·Form 990

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

For the 2018 calendar year, or tax year beginning 2018, and ending D Employer identification number Check if applicable 75-2908407 Address change Texas Home School Coalition Association O. Box 6747 Telephone number Name change Lubbock, TX 79493 Initial return 806-744-4441 Final return/terminated G Gross receipts \$ Amended return 1,065,150. H(a) Is this a group return for subordinates? F Name and address of principal officer Application gending Yes X No H(b) Are all subordinates included?

If "No," attach a list (see instructions) Yes Same As C Above Tax-exempt status, 501(c)(3) X 501(c) (4 (insert no ' 4947(a)(1) or Website: ► THSC.org H(c) Group exemption number ▶ X Corporation 2000 M State of legal domicile Form of organization Other P L Year of formation Association Part | Summary Briefly describe the organization's mission or most significant activities The organization provides legal assistance and advocacy for homeschools. Activities & Governance Check this box ► If the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 23 Total number of volunteers (estimate if necessary) 6 242,549.7a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T 7b -28,121. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 707,827 815,982. NOV **25** 2019 9 Program service revenue (Part VIII, line 2g) $\overline{243}$, 676. 230,615. 10 Investment income (Part VIII, column (A), lines 3, 4 636. Other revenue (Part VIII, column (A), lines 5, 6d, 8d, 9c 7.001 5,492.Total revenue - add lines 8 through 11 (must equa 12 946,079. 1,065,150.13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 11,294 5,317. Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 446,642 436,391. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 576,447 457,286. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 1,034,383. 898,994. Revenue less expenses Subtract line 18 from line 12 -88,304. 166,156. **End of Year Beginning of Current Year** Total assets (Part X, line 16) 243,185. 20 238,240. 21 Total liabilities (Part X, line 26) 237,907. 76,696. Net assets or fund balances Subtract line 21 from line 333 166,489 Part II Signature Block Under penalties of pertury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here Type or print name and title Rani/Type preparer's name PTIN Check Sames C. Pennington, CPA self-employed P00012460 Paid Firm's name Preparer James C. Pennington CPA Use Only (irin)'s address P.O. Box 290730 Firm's EIN

Form 990 (2018)

Phone no

(830)

377-8144

X Yes

Kerrville, TX 78029-0730

May the IRS discuss this return with the preparer shown above? (see instructions)

orm-990 (2018)	Texas Home School	l Coalition Association	75-2908	407 Pag
		vice Accomplishments		
		esponse or note to any line in this Part III		
- •	be the organization's mission		6- 1	
The organ	nization provides	<u>legal assistance and advocac</u>	y for nomeschools.	
				
2 Did the organiz	zation undertake any construc	ant program services during the year which were n	at listed on the prior	
Form 990 or 9		and program services during the year which were h	of fisted of the prior	Yes X I
	be these new services on Sc	rhadula O	L	ies V
		or make significant changes in how it conducts	any program services?	Yes X
_	be these changes on Schedu		, any program sortious] .cs <u>N</u>
Section 501(c	organization's program sen)(3) and 501(c)(4) organiza if any, for each program se	vice accomplishments for each of its three largations are required to report the amount of grain ervice reported	est program services, as measints and allocations to others, th	ured by expense e total expense
a (Code) (Expenses \$	515, 975. including grants of \$) (Revenue \$	
	 -	direct and at the grassroots		ore person
		overnment regulation and inte		
		cation of their children.	ivencion into the i	igites of .
Parence 1	in arrect cure ear			
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	- 	cate on issues affecting home suppliers and various educati		1
	·		·	
) (Fire-see S	2 050	\(\(\text{Devices}\)	
c (Code	(Expenses \$	3,850, including grants of \$) (Revenue \$	23,790
threatene	ed with legal act	ers: In the event that a mem ion related to its homeschool t cannot be resolved by THSCA	, THSCA staff will a	ttempt to
				-
	·			-
				
			. 	
d Other program				
(Expenses	services (Describe in Sch	edule O)		
<u>·</u>	services (Describe in Sch \$	edule O) including grants of \$) (Revenue \$	
	•	•) (Revenue \$) Form 990 (2

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	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, VII, VIII, IX, or X as applicable			
ā	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	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	11 b		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		<u>x</u> _
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	11 d		X
	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		X
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		<u>X</u> _
t	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	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
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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		
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		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	Х	
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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2 ⁹ If 'Yes,' complete Schedule I, Parts I and III	22		х
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
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
ı	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
•	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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
ł	s 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		Х
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		Х
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)			
ā	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an	28c		X
29	officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
30	contributions? If 'Yes,' complete Schedule M	30		X
31	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		<u> </u>
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	х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
t	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38		Х
Par	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
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		163	
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1 b 0			
c	: Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
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Part V

