization received a contribution of qualified intellectual property, did the organization file as required?		7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?		7 h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained organization have excess business holdings at any time during the year?	by the sponsoring	8	<u>.</u> •	:\$
9 Sponsoring organizations maintaining donor advised funds.				186
a Did the sponsoring organization make any taxable distributions under section 4966?		9 a		4882
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related per	rson?	9 b		
10 Section 501(c)(7) organizations. Enter			) . - 1	* 1
a Initiation fees and capital contributions included on Part VIII, line 12	10a			. * , }
<b>b</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			. "	
a Gross income from members or shareholders	11 a			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11 Ь			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	of Form 1041?	12a		1× 8
<b>b</b> If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	126			4
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>	
a Is the organization licensed to issue qualified health plans in more than one state?		13 a		- ***
Note. See the instructions for additional information the organization must report on Schedu	le O		,Í4	2,
<b>b</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	13Ь			
c Enter the amount of reserves on hand	13c			
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in	Schedule Q	14b		
BAA TEEA01051 11/16/16		Form	990 (	2016

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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 12 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 b Enter the number of voting members included in line 1a, above, who are independent 1 b 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 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? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х 4 5  $\overline{X}$ Did the organization become aware during the year of a significant diversion of the organization's assets? 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 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8 a b Each committee with authority to act on behalf of the governing body? 8 b 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 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes X 10a Did the organization have local chapters, branches, or affiliates? 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b operations are consistent with the organization's exempt purposes? 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11 a : A To **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 Х 12 a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Х to conflicts? 12 b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in See Schedule O Schedule O how this was done X 12 c 13 Did the organization have a written whistleblower policy? Х 13 14 Did the organization have a written document retention and destruction policy? X 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? Х a The organization's CEO, Executive Director, or top management official 15 a b Other officers or key employees of the organization See Schedule O 15 b X 1 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? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ None 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 X Upon request 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 financial statements available to the public during the tax year See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records Patrick Hurd 6502 Slide Road, Suite 206 Lubbock TX 79424 806-744-4441

## 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

1 a 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

				(C)	)					
(A) Name and Title	(B) Average hours per	thar	n ane s both	box, an c	unles officer /trust		an (	(D)  Reportable compensation from the organization	(E)  Reportable compensation from	(F) Estimated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) Tim Lambert	40									
President	<u> </u>	<u>x</u>		X			_ ]	53,999.	0.	0.
(2) Ray Ballman	1	}				1	Ì			
Vice President	0	Х		Х				0.	0.	0.
(3) Kent Dowden	1_	}			}	1 1				
Director	0	X						0.	0.	<u> </u>
(4) James Frank	1_		li							
Director	0	Х						0.	0.	0.
(5) Donna Harp	1_	]	ļ							
<u>Director</u>	0	X			<u> </u>			0.	0.	0.
(6) Mary James	1	]					İ			
Director	0	X						0.	0.	0.
7 Doug McKissick	1		İ							
Director	0	X			_	1		0.	0.	0.
(8) Kyle Workman										
Director	0	X				<u> </u>		0.	0.	0.
(9) Gavino Perez										
Secretary	0	X		X	L			0.	0.	0.
(10) Sarah Singleton			1			1 1	Ì			
Director	0	X			<u></u>			0.	0.	0.
(11) Rayland Van Norman			} }			1 1				
Treasurer	0	X	$\perp$	X		1		0.	0.	0.
(12)		1				}				
(13)		-					_			
(14)		-				† †				<del></del>
DAA	TEEAO		لبا		L	<u> </u>		<u> </u>		Form <b>900</b> (2016)

