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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable	(E) Total of columns (F) Compensat			
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990		
(1) LYNN MARGHERIO	(i)	188,618.	9,012.	0.	5,992.	6,919.	210,541.	0.		
PRESIDENT/CEO/BOARD MEMBER	(ii)	0.	0.	0.	0.	0.	0.	0.		
(2) KAREN GALLAHUE	(i)	128,569.	10,500.	0.	4,512.	14,409.	157,990.	0.		
TREASURER/VP OF FINANCE	(ii)	0.	0.	0.	0.	0.	0.	0.		
(3) ELLEN MANNING	(i)	130,872.	8,034.	0.	4,410.	9,454.	152,770.	0.		
VP OF HUMAN RESOURCES	(ii)	0.	0.	0.	0.	0.	0.	0.		
(4) KAREN GRANT	(i)	147,055.	6,000.	0.	4,667.	14,412.	172,134.	0.		
VP OF DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.		
(5) BERNARD CHERKASOV	(i)	177,188.	8,500.	0.	3,988.	7,197.	196,873.	0.		
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.		
	(i)									
	(ii)									
	(i)									
	(ii)									
	(i)									
	(ii)									
	(i)									
	(ii)									
	(i)									
	(ii)									
	(i)									
	(ii)									
	(i)									
	(ii)									
	(i)									
	(ii)									
	(i)									
	(ii)									
	(i)									
	(ii)									
	(i)									
	(ii)									

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

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service **Supplemental Information on Tax-Exempt Bonds**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Part VI.

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

2018
Open to Public Inspection

Name of the organization

CRADLES TO CRAYONS INC

Employer identification number 04-3584367

		CRAYONS IN							'	4-3	204	307		
Part I	Bond Issues SI	EE PART VI	FOR COLUM	NS (A) A	ND (F)	CONTIN	UATIONS							
	(a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose						(g) De	efeased	(h) On	behalf	alf (i) Pooled			
											of iss	suer financino		cing
									Yes	No	Yes	No	Yes	No
	SSACHUSETTS							TION OF						
A DE	VELOPMENT AND FINANCE	04-3431814	NONE	01/31/1	9 4,400	,000.N	IEWTONVI	LLE PRO	PΕ	X		Х		X
В														
С														
D							·							
Part II	Proceeds													
					Α		В	С				D		
1 Ar	mount of bonds retired													
2 Ar	mount of bonds legally defeased													
3 To	otal proceeds of issue			4,4	00,000.									
4 Gr	ross proceeds in reserve funds													
5 Ca	apitalized interest from proceeds													
6 Pr	roceeds in refunding escrows													
7 Iss	suance costs from proceeds				57,709.									
8 Cr	redit enhancement from proceeds	<u></u>												
9 W	orking capital expenditures from proceeds													
10 Ca	apital expenditures from proceeds			4,3	42,291.									
11 Ot	ther spent proceeds													
12 Ot	ther unspent proceeds													
13 Ye	ear of substantial completion													
				Yes	No	Yes	No	Yes	No		Yes		No	
	ere the bonds issued as part of a refunding	•	• •											
if i	issued prior to 2018, a current refunding iss	sue)?			X									
	ere the bonds issued as part of a refunding													
	sued prior to 2018, an advance refunding is				X									
	as the final allocation of proceeds been made													
	oes the organization maintain adequate boo		• •											
fin	nal allocation of proceeds?			Х										
1114 -	ou Domanicale Dedication Ast Nation and									0 - 1	alla 1/	-	2001	

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

Schedule K (Form 990) 2018

Pai	t III Private Business Use								
			A		В		С)
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
	which owned property financed by tax-exempt bonds?		X						
2	Are there any lease arrangements that may result in private business use of								
	bond-financed property?		X						
За	Are there any management or service contracts that may result in private								
	business use of bond-financed property?		X						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
	counsel to review any management or service contracts relating to the financed property?								
	Are there any research agreements that may result in private business use of								
	bond-financed property?		X	W					
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside								
	counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by						•		
	entities other than a section 501(c)(3) organization or a state or local government		.00 %		%		%		%
5	Enter the percentage of financed property used in a private business use as a result of				·				
	unrelated trade or business activity carried on by your organization, another							l	
	section 501(c)(3) organization, or a state or local government		.00 %		%		%	l	%
6	Total of lines 4 and 5		.00 %		%		%		%
7	Does the bond issue meet the private security or payment test?		X		1			'	
	Has there been a sale or disposition of any of the bond-financed property to a non-								
	governmental person other than a 501(c)(3) organization since the bonds were issued?		Х						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed								
	of		%		%		%		%
	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections				1				
	1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified								
	bonds of the issue are remediated in accordance with the requirements under								
	Regulations sections 1.141-12 and 1.145-2?		Х						
Pai	t IV Arbitrage								
		A B		В	С		Γ	D	
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		X						
2	If "No" to line 1, did the following apply?				•		•		
	Rebate not due yet?	Х							
	Exception to rebate?		Х						
	No rebate due?		X						
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was		•		<u> </u>				
	performed								
3	Is the bond issue a variable rate issue?		X						
							•		-