Statements Regarding Other IRS Filings and Tax Compliance (continued)

					Yes	No
2	a 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	23		o A	
	b If at least one is reported on line 2a, did the organization file all required federal employment	nt tax returns?		2Ь	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see in	structions)	į	7 T	national and	2.35
3	a Did the organization have unrelated business gross income of \$1,000 or more during the ye	ar ⁹	" ا	3 a	X	
	b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O			3ь	X	
4	a At any time during the calendar year, did the organization have an interest in, or a signature or oth	er authority over, a	Γ	,	_	
	financial account in a foreign country (such as a bank account, securities account, or other	financial account)?	Ļ	4 a	. % Чованови	X
	o If 'Yes,' enter the name of the foreign country					
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial		ž	23		L.
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax	•	-	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shell by the line Form 9996 T2	ter transaction?		5 b		
	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		-	36		
	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?		ition	6 a		х
	old if Yes, did the organization include with every solicitation an express statement that such contribution not tax deductible?	tions or gifts were		6 b	A) W 481	
7	Organizations that may receive deductible contributions under section 170(c).		`	304 14		
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and p	partly for goods and	2			
	services provided to the payor?		L	7 a		<u> </u>
	of f 'Yes,' did the organization notify the donor of the value of the goods or services provided?		- -	7 b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it Form 8282?			7 c		4, 24224
	I If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d	<u>2</u>			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal		L	7 e		<u> </u>
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal ber		-	71		 -
	If the organization received a contribution of qualified intellectual property, did the organization file as required?			7 g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?		_	7 h	A corner	**************************************
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	2	8	(- 1 div	179
9	Sponsoring organizations maintaining donor advised funds.		হ		新级)。	W. AN
	Did the sponsoring organization make any taxable distributions under section 4966?		4	9 a	53,-24,	A 7 12840
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related per	rson?	-	9 b		
	Section 501(c)(7) organizations. Enter	. • • • • • • • • • • • • • • • • • • •	1	phinte l	數學	1400
	Initiation fees and capital contributions included on Part VIII, line 12	10a	£ 3		da vertira a	
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 Ь				
	Section 501(c)(12) organizations. Enter:			*		
ä	Gross income from members or shareholders	11 a	€ E	4		
ŀ	Gross income from other sources (Do not net amounts due or paid to other sources		£,			
	against amounts due or received from them)	[11b]		Ministr.	500	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of		6	12 a	G '70	*6 o '31
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b				
	Section 501(c)(29) qualified nonprofit health insurance issuers.		2	120		
č	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedu	lo O	<u>.</u>	13a	63. Tay	¥. #4
	·	ie O	*			
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			**** ***	
	Enter the amount of reserves on hand			1 de .	£ 5	X
	Did the organization receive any payments for indoor tanning services during the tax year?	Sahadula O	}	14a		
	olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in		- -	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in excess parachute payment(s) during the year?	n remuneration or		15	980 . Au	X
	If 'Yes,' see instructions and file Form 4720, Schedule N		نتما	chiiciin a		
16	Is the organization an educational institution subject to the section 4968 excise tax on net in	vestment income?	Ļ	16		X ************************************
A *	If 'Yes,' complete Form 4720, Schedule O		<u>\</u>	al Day		2010
AΑ	TEEA0105L 12/31/18		F	orm	99U (2018)

Form 990 (2018) Texas Home School Coalition Association 75-2908407 Page 6 Rait 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 No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 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 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 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 Х since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 X 7 a 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? 7 a Х **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 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8 a Х X **b** Each committee with authority to act on behalf of the governing body? 8 b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. No Yes 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 operations are consistent with the organization's exempt purposes? 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a Х **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Х 12_b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in See Schedule O X 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? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 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 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? 16 b

<u> 260</u>	ction C. Disclosure	
17	List the states with which a copy of this Form 990 is required to be filed None	
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3) available for public inspection. Indicate how you made these available. Check all that apply	s only)
	Own website Another's website X Upon request Other (explain in Schedule O)	
19	Describe in Schedule 0 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	
20	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	
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Form 990 (2018)	Tovac	Home	School	Coalition	Association
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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