	(B)			((	<del></del>					
(A) Name and title	Average hours per	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D)  Reportable compensation from	(E)  Reportable compensation from	(F) Estimated amount of other			
	week	or director	_	Officer	Key employee	Highest compensated employee	<u> </u>	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15)										
(16)							-			
<u>(17)</u>										
(18)										
(19)							-			
(20)										
(21)		_								
(22)									, , , , , , , , , , , , , , , , , , , ,	
(23)										
(24)										
(25)										
1 b Sub-total		<del></del>		l	L		<b>&gt;</b>	53,999.	0.	0.
c Total from continuation sheets to Part VII, Section	on A						<b>&gt;</b>	0.	0.	
d Total (add lines 1b and 1c)							<b>&gt;</b>	53,999.	0.	0.
2 Total number of individuals (including but not limited from the organization ► 0	to those I	sted	abo	ve) v	vho	recei	ved	more than \$100,00	0 of reportable com	pensation
<ul> <li>3 Did the organization list any former officer, direction line 1a? If 'Yes,' complete Schedule J for suc.</li> <li>4 For any individual listed on line 1a, is the sum of the organization and related organizations greated such individual.</li> <li>5 Did any person listed on line 1a receive or accruit for services rendered to the organization? If 'Yes</li> </ul>	h individu reportab er than \$1 e compen	<i>ial</i> le co 50,00	mpe 00?	ensa If '\	tion ⁄es,	and <i>con</i>	oth <i>aple</i>	er compensation to Schedule J for	from	Yes No X X X Y X Y X Y X Y X Y X Y X Y X Y X
Section B. Independent Contractors	, comple	.0 00	., 100	.uic	J 10	, suc	πρ		<del></del>	5 X
Complete this table for your five highest compen compensation from the organization. Report compen	sated indesation for	epen the c	den alen	t co	ntra year	ctors endi	tha	at received more the with or within the or	han \$100,000 of ganization's tax yea	r
(A) Name and business addi	ress							(B) Description of	of services	<b>(C)</b> Compensation
Baker & Hostetler 811 Main Street	Houst	on,	TX	7	702	2		Legal servi	ices	288,750.
Total number of independent contractors (including b \$100,000 of compensation from the organization)		ited to	o the	ose I	ısted	d abo	ve)	who received more	than	

0.00		Check if Schedule O contains a resp	onse or note to an	y line in this Part V	TII		
35				(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 d e	Federated campaigns  Membership dues  Fundraising events  Related organizations  Government grants (contributions)  All other contributions, gifts, grants, and similar amounts not included above  1 a  1 b  1 c  1 c  1 c	469,812.				
ontrib nd Otf		Noncash contributions included in lines 1a-1f \$	256,575.	706 207			
a C		Total. Add lines 1a-1f	Business Code	726,387.	- 1 W 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Program Service Revenue		Review Magazine	Busiliess Code	201,304.	**************************************	201,304.	* * * * * * * * * * * * * * * * * * * *
e B	b						
Servic	d						
Ę	е						
ogr	f	All other program service revenue					
<u>•</u>	g	Total. Add lines 2a-2f	<u> </u>	201,304.	N' N at		
	3	Investment income (including dividend other similar amounts)	s, interest and	681.			601
	4	Income from investment of tax-exemp	t hand proceeds. ►	681.			681.
	5	Royalties	► bona proceeds				
		(i) Real	(II) Personal				(, î,
	6 a	Gross rents.	<del></del>				
		Less rental expenses	<del> </del>				
		Rental income or (loss)					
		Net rental income or (loss)			* * * ***	**** *** **** .*	7800 v 38 v v 38.
	7 a	Gross amount from sales of assets other than inventory	(ii) Other				
	b	Less cost or other basis and sales expenses					
	С	Gain or (loss)					
	d	Net gain or (loss)	<u> </u>				
Other Revenue	8 a	Gross income from fundraising events (not including \$					
ě		of contributions reported on line 1c)					
E .		See Part IV, line 18	a				
the		Less. direct expenses  Net income or (loss) from fundraising	bl				
0		Gross income from gaming activities See Part IV, line 19					
		Less: direct expenses	a h				
		Net income or (loss) from gaming active	vities •	{**}	N - 7 M - 3 M - M - M - M - M - M - M - M - M		
					*	72 1.2. 1	
j		Gross sales of inventory, less returns and allowances	а				
		Less: cost of goods sold	b				
	С	Net income or (loss) from sales of inve					
i	11	Miscellaneous Revenue	Business Code				
		Rebates	900099	4,844.	4,844.		
	C	Miscellaneous	900099	967.	967.		
		All other revenue		<del> </del>			
		Total. Add lines 11a-11d	<u> </u>	5,811.			
	í	Total revenue. See instructions	•	934,183.	5,811.	201,304.	681.
	<u> </u>			<u> </u>	<u> </u>		001.