- 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

Check this box if neither the organization nor any relat	ed organiz	ation	con	nper	ısate	ed an	у си	irrent officer, direct	or, or trustee	
(C)										
(A) Name and Title	(B) Average hours per	than	n one s both dir	box, an c ector	unles officer trust/	eck moss pers and a ee)	son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) Tim Lambert	40									
President	0 -	Х		X				54,000.	0.	0.
(2) Ray Ballman	1									,
Vice President	0	Х		Х				0.	0.	0.
(3) Kent Dowden	_ 1									
Director	0	X				<u> </u>		0.	0.	0.
_(4) James Frank	1									
Director	0	X_						0.	0.	0.
(5) Donna Harp	_ 1									
Director	0	X						0.	0.	0.
(6) Mary James	_ 1									
Director	0	Х						0.	0.	0.
⑦ Doug Bartsch	1									
Treasurer	0	Х		Х				0.	0.	0.
_(8) Kyle_Workman	1_									
Director	0	Х			L			0.	0.	0.
(9) Gavino Perez	1_									
Secretary	0	Х		Х		Ш	<u>L</u>	0.	0.	<u> </u>
(10) Sarah Singleton	1									
Director	0	X						0.	0.	0.
(11) Rayland Van Norman	1									
Director	0	X						0.	0.	0.
(12) Nathan Macias	0									
Director	0	X						0.	0.	<u> </u>
(13)										
(14)									-	
										

Partivil Section A. Officers, Directors, Tru	(B)	ney	LII	_	C)		aiii	u mignest con	ipensateu Li	IIpioyee	- (cont	inucuj
' (A) Name and title	Average hours per	рох	, unle	check ess p	erson	e than i is bot tor/trus	lh an	(D) Reportable compensation from	(E) Reportable compensation from	m lan	(F) Estimate rount of o	other
•	week (list any hours for related organiza - tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizatio (W-2/1099-MISC)	ns co	ompensat from the organizati and relate rganizatio	tion e ion ed
<u>(15)</u>					_							
(16)												
(17)	- -											
(18)	 											
(19)							_				-	
(20)												
(21)	 											
(22)					-							
(23)												
(24)				_	_							
(25)					-							
1 b Sub-total	ļ			ļ			>	54,000.		0.	-	0
c Total from continuation sheets to Part VII, Secti	on A						•	0.		0.		0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited	I to those I	isted	abo	ve) v	who	recei	ved	54,000. more than \$100.00		0. ompensati	on	0 .
from the organization 0				,								
3 Did the organization list any former officer, direct	tor, or tru	ıstee.	. kev	v en	olan	vee.	or h	nighest compensa	ted employee		Yes	<u> </u>
on line 1a ⁷ If 'Yes,' complete Schedule J for suc 4 For any individual listed on line 1a, is the sum of	ch individu	ıal								3	1 ./.	X
the organization and related organizations greate such individual	er than \$1	50,0	00 ⁷	If '\	res,	' con	nple	te Schedule J for		<u>4</u>	<u> </u>	X
5 Did any person listed on line 1a receive or accru for services rendered to the organization? If 'Yes	e comper s,' comple	nsatio	on fr	om dule	any J fo	unre or suc	elate ch p	ed organization or person	ındıvıdual	5		X
1 Complete this table for your five highest compen	sated ind	epen	den	t co	ntra	ctors	tha	at received more t	han \$100,000 of	f	•	
compensation from the organization Report compen	isation for	the c	alen	dar	year	endi	ng v	with or within the or	ganization's tax y	/ear	(C)	
Name and business add Baker & Hostetler 811 Main Street		on,	TX	7	702	2		Description Legal serv		Comp	perisati	on ——
2 Total number of independent contractors (including t		ited to	o tho	se I	listed	d abo	ve)	who received more	than	``,	,	
\$100,000 of compensation from the organization		TEEA	1100	09/	03/19					For	n 990	(2018

		Check if Schedule O	contains a res	ponse or note to an	ly line in this Part V	/III		
			i da		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated husiness revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b c d	Federated campaigns Membership dues Fundraising events. Related organizations Government grants, (contributor	1 a 1 b 1 c 1 c 1 c 1 c 1 c 1 c 1 c 1 c 1 c	565,549.				
	g	All other contributions, gifts, g similar amounts not included. Noncash contributions included Total. Add lines 1a-1f			815, 982.	201		
Program Service Revenue		Review Magazine Interest income			242,549. 1,127.	1,127.	242,549.	
Progre		All other program service Total. Add lines 2a-2f	ce revenue	•	243,676.			7007 80 2012 10 2013
	4	Investment income (inc other similar amounts) Income from investmen Royalties	J	•				
	b c	Gross rents , Less rental expenses Rental income or (loss)	(i) Real	(II) Personal	t all			
	7 a	Net rental income or (Io Gross amount from sales of assets other than inventory	(i) Securities	(II) Other	467		The state of the s	Total Control
	С	Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss)			7000	ACIONAL SOLUTION OF THE PARTY O		Section 1985
evenue	8 a	Gross income from function (not including \$	_					
Other Reven	b c	See Part IV, line 18 Less direct expenses Net income or (loss) fro	_	b events				
	b	Gross income from gam See Part IV, line 19 Less direct expenses Net income or (loss) fro		a		A Company		
	10a	Gross sales of inventory and allowances Less cost of goods sold	, less returns	a		Paragraphic Control		
		Net income or (loss) fro		entory >				
ļ		Miscellaneous Revenu	ie	Business Code		W		<u> </u>
		Rebates Miscellaneous		900099	3,792. 1,700.	3,792. 1,700.		
	-	All other revenue						
		Total. Add lines 11a-11d		•	_5,492.			ALWAY AND A
	12	Total revenue. See instr	ructions	>	1,065,150.	6,619.	242,549.	0.

Part X 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										
	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	5,317.	5,317.								
2	Grants and other assistance to domestic individuals See Part IV, line 22										
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16										
	Benefits paid to or for members Compensation of current officers, directors,										
5	trustees, and key employees	54,000.	0.	54,000.	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	350,335.	262,751.	87,584.							
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)										
9	Other employee benefits										
10	Payroll taxes	32,056.	24,042.	8,014.							
11	Fees for services (non-employees)										
	Management				 						
	Legal	19,296.	14,472.	4,824.							
	Accounting	1,694.		1,694.							
	Lobbying Professional fundraising services See Part IV, line 17		100 x 110 200 x 2 60 00 00 4 60.								
f g	Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0)			500 100 100 100 100 100 100 100 100 100							
	Advertising and promotion	16,333.	16,333.								
13		408.	306.	102.							
14 15	Information technology Royalties										
16	Occupancy	38,883.	29,162.	9,721.							
17	Travel	26,780.	20,085.	6,695.	<u> </u>						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	20,700.	20,003.	, 0,055.							
19	Conferences, conventions, and meetings	48,176.	48,176.								
20	Interest	1,330.	998.	332.							
21	Payments to affiliates										
	Depreciation, depletion, and amortization	5,801.	4,351.	1,450.							
	Insurance 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	Printing and Publications	98,601.	98,601.								
	Postage and Shipping	95,202.	95,202.								
	Credit card fees	30,386.	30,386.								
	Contract labor	29,634.	29,634.	2.604							
	All other expenses	44,762.	41,078.	3,684.							
25	Total functional expenses. Add lines 1 through 24e	898,994.	720,894.	178,100.	O.						
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).		-		,						

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X **(B)** End of year (A) Beginning of year Cash - non-interest-bearing 23,205 1 40,287. 2 Savings and temporary cash investments 50,148. 51,073. 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 43,795 72,561. Loans and other receivables from current and former officers, directors trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 7 Notes and loans receivable, net Inventories for sale or use 8 9 Prepaid expenses and deferred charges 24,060 637 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 3,670 b Less accumulated depreciation 10b 10 c 3,670 Investments - publicly traded securities. 11 11 Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 14 14 Intangible assets 63,795 57,994. 15 15 Other assets See Part IV, line 11 33,237 9,633. Total assets. Add lines 1 through 15 (must equal line 34) 16 238,240 16 243,185. Accounts payable and accrued expenses 17 17 131,758 12,218. Grants payable 18 18 24,692 19 Deferred revenue 81,030 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 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 20,000 25,000. 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 25 5,119 14,786. 26 Total liabilities. Add lines 17 through 25 76,696 237,907 Organizations that follow SFAS 117 (ASC 958), check here X and complete Balances lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 27 333 166,489 28 28 Temporarily restricted net assets 29 Permanently restricted net assets or Fund 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 Assets Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 333 166,489.

TEEA0111L 08/03/18

Total liabilities and net assets/fund balances

243, 185. Form **990** (2018)

34

238,240

ori	m990(2018) Texas Home School Coalition Association	75-2908407		Page	72
Pa	rt汉[建 Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,06	5,150	<u>J.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	89	8,994	4.
3	Revenue less expenses Subtract line 2 from line 1	3	16	6,15	<u>5</u> .
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4		333	
5	Net unrealized gains (losses) on investments	5			
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		(ο.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	160	5,489	— Э.
Ŗã	rt:XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			•	П
			Y	es N	<u> </u>
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		2 2		
	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?		2a	}	<u> </u>
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or rev separate basis, consolidated basis, or both. Separate basis Consolidated basis Both consolidated and separate basis	viewed on a		A	
	b Were the organization's financial statements audited by an independent accountant?		2 b	\	ζ.
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sebasis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis	parate			
•	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?	audīt,	2 c		
_	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
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?	gle	3 a	Ż	X
١	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		
BA/			Form 9	90 (20	10
JM/	122701122 00/00/10		FOIIII 9	JU (20	10

BAA

Form **990** (2018)