### 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

Check if Schedule O contains a response or note to any line in this Part IX									
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 Grants and other assistance to domestic	10,063.	10,063.						
3	Individuals See Part IV, line 22 Grants and other assistance to foreign								
4	organizations, foreign governments, and for- eign individuals. See Part IV, lines 15 and 16. Benefits paid to or for members.								
<b>4</b> 5	Compensation of current officers, directors, trustees, and key employees	53,999.	37,799.	16,200.	0.				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.				
7	Other salaries and wages	284,285.	213,214.	71,071.					
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)								
9	Other employee benefits								
10	Payroll taxes	25,161.	18,871.	6,290.					
	Fees for services (non-employees)								
	a Management								
	Legal	295,506.	295,506.						
	Accounting	1,200.		1,200.					
	Lobbying								
	Professional fundraising services See Part IV, line 17								
	Investment management fees								
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.)								
12	Advertising and promotion	11,159.	11,159.						
13	Office expenses	1,038.	779.	259.					
14	Information technology								
15	Royalties								
16	Occupancy	8,247.	6,185.	2,062.					
17	Travel	32,969.	23,084.	9,885.					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	_							
19	Conferences, conventions, and meetings	59,587.	59,587.						
20	Interest	797.	598.	199.					
21	Payments to affiliates			·					
22	Depreciation, depletion, and amortization	7,636.	<u>5,728.</u>	1,908.					
23	Insurance	3,102.	2,327.	775.	200000				
	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)								
	Postage and Shipping	133,955.	133,955.						
	Printing and Publications	84,647.	84,647.						
	Contract labor	30,388.	30,388.						
	Credit card fees	26,616. 42,265.	26,616.	0 (50					
	All other expenses  Total functional expenses. Add lines 1 through 24e	1,112,620.	32,613. 993,119.	9,652. 119,501.	0.				
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)	1, 110, 020.	233,113.	113, 301.	0.				
BAA		TEEA0110L 11	1/16/16		Form <b>990</b> (2016)				

Part X Balance Sheet

BAA

Form 990 (2016)

Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year (B) End of year Cash - non-interest-bearing 82,596 1 41,761. Savings and temporary cash investments 200,768 2 69,377. 3 Pledges and grants receivable, net 3 Accounts receivable, net 64,249 4 79,757 Loans and other receivables from current and former officers, directors, ..... trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 8 Inventories for sale or use 8 Prepaid expenses and deferred charges 495 9 13,971 10 a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D 10a 69,187 10 b b Less accumulated depreciation 69,187 2,318 10 c Investments - publicly traded securities. 11 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 74,914 69,596. 15 Other assets See Part IV, line 11 2,024 15 2,024. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 431,364 276,486. Accounts payable and accrued expenses 17 17 71,679 79,327. 18 Grants payable 18 19 Deferred revenue 84,328 19 97,589. 20 Tax-exempt bond liabilities 20 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 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 24 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. 8,283 25 10,933 26 26 Total liabilities. Add lines 17 through 25 164,290 187,849. Organizations that follow SFAS 117 (ASC 958), check here > X and complete or Fund Balances lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 267,074 27 88,637. 28 Temporarily restricted net assets 28 Permanently restricted net assets 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 30 Net Assets 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 33 267,074 88,637. Total liabilities and net assets/fund balances 34 431, 364 34 276,486.

Forr	1990 (2016) Texas Home School Coalition Association	75-2908407		Pa	age 1
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	9	34,	183
2	Total expenses (must equal Part IX, column (A), line 25)	2		12,6	
3	Revenue less expenses Subtract line 2 from line 1	3		78,4	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		67,0	
5	Net unrealized gains (losses) on investments	5			<del></del>
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		88,6	637.
Pa	t XII   Financial Statements and Reporting				
<u></u>	Check if Schedule O contains a response or note to any line in this Part XII				Г
	Check in Constant of Contains a response of field to any line in this fact Air			Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other		, ",	165	140
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviseparate basis, consolidated basis, or both	viewed on a			;;;() ;;()
	Separate basis Consolidated basis Both consolidated and separate basis		**	3834 5.7	ľ
1	Were the organization's financial statements audited by an independent accountant?		2 b		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a se	eparate	1	1	
	basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separate basis				
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a review, or compilation of its financial statements and selection of an independent accountant?	audit,	2 c	***	
	If the organization changed either its oversight process or selection process during the tax year, explain		1,33	,\$	Γ.
_	in Schedule O	1		ì	. 3
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing Audit Act and OMB Circular A-133?	gie	3 a		Х
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits	l audit	3 b		

Form **990** (2016)

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### 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

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service ► Complete if the organization is described 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.