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 **2018**

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

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

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

	xy Tax) (see separate instruct	tions), then rganizations Complete Part III	(,	•	
		ome School Coalition Associ	ation	Employer identifica	ation number	
				75-290840		
		rganization is exempt under secti			zation.	
1		organization's direct and indirect political on of 'political campaign activities')	campaign activities in	Part IV		
2	Political campaign activity ex	penditures (see instructions)		▶\$		
3	Volunteer hours for political	campaign activities (see instructions)				
Pai		rganization is exempt under secti				
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955	▶\$		
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955	▶\$		
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for	r this year?		Yes	No
4 8	a Was a correction made?	~°.			Yes	No
ı	b If 'Yes,' describe in Part IV	anoth.				
Pai		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 527 exempt function activities	g organization's funds contributed to other s	organizations for sec	ction ► \$		
3	Total exempt function expen line 17b	ditures Add lines 1 and 2 Enter here and	on Form 1120-POL,	► \$		
4	Did the filing organization file	e Form 1120-POL for this year?			Yes	X No
5	organization made nauments	and employer identification number (EIN) For each organization listed, enter the as received that were promptly and directly de I action committee (PAC) If additional sp	mount paid from the :	filing organization's fund	ds. Also enter the	!
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of politicontributions received promptly and direct delivered to a separ political organization none, enter -0-	d and ctly rate
(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) 2018

•			,		
Schedule C (Form 990 or 990-EZ) 201	the organization			75-290 filed Form 5768 (e	
section 501(and the second second (second	d list in Bort IV open offili	atod group mombor's pag	
		gs to an affiliated group (and		ated group member's nam	ie,
	•	d share of excess lobbying			
B Check ► if the filing	ng organization che	cked box A and 'limited co			
(The term		ring Expenditures ins amounts paid or incu	rred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expendit			•		. =
b Total lobbying expendit	ures to influence a l	egislative body (direct lob	bying)		
c Total lobbying expendit	•	nd 1b)			
d Other exempt purpose	expenditures				
e Total exempt purpose e	expenditures (add lin	nes 1c and 1d)			
f Lobbying nontaxable ar both columns.	nount Enter the am	ount from the following ta	able in		
If the amount on line 1e, col	umn (a) or (b) is:	The lobbying nontaxable	amount is		
Not over \$500,000		20% of the amount on line 1e		20000	
Over \$500,000 but not over \$1	,000,000	\$100,000 plus 15% of the exces	s over \$500,000		And Spiriting
Over \$1,000,000 but not over \$	\$1,500,000	\$175,000 plus 10% of the excess	s over \$1,000,000		
Over \$1,500,000 but not over \$	\$17,000,000	\$225,000 plus 5% of the excess	over \$1,500,000		
Over \$17,000,000		\$1,000,000		A STA	
g Grassroots nontaxable	amount (enter 25%	of line 1f).			
h Subtract line 1g from lin	ne 1a If zero or less	s, enter -0-			
i Subtract line 1f from lin	e 1c If zero or less	, enter -0-			
j If there is an amount other section 4911 tax for this	er than zero on either s year?	line 1h or line 1i, did the or	ganization file Form 4720	reporting	Yes No
		4-Year Averaging Period	Under Section 501(h)		-
(Som	columns be	t made a section 501(h) e low. See the separate ins	tructions for lines 2a th	rough 2f.)	
	Lobb	ying Expenditures During	g 4-Year Averaging Peri	od	
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount				MONOMAN () h V Y AA MALA CA (IA	
e Grassroots ceiling amount (150% of line 2d, column (e))					

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2018

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

•	(a	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
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			
a Volunteers?			244
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			1,510
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	737	(10)(N)	
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
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?			
Part III A Complete if the organization is example under section 501(cV4), section 501	(c)(5)	Or	

Rartelli-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			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

(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.'

1	Dues, assessments and similar amounts from members		
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	2 a	
ı	Carryover from last year	2 b	
	: Total	2 c	
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.