If the organization answered 'Yes,' on 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
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered 'Yes,' on 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,' on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• 5	Section 501(c)(4), (5), or (6) o	organizations Complete Part III							
Name	of organization			Employer identific	ation number				
		lition Association		75-290840					
Pai	rt I-A Complete if the o	rganization is exempt under secti	on 501(c) or is a	section 527 organi	zation.				
1		organization's direct and indirect political on of 'political campaign activities')	campaign activities in	Part IV					
2	Political campaign activity ex	xpenditures (see instructions)		<b>▶</b> \$	}				
3	Volunteer hours for political	campaign activities (see instructions)							
Pai	†਼ੀ-B Complete if the o	rganization is exempt under secti	on 501(c)(3).						
1	Enter the amount of any exc	cise tax incurred by the organization under	section 4955	<b>▶</b> \$					
2	Enter the amount of any exc	cise tax incurred by organization managers	under section 4955	▶\$					
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No				
4 a	Was a correction made?				Yes No				
	If 'Yes,' describe in Part IV								
Pai	. 8 81	rganization is exempt under secti	• • •						
1	Enter the amount directly ex	pended by the filing organization for section	on 527 exempt function	on activities > \$					
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities								
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b								
4	Did the filing organization file	e Form 1120-POL for this year?			Yes X No				
5	organization made payments amount of political contribution	and employer identification number (EIN) s. For each organization listed, enter the a is received that were promptly and directly delal action committee (PAC). If additional spa	mount paid from the flivered to a separate po	filing organization's fund blitical organization, such	ds Also enter the as a separate				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-				
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									

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

Schedule C (Form 990 or 990-EZ) 2016

Schedule <b>C</b> (Form 990 or 990-EZ) 2010	<sup>6</sup> Texas Home Sc	chool Coalition	Association	75-290	08407 Page 2		
Part II-A Complete if t section 501(	the organization i	s exempt under sec	ction 501(c)(3) an		<del>5010</del> ,		
<u></u>		to an affiliated group (and	list in Part IV each affi	liated group member's par			
		hare of excess lobbying		mateu group member 3 nur	110,		
	•	ed box A and 'limited coi	• •	,			
B Check > In the min							
(The term	Limits on Lobbying 'expenditures' means	red.)	(a) Filing (b) Affiliate organization's totals group tota				
1 a Total lobbying expenditu	ares to influence public	c opinion (grass roots lo	bbying)				
<b>b</b> Total lobbying expenditu	ires to influence a leg	islative body (direct lobb	ying).				
c Total lobbying expenditu	ures (add lines 1a and	1b)					
d Other exempt purpose e	expenditures						
e Total exempt purpose ex	xpenditures (add lines	1c and 1d)					
f Lobbying nontaxable am both columns.	nount Enter the amou	nt from the following tab	ole in				
If the amount on line 1e, colu	umn (a) or (b) is. Th	e lobbying nontaxable	amount is		3 (2) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Not over \$500,000		% of the amount on line 1e					
Over \$500,000 but not over \$1,	000,000 \$10	00,000 plus 15% of the excess	over \$500,000				
Over \$1,000,000 but not over \$		75,000 plus 10% of the excess					
Over \$1,500,000 but not over \$	17.000.000 \$22	25,000 plus 5% of the excess of	over \$1.500.000.				
Over \$17,000,000	<u> </u>	000,000	<del>• • • • • • • • • • • • • • • • • • • </del>				
g Grassroots nontaxable a					** ** ** ** ** ***		
h Subtract line 1g from lin							
i Subtract line 1f from line	<i>'</i>						
j If there is an amount othe section 4911 tax for this	r than zero on either lin		anızatıon file Form 472	0 reporting	Yes No		
(Some	e organizations that n	Year Averaging Period L nade a section 501(h) el v. See the separate instr	ection do not have to				
	Lobbyir	ng Expenditures During	4-Year Averaging Pe	riod			
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2013	<b>(b)</b> 2014	<b>(c)</b> 2015	<b>(d)</b> 2016	(e) Total		
2 a Lobbying nontaxable amount							
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))							
c Total lobbying expenditures							

f Grassroots lobbying expenditures

**d** Grassroots nontaxable amount

e Grassroots ceiling amount (150% of line 2d, column (e))

Schedule C (Form 990 or 990-EZ) 2016

Part II-B			mpt under section 501(c)(3	and has NOT filed Form 5768
	(election under	section 501(h)).		

	(á	a)	(b)
For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No	Amount
<ul> <li>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</li> <li>a Volunteers?</li> <li>b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?</li> </ul>			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total Add lines 1c through 1i		11.	
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b> If 'Yes,' enter the amount of any tax incurred under section 4912	<b>1</b> §	11	w
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Partill-A Complete if the organization is exempt under section 501(c)(4), section 501 section 501(c)(6).	(c)(5)	, or	
			Yes No

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	Х	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		X
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3		X
_	A 122 EA 1			

# Rart.III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) Part III-A, line 3, is answered 'Yes.'

	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).			
a	Current year	2a	<u> </u>	
Ŀ	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		0.
5	Taxable amount of lobbying and political expenditures (see instructions)	5		0.

### Part IV Supplemental Information

Provide 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, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information

### SCHEDULE D (Form 990)

**Supplemental Financial Statements** 

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

OMB No 1545-0047

Open to Public 3

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990.
► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Texas Home School Coalition Association 75-2908407 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' on Form 990, Part IV, line 6. (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) 3 Aggregate value at end of year 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? No 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 Yes Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of a historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the 2 last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2 a 2 b **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2dNumber of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No and enforcement of the conservation easements it holds? Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) No and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 8. 1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items ►Ś Revenue included on Form 990, Part VIII, line 1 **►**S (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items **►**\$ a Revenue included on Form 990, Part VIII, line 1 **b** Assets included in Form 990, Part X

Schedule D (Form 990) 2016 Texas  Part III Organizations Mainta				75-290 Other Similar Ass	
3 Using the organization's acquisition			<del></del>		<del></del>
items (check all that apply)	, 400000,011, 4114		,	o a olgrinicani acc or no	
a Public exhibition  b Scholarly research		H	or exchange programs		
b Scholarly research c Preservation for future gener	ations	e Other			
4 Provide a description of the organiz		and explain how the	y further the organization's	s exempt purpose in	
5 During the year, did the organiza to be sold to raise funds rather the	ition solicit or rec	eive donations of a	rt, historical treasures, c	or other similar assets	Yes No
Part IV Escrow and Custodia					<u> </u>
line 9, or reported an	amount on Fo	rm 990, Part X,	line 21.		,
1 a Is the organization an agent, trus on Form 990, Part X?	stee, custodian o	other intermediary	for contributions or other	er assets not included	Yes No
<b>b</b> If 'Yes,' explain the arrangement	ın Part XIII and	complete the follow	ing table	ı	
					Amount
c Beginning balance				1 c	
d Additions during the year				1 d	
e Distributions during the year				1 e	
f Ending balance				1 f	
2 a Did the organization include an a	amount on Form !	990, Part X, Ime 21	, for escrow or custodial	account liability?	Yes No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIII Che	ck here if the expla	nation has been provide	ed on Part XIII	
		_ <del>_</del>	<del> </del>		
Part V Endowment Funds. C					
1 - Paginning of year halance	(a) Current year	(b) Prior yea	ar (c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance b Contributions				<del></del>	<del> </del>
_					<del> </del>
<b>c</b> Net investment earnings, gains, and losses					
d Grants or scholarships					
<ul> <li>Other expenditures for facilities and programs</li> </ul>					
f Administrative expenses					
<b>g</b> End of year balance					
2 Provide the estimated percentag	-	ear end balance (li	ne 1g, column (a)) held	as·	
a Board designated or quasi-endowm		%			
<b>b</b> Permanent endowment	<del></del> %	0.			
c Temporarily restricted endowmer		6			
The percentages on lines 2a, 2b, a	na ze snoula equa	1 100%			
3a Are there endowment funds not in t	the possession of t	he organization that	are held and administered	for the	Yes No
organization by (i) unrelated organizations					3a(i)
(ii) related organizations					3a(ii)
<b>b</b> If 'Yes' on line 3a(ii), are the rela	ated organization	s listed as required	on Schedule R?		3b
4 Describe in Part XIII the intended	=				
Part VI Land, Buildings, and	Equipment.	-			
Complete if the organ		red 'Yes' on For	m 990, Part IV, line	e 11a. See Form 99	0, Part X, line 10.
Description of property	(a)	Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land			` '		
<b>b</b> Buildings				T 1.7	
c Leasehold improvements					
<b>d</b> Equipment					
<b>e</b> Other		69,187.		69,187.	0.
Total. Add lines 1a through 1e (Colum	nn (d) must equa	l Form 990, Part X,	column (B), line 10c ).	<b>•</b>	0.
BAA				Schedu	ule <b>D</b> (Form 990) 2016