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

OMB No 1545-0047 2018

Department of the Treasury Internal Revenue Service

Name of the organization

	Open to Public Inspection
Employer	dentification number

	Texas Home School Coalition	n Association	75-2908407
Par	त्। Organizations Maintaining Dono	r Advised Funds or Other Similar	Funds or Accounts.
	Complete if the organization answ	wered 'Yes' on Form 990, Part IV,	line 6.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and dor are the organization's property, subject to the	nor advisors in writing that the assets held organization's exclusive legal control?	ın donor advised funds Yes No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in writing that grant of the donor or donor advisor, or for any o	t funds can be used only other purpose conferring Yes No
Par	till Conservation Easements.	1 N 1 5 000 D 1 N 1	. 7
		wered 'Yes' on Form 990, Part IV,	line /.
7	Purpose(s) of conservation easements held by		han of a backgroundly respectively land area
	Preservation of land for public use (e g , r	· · · · · · · · · · · · · · · · · · ·	tion of a historically important land area tion of a certified historic structure
	Protection of natural habitat Preservation of open space	Freserval	tion of a certified historic structure
2	Complete lines 2a through 2d if the organization h	held a qualified conservation contribution in th	e form of a conservation easement on the
_	last day of the tax year	ield a qualified conscivation contribution in th	
			Held at the End of the Tax Year
ā	Total number of conservation easements		2a
	Total acreage restricted by conservation easer		2 b
	Number of conservation easements on a certification	• •	2c
(Number of conservation easements included in structure listed in the National Register		2 d
3	Number of conservation easements modified, trantax year ►	isferred, released, extinguished, or terminated	I by the organization during the
4	Number of states where property subject to conse	 	
5	Does the organization have a written policy re and enforcement of the conservation easemer		n, handling of violations, Yes No
6	Staff and volunteer hours devoted to monitoring, i	nspecting, handling of violations, and enforcing	ng conservation easements during the year
7	Amount of expenses incurred in monitoring, inspe	cting, handling of violations, and enforcing co	enservation easements during the year
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements	of section 170(h)(4)(B)(i) Yes No
9	conservation easements	to the organization's financial statements t	hat describes the organization's accounting for
P.ar	Complete if the organization ans	ctions of Art, Historical Treasures wered 'Yes' on Form 990, Part IV,	s, or Other Similar Assets. line 8.
1 a	a If the organization elected, as permitted under art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finar	eld for public exhibition, education, or research	
ŀ	If the organization elected, as permitted under historical treasures, or other similar assets held for following amounts relating to these items	r SFAS 116 (ASC 958), to report in its rever or public exhibition, education, or research in	enue statement and balance sheet works of art, furtherance of public service, provide the
	(i) Revenue included on Form 990, Part VIII,	line 1	> \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, hamounts required to be reported under SFAS	nistorical treasures, or other similar assets for 116 (ASC 958) relating to these items:	
a	Revenue included on Form 990, Part VIII, line	1	> \$
t	Assets included in Form 990, Part X	·	▶\$

Schedule D (Form 990) 2018 Texa				75-290	
Part III Organizations Mainta	ining Collecti	ons of Art, Histo	orical Treasures, o	r Other Similar Ass	ets (continued)
3 Using the organization's acquisition items (check all that apply)	n, accession, and o	other records, check a	iny of the following that a	re a significant use of its	collection
a Public exhibition		d Loan	or exchange programs		
b Scholarly research		e 🗌 Other	·		<u></u>
c Preservation for future general	rations				
4 Provide a description of the organiz Part XIII	zation's collections	and explain how they	y further the organization	's exempt purpose in	
5 During the year, did the organiza to be sold to raise funds rather t	ation solicit or rec	eive donations of a	rt, historical treasures, o	or other similar assets	Yes No
Part IV Escrow and Custodia					<u> </u>
line 9, or reported an	amount on Fo	orm 990, Part X,	line 21.		
1 a Is the organization an agent, true on Form 990, Part X?	stee, custodian o	r other intermediary	for contributions or oth	er assets not included	Yes No
b If 'Yes,' explain the arrangement	t in Part XIII and	complete the follow	ing table		
					Amount
c Beginning balance				1 c	
d Additions during the year				1 d	
e Distributions during the year				1 e	
f Ending balance	_			1f	
2a Did the organization include an a				*	Yes No
b If 'Yes,' explain the arrangement	t in Part XIII. Che	ck here if the explai	nation has been provide	ed on Part XIII	
Dart V Endagment Funds C	مال کی مامارسمسم		annered Waster Fr	array OOO David IV Iv	10
Part V Endowment Funds. C					(e) Four years back
1 a Beginning of year balance	(a) Current year	(b) Prior yea	(C) Two years back	(u) Tillee years back	(e) Four years back
b Contributions				 	
		- 			
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	L				<u></u>
2 Provide the estimated percentag	-	ear end balance (lir	e 1g, column (a)) held	as	
a Board designated or quasi-endowm		 *			
b Permanent endowment	%	0			
c Temporarily restricted endowmer		*			
The percentages on lines 2a, 2b, a	nd 2c should equa	1 100%			
3 a Are there endowment funds not in t organization by	the possession of t	he organization that a	are held and administered	for the	Yes No
(i) unrelated organizations					3a(i)
(ii) related organizations					3a(ii)
b If 'Yes' on line 3a(ii), are the rela	ated organizations	s listed as required of	on Schedule R?		3b
4 Describe in Part XIII the intended	d uses of the orga	anization's endowme	ent funds		
Part VI Land, Buildings, and	Equipment.		· · · · · · · · · · · · · · · · · · ·		-
Complete if the organ	ızatıon answe	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 Buildings					
c Leasehold improvements.					
d Equipment					
e Other		3,670.		3,670.	0.
Total. Add lines 1a through 1e (Column	nn (d) must equal		column (B), line 10c).	▶	0.
BAA				Sched	ule D (Form 990) 2018