**∤** , →

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost of	or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
<u>(I)</u>			
Total (Column (b) must equal Form 990, Part X, column (B) line 12)			
Part. VIII Investments – Program Related. Complete if the organization answered	L'Vos' on Form 00	N/A	orm 000 Part V line 12
(a) Description of investment	(b) Book value	(c) Method of valuation Cost (	
	(b) Book value	(C) Wethod of Valuation Cost (	il end-or-year market value
(1) (2)			
(3)			
(4)		<del>-</del>	
(5)			
(6)			<u> </u>
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13)			
Part IX Other Assets.	N/1	A	
Complete if the organization answered		00, Part IV, line 11d. See Fo	
	scription		<b>(b)</b> Book value
(1)			
(2)			
(4)			
(5)	<del></del>		
(6)			
(7)			
(8)			
(9)			
(10)			
(10)  Total. (Column (b) must equal Form 990, Part X, column (column (b) must equal Form 990, Part X, column (column (	B) line 15 )		•
(10)  Total. (Column (b) must equal Form 990, Part X, column (c)  Part X Other Liabilities.		110 or 11f Soo Form 000 Part Y II	
Total. (Column (b) must equal Form 990, Part X, column (complete if the organization answered 'Yes' on F	form 990, Part IV, line		
(10)  Total. (Column (b) must equal Form 990, Part X, column (complete if the organization answered 'Yes' on Factorial (a) Description of liability			
(10)  Total. (Column (b) must equal Form 990, Part X, column (complete if the organization answered 'Yes' on Factorial income taxes  (1) Federal income taxes	orm 990, Part IV, line (b) Book value		
(10)  Total. (Column (b) must equal Form 990, Part X, column (c)  Part X Other Liabilities. Complete if the organization answered 'Yes' on F  (a) Description of liability  (1) Federal income taxes (2) Accrued expenses	form 990, Part IV, line		
(10)  Total. (Column (b) must equal Form 990, Part X, column (complete if the organization answered 'Yes' on Factorial income taxes  (1) Federal income taxes	orm 990, Part IV, line (b) Book value		
(10)  Total. (Column (b) must equal Form 990, Part X, column (c)  Part X Other Liabilities. Complete if the organization answered 'Yes' on F  (a) Description of liability (1) Federal income taxes (2) Accrued expenses (3) Rounding (4) (5)	orm 990, Part IV, line (b) Book value		
Total. (Column (b) must equal Form 990, Part X, column (c)  Part X Other Liabilities. Complete if the organization answered 'Yes' on F  (a) Description of liability  (1) Federal income taxes  (2) Accrued expenses  (3) Rounding  (4)  (5)  (6)	orm 990, Part IV, line (b) Book value		
(10)  Total. (Column (b) must equal Form 990, Part X, column (complete if the organization answered 'Yes' on Factorial income taxes (2) Accrued expenses (3) Rounding (4) (5) (6) (7)	orm 990, Part IV, line (b) Book value		
(10)  Total. (Column (b) must equal Form 990, Part X, column (complete if the organization answered 'Yes' on Factorial income taxes (2) Accrued expenses (3) Rounding (4) (5) (6) (7) (8)	orm 990, Part IV, line (b) Book value		
(10)  Total. (Column (b) must equal Form 990, Part X, column (complete if the organization answered 'Yes' on Factorial income taxes (2) Accrued expenses (3) Rounding (4) (5) (6) (7) (8) (9)	orm 990, Part IV, line (b) Book value		
(10)  Total. (Column (b) must equal Form 990, Part X, column (complete if the organization answered 'Yes' on Factorial income taxes (2) Accrued expenses (3) Rounding (4) (5) (6) (7) (8) (9) (10)	orm 990, Part IV, line (b) Book value		
(10)  Total. (Column (b) must equal Form 990, Part X, column (c)  Part X Other Liabilities. Complete if the organization answered 'Yes' on F  (a) Description of liability (1) Federal income taxes (2) Accrued expenses (3) Rounding (4) (5) (6) (7) (8) (9) (10) (11)	(b) Book value	32.	
(10)  Total. (Column (b) must equal Form 990, Part X, column (complete if the organization answered 'Yes' on Factorial income taxes (2) Accrued expenses (3) Rounding (4) (5) (6) (7) (8) (9) (10)	(b) Book value  10, 9	32. 1.	ne 25

Schedule <b>D</b> (Form 990) 2016 Texas Home School Coalition As		75-2908407	Page <b>4</b>
Rant XI Reconciliation of Revenue per Audited Financial Stat		•	
Complete if the organization answered 'Yes' on Form 9	990, Part IV, line 1 <u>2a</u>		
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.		***	
a Net unrealized gains (losses) on investments	2 a		
<b>b</b> Donated services and use of facilities	2 b		
c Recoveries of prior year grants	2 c		
d Other (Describe in Part XIII)	2 d		
e Add lines 2a through 2d		2 e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a Investment expenses not included on Form 990, Part VIII, line 7b.	4 a		
<b>b</b> Other (Describe in Part XIII)	4 b		
c Add lines 4a and 4b		4 c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, lin	e 12)	5	
Part XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' on Form 9			<u> </u>
	990, Fait IV, IIIIe 12a		
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	1 - 1		
a Donated services and use of facilities	2 a		
<b>b</b> Prior year adjustments	2 b		
c Other losses	2c	^` <u>\</u>	
d Other (Describe in Part XIII )	2 d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1	1 1	3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		***	
a Investment expenses not included on Form 990, Part VIII, line 7b.	4 a		
<b>b</b> Other (Describe in Part XIII) <b>c</b> Add lines <b>4a</b> and <b>4b</b>	40	4 c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, III	ne 18 )	5	
Part XIII Supplemental Information.			
	and 4. Part IV/ Junes 15 and	d 2h Dort V	
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Al	so complete this part to pr	iu zb, Fart v, ovide any additional informatio	on

# SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 or 22.

OMB No 1545-0047

2016

Inspection

Texas Home School Coalition Association	75-2908407	
Part I. General Information on Grants and Assistance		
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	Yes	×
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States		]
Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes' on	answered 'Yes' on	
Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	ace is needed.	

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
Various							Promotion of
			10,063.	0.			Home Education
(2)							
(3)	:						
(4)							
<u>(5)</u>							
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
(9)							
					_		
6							
(8)							
	3) and government o	organizations listed	n the line 1 table	i		<b>A</b>	0
3 Enter total number of other organizations listed in the line 1 table	ions listed in the line	• 1 table				•	

Schedule I (Form 990) (2016)

TEEA3901L 11/03/16

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

Schedule I (Form 990) (2016) Texas Home School Coalition Association

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, EMV, appraisal, other)	(f) Description of noncash assistance
-					
2					
m					
4					
S.					
v					
7					
Partiv Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	ide the information	required in Part I,	line 2; Part III, coli	umn (b); and any other	r additional information.

TEEA3902L 11/03/16

Schedule I (Form 990) (2016)

### 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.

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

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

OMB No. 1545-0047

2016

75-2908407

Texas Home School Coalition Association

Form 990, Part VI. Line 11b - Form 990 Review Process

No review was or will be conducted.

### Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

There is only one member of the Board that does business with the organization. He owns an insurance agency that the organization obtains insurance through and therefore receives some sort of payment through the agency. The payment to him amounts to around \$100 per year. The fiannce committee and executive leadership team review the vendor list on a regular basis to see what vendors are receiving payment and thus see if there are any conflicts of interest.

### Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

The finance committee, at the Board's direction, examined about five other non-profit organizations to determine their pay scales. Factors included tenure with the organization, growth in revenue and managing infrastructure, reputation of the president in the relevant target demographic, and the time necessary to promote, fundraise, and manage the organization. The finance committee determined that the president's current benefit package was in line with other similar non-profit organizations.

### Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

No other documents available to the public.

SCHEDULE R

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

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

OMB No 1545-0047 2016

Open to Public Employer identification number

75-2908407

Texas Home School Coalition Association

Part [3] Identification of Disregarded Entities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 33.