Part VII		N/A
		0, Part 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 derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)	· · ·	
(E) (F)		
(G)		
(H)	-	
(l)	· · · · · · · · · · · · · · · · · · ·	
Total. (Column (b) must equal Form 990, Part X, column (B) line 12)		
Part VIII Investments – Program Related.		N/A
Complete if the organization answered	'Yes' on Form 99	0, Part 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)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets.	N/A	Sales and the company of the control
Complete if the organization answered	'Yes' on Form 99	0, Part IV, line 11d. See Form 990, Part X, line 15
	scription	(b) Book value
(1)		
(2)		
(3)		
(4) (5)		
(6)	<u></u>	
(7)) -	
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (b)	3) line 15.)	>
Part X Other Liabilities.		
Complete if the organization answered 'Yes' on Fe		
(a) Description of liability (1) Federal income taxes	(b) Book value	
(2) Accrued expenses	8,85	
(3) Payroll taxes	5,93	
(4)	- 3,30	
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 25)	► 14,78	
2. Liability for uncertain tax positions. In Part XIII, provide the text of the for		——————————————————————————————————————

Schedule D (Form 990) 2018 Texas Home School Coalition Associa	ation 7:	5-2908407 Pa	ge 4
RantiXI Reconciliation of Revenue per Audited Financial Statement		eturn. N/A	
Complete if the organization answered 'Yes' on Form 990, P	art IV, line 12a.	1	
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		P. 10	
a Net unrealized gains (losses) on investments	2 a		
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		337	
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
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, line 12)		5	
Part XIII Reconciliation of Expenses per Audited Financial Statemen	ts With Expenses per	Return. N/A	
Complete if the organization answered 'Yes' on Form 990, P.	art IV, line 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.		1775	
a Donated services and use of facilities	2 a		
b Prior year adjustments	2 b		
c Other losses	2c		
d Other (Describe in Part XIII)	2 d		
e Add lines 2a through 2d	<u></u>	2 e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1		# W	
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII)	4 b		
c Add lines 4a and 4b		4c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	
Rart-XIII Supplemental Information.			

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

BAA

Schedule D (Form 990) 2018

SCHEDULE		Ġ	ants and Oth	er Assistance t	o Organization	Š	<u> </u>	OMB No 1545-0047
(Form 990)		Gov	ernments, ar	Governments, and Individuals in the United States	n the United Sta	ıtes	-	2018
		Comple	Complete if the organization	organization answered 'Yes' on Form 990, Part IV, line 21 or 22. Attach to Form 990.	orm 990, Part IV, line 2).	1 or 22.		Onen to Public
Department of the Treasury Internal Revenue Service			► Go to www irs.	Go to www irs.gov/Form990 for the latest information	st information		_	Inspection
Name of the organization T	Texas Home Sch	School Coalition	Association				Employer identification number	stion number 7
Part General In	formation on Gr	General Information on Grants and Assistance	nce				250073	
1 Does the organizat	tion maintain records t	Does the organization maintain records to substantiate the amount of the selection criteria used to award the grants or assistance?	ount of the grants or	e grants or assistance, the grantees' eligibility for the grants or assistance, and	eligibility for the grants of	or assistance, and		Yes No
2 Describe in Part IV	the organization's pro	Describe in Part IV the organization's procedures for monitoring the use		of grant funds in the United States				
=	d Other Assistar Part IV, line 21,	ice to Domestic (Organizations a that received m	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Ye 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.	rnments. Comple art II can be duplic	Complete if the organization answered 'Yes' on be duplicated if additional space is needed.	ion answered 'Yes	no 'se'
1 (a) Name and address of organization or government	ess of organization rnment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Various	 1 1 1 1 1 1							Dromotion of
	1 1 1 1 1 1 1			5,317.	0.			Home Education
<u>(2)</u>	1 1 1 1 1							
(3)	 							
(4)	1 1 1 1 1							
<u></u>	 							
(9)	 							
	1 1 1 1							
6								
								_

Schedule I (Form 990) (2018)

TEEA3901L 07/13/18

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

3 Enter total number of other organizations listed in the line 1 table BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2018) Texas Home School Coalition Association

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

						,
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
-						
2						
က						
4						
2						
ဖ						
7						
Part IV	Part.IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	te the information	required in Part I,	line 2; Part III, col	umn (b); and any othe	r addıtional information.

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.

► Attach to Form 990 or 990-EZ.

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

OMB No 1545 0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Texas Home School Coalition Association

Employer identification number 75-2908407

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. However, 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 fiannee 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 detemine 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

Texas Home School Coalition Association

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.