(f)
Direct controlling
entity Partil Identification of Related Tax-Exempt Organizations. Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (e) End-of-year assets (d) Total income (c)
Legal domicile (state or foreign country) (b) Primary activity (a) Name, address, and EIN (if applicable) of disregarded entity (I) ئ ල¦

one or more related tax-exempt organizations during the tax year.	ations during the tax ye	ar.					
(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 501(c)(3))	(f) Direct controlling entity	(g) Sec 512(b)(13) controlled entity?	7(13) entity?
						Yes	No
(1) Texas Home School Coalition 6502 Slide Road, Ste. 206					Colle		
	Homeschool Support		501 (c) (3)	6	THSC Association		×
(2)							
(3)			ļ				
<u></u>							
	,						

Schedule **R** (Form 990) 2016

Schedule R (Form 990) 2016 Texas Home School Coalition Association

**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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	Direct Controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)		(f) Share of total Income	(g) Share of end-of-year assets		(h) ropor- nate ations?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	r Percentage	e . c
(I)													
(Z)			<u>.</u>										
(3)													1
1											_		
							1						
Partiv Identification of Ine 34 because	<b>Identification of Related Organizations Taxable as a Corporation or Trust</b> Complete if the organization answ line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	izations T	Faxable as	is a Corporation or Trust Complete if the organization answered 'Yes' on Form 990, Part IV, zations treated as a corporation or trust during the tax year.	on or Trus as a corp	t Complete or tr	if the organst during	anization ar	Jswere ear.	Yes' on Fo	orm 990, F	art IV,	1
<b>(a)</b> Name, address, and EIN of related organization	of related organization		(b) Primary activity	Legal domicile (state or foreign	(d) Direct controlling	(e) Type of entity (C corp, S corp,		(f) Share of total income	-	(g) Share of end-of- year assets	(h) Percentage ownership	Sec 512(b)(13) controlled entity?	20
				coulliy)		5	ust)		_			Yes No	ا ا
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Page 3

# Schedule R (Form 990) 2016 Texas Home School Coalition Association 75-290 Part V Transactions With Related Organizations. Complete If the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36.

I

			- 1
<b>Note.</b> Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			Yes No
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?	isted in Parts II-IV2		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1a X
<b>b</b> Gift, grant, or capital contribution to related organization(s)			1b
c Gift, arant, or capital contribution from related organization(s)			-
a loop or loop or asset to or for related organization(s)			
Legals of loan guarantees to of for related organization(s)			
e Loans or loan guarantees by related organization(s)			1e X
			3
f Dividends from related organization(s)			1f X
g Sale of assets to related organization(s)			1g ×
h Purchase of assets from related organization(s)			1h X
i Exchange of assets with related organization(s)			1: X
i Lease of facilities, equipment, or other assets to related organization(s)			1.
k Lease of facilities, equipment, or other assets from related organization(s)			1k X
I Performance of services or membership or fundraising solicitations for related organization(s)			11 X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s)			1m X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1 ×
o Sharing of paid employees with related organization(s)			L_
p Reimbursement paid to related organization(s) for expenses			7 X X
<b>q</b> Reimbursement paid by related organization(s) for expenses			1q ×
r Other transfer of cash or property to related organization(s)			,
s Other transfer of cash or property from related organization(s)			1s X
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	red relationships and trar	saction thresholds	
(a) Name of related organization	(b) Transaction	(c) Amount involved M	(d) Method of determining
	type (a-s)		amount involved
(1) Texas Home School Coalition	п	8,764.5	50/50
(2) Texas Home School Coalition	0	343, 686.5	50/50
(3) Texas Home School Coalition	Ω	19,577.Actual	ctual expense
(4)			
(5)			
(9)			
BAA TEEA5003L 09/09/16		Schedule	Schedule R (Form 990) 2016

75-2908407

Schedule **R** (Form 990) 2016

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

lated, excluded remained remai	(a) Name, address, and EIN of entity	(b) Primary activity	Legal domicile (state or foreign	(d) Predominant income	Are all partners section	i	Share of total income	(g) Share of end-of-year	(h) Disproportionate	Code V UBI amount in box	General or managing	at or Pe	(k) Percentage ownership
Sections 512-514) Yees No Yees			(faibo)	lated, excluded from tax under	organizat	tions?			allocation	K-1 (Form 1065)			
				sections 512-514)	$\overline{}$	N <sub>o</sub>			<u></u>	1	Yes	<u>گ</u>	
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	-1	<del></del>											
		-;											
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Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.