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

Open to Public Inspection 2018

Employer identification number

OMB No 1545-0047

(g) Sec 512(b)(13) controlled entity? ŝ Schedule R (Form 990) 2018 (f)
Direct controlling
entity Yes Identification of Related Tax-Exempt Organizations. Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, because it (f)
Direct controlling
entity Association 75-2908407 THSC (e) End-of-year assets Public charity status (if section 501(c)(3)) **Partily** Identification of Disregarded Entities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 33. σ **e (d)** Total income (d) Exempt Code section TEEA5001L 06/07/18 501(c)(3) (c)
Legal domicile (state or foreign country) (c)
Legal domicile (state or foreign country) had one or more related tax-exempt organizations during the tax year. (b) Primary activity Homeschool (b) Primary activity Support BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. (a) Name, address, and EIN (if applicable) of disregarded entity (a) Name, address, and EIN of related organization (1) Texas Home School Coalition - 6502 Slide Road, Ste. 206 - Lubbock, TX 79424 - 75-2110659 Partill 1 1 ١ €¦ \<u>@</u> ୍ର E (2) <u>@</u>

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Schedule R (Form 990) 2018 Texas Home School Coalition Association

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. Part III

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections		(f) Share of total income	(g) Share of end-of-year assets		(h) Disproportionate allocations?	Code V-UBI amount in box 20 of Schedule K-1 (Form	General or managing partner?	(k) Percentage ownership
		country)		512-514)				Yes	S No	1065)	Yes No	
(1)									-			
(2)												

									-			
(3)												
				_								
Part IV Identification o	Identification of Related Organizations Taxable a	zations lore relat	Faxable as ed organiz	is a Corporation or Trust. Complete if the organization answ zations treated as a corporation or trust during the tax year.	n or Trust. I as a corpo	Complete pration or tr	of the or	ganizatior ng the tax	answei year.	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.	orm 990, F	⊃art IV,
(a) Name, address, and EIN of related organization	of related organizatio		(b) Primary activity	Legal domicile (state or foreign)	(d) Direct controlling	Type of entity (C corp, S corp, or trust)	entity S corp,	Share of total income		(g) Share of end-of- year assets	(h) Percentage ownership	Sec 512(b)(13) controlled entity?
				(f iii iii ii	(curry)	5			-			Yes No
(1)												
1 1 1 1 1 1 1 1 1 1		T	111			_						
(2)		- 1										
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- 					_			_		
		- 										
(3)							_					
		 							_			
1 1 1 1 1 1 1 1 1 1		' 					_					
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Schedule R (Form 990) 2018 Texas Home School Coalition Association

Schedule R (Form 990) 2018 (d)
Method of determining amount involved expense Yes Ξ _ 9 ا م ם S <u>0</u> , -6,045.Actual 1 b **p** <u>-</u> **-**무 <u>-</u> - = = 26, 275. 50/50 322,898.50/50 Part V Transactions With Related Organizations. Complete If the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36. (c) Amount involved 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 (b)
Transaction type (a-s) 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? □ 0 р TEEA5003L 06/07/18 Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule k Lease of facilities, equipment, or other assets from related organization(s) j Lease of facilities, equipment, or other assets to related organization(s) **(a)** Name of related organization Other transfer of cash or property from related organization(s) c Gift, grant, or capital contribution from related organization(s) Reimbursement paid by related organization(s) for expenses Reimbursement paid to related organization(s) for expenses r Other transfer of cash or property to related organization(s) **b** Gift, grant, or capital contribution to related organization(s) d Loans or loan guarantees to or for related organization(s) Sharing of paid employees with related organization(s) e Loans or loan guarantees by related organization(s) Purchase of assets from related organization(s) Exchange of assets with related organization(s) (2) Texas Home School Coalition (1) Texas Home School Coalition (3) Texas Home School Coalition Sale of assets to related organization(s) Dividends from related organization(s) @ A € 9

Schedule R (Form 990) 2018 Texas Home School Coalition Association

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

	Nome address and EIN of partition	(b)	(3)	(p)	(e)	1	(b) 13	(6)	3	(0)		8
From the unique From the u	ואמוופ, מטטופגא, מוט בווע טן פוונוץ		(state or foreign country)	income (related, unre-	section 501(c)		total income	Share of end-of-year assets	Uispropor- tionate allocations?	amount in box		or Percentage ig ownership
Yes No Yes Yes No Yes				from tax under	10 341117	2				(Form 1065)		
1				sections 512-514)	_	No					├—	
ENCONTROL (COLUMN COLUMN COLUM	ĺ					_						
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1												
1 EEGOOM 060N18												
(A)												
TEESGOM G607/18												
1 TERSOOM 400/18												
TEENSON GOVINS	i											
TECASON4 06/07/18	i											
TEPASON, 0607/18		•				<u></u>						
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TEEASODAL 06/07/18	11 11 11 11 11 11 11 11 11 11 11 11 11					_						
TEEA5004L 06/07/18												
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Provide additional information for responses to questions on Schedule R. See instructions.