Pari	Arbitrage (Continuea)								
		A			В		C)
4a	Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
	hedge with respect to the bond issue?		X						
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
е	Was the hedge terminated?								
_5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
_6	Were any gross proceeds invested beyond an available temporary period?		X						
7	Has the organization established written procedures to monitor the requirements of	1							
	section 148?		Х						
Part	V Procedures To Undertake Corrective Action							•	
			A	l	В	(2	Г)
	Has the organization established written procedures to ensure that violations of	Yes	No	Yes	No	Yes	No	Yes	No
	federal tax requirements are timely identified and corrected through the voluntary								
	closing agreement program if self-remediation isn't available under applicable								
	regulations?								
	Supplemental Information. Provide additional information for responses to questions	s on Schedul	e K. See inst	ructions					
	HEDULE K, PART I, BOND ISSUES:				,				
(A)	ISSUER NAME: MASSACHUSETTS DEVELOPMENT AND F)				
<u>(F)</u>	DESCRIPTION OF PURPOSE: CONSTRUCTION OF NEWT	ONVILL	E PROPE	RTY					

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

Name of the organization CRADLES TO CRAYONS INC Employer identification number 04 - 3584367

Par	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu		_	3
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods	X		9,280,578.	FAIR VALUE			
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
40	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
14	Historic structures Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy	. 1						
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other (
27	Other (
28	Other ()							
29	Number of Forms 8283 received by the organiz	ation during	g the tax year for c	ontributions				
	for which the organization completed Form 828	3, Part IV, I	Donee Acknowled	gement 29				
						\	Yes	No
30a	During the year, did the organization receive by	contributio	on any property rep	oorted in Part I, lines 1 through	gh 28, that it			
	must hold for at least three years from the date							
	exempt purposes for the entire holding period?					30a		<u>X</u>
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p					31		<u> </u>
32a	Does the organization hire or use third parties of		-	· · ·		00-		х
L						32a		
	If "Yes," describe in Part II.	dumn (a) f-	r a tupo of areas	u for which column (a) is the	akad			
33	If the organization didn't report an amount in codescribe in Part II.	линн (С) 10	i a type oi propert	y for writerr column (a) is the	cneu,			
	uescribe III Falt II.							

SCHEDULE 0

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.
 Go to www.irs.gov/Form990 for the latest information.

2018
Open to Public

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

CRADLES TO CRAYONS INC

Employer identification number 04-3584367

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SITUATIONS, WITH THE ESSENTIAL ITEMS THEY NEED TO THRIVE AT HOME, AT

SCHOOL AND AT PLAY. WE SUPPLY THESE ITEMS FREE OF CHARGE BY ENGAGING

AND CONNECTING COMMUNITIES.

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

THE ORGANIZATION'S PRESIDENT AND CONTROLLER REVIEW ALL THE LINE ITEMS ON
THE FORM 990. ONCE THEY FEEL THE FORM 990 IS COMPLETE AND ACCURATE, AN
ELECTRONIC VERSION OF THE FORM 990 IS MAILED TO EACH BOARD MEMBER FOR
REVIEW.

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

ALL BOARD MEMBERS, KEY EMPLOYEES, OFFICERS AND ALL OTHERS INVOLVED WITHIN THE ORGANIZATION ARE AWARE OF THE CONFLICT OF INTEREST POLICY OF THE ORGANIZATION, WHICH IS REVIEWED BY THE GOVERNANCE COMMITTEE. ANY EMPLOYEE, BOARD MEMBER OR OTHERS WITHIN THE ORGANIZATION THAT BELIEVES A CONFLICT OF INTEREST EXISTS IS REQUIRED TO DISCUSS IT WITH THE CEO, WHO IN TURN WILL DISCUSS WITH THE BOARD.

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

THE COMPENSATION OF OFFICERS IS DETERMINED BY THE INDEPENDENT BOARD ON AN ANNUAL BASIS.

FORM 990, PART VI, SECTION C, LINE 18:

UPON REQUEST, THE ORGANIZATION WILL MAKE AVAILABLE TO THE PUBLIC ITS

GOVERNING DOCUMENTS AND ITS CONFLICT OF INTEREST POLICY.

Name of the organization CRADLES TO CRAYONS INC	Employer identification number 04-3584367
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION'S FORM 990 IS LOCATED ON GUIDESTAR AND	CHARITY NAVIGATOR.
UPON REQUEST, THE ORGANIZATION WILL SEND ELECTRONICALLY	OR MAIL A COPY OF
THE FORM 1023 OR 990 TO THE REQUESTEE.	
FORM 990, PART XII, LINE 2C:	
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.	

Form **8868**

(Rev. January 2019)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

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

OMB No. 1545-1709

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

Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or Type or print 04-3584367 CRADLES TO CRAYONS INC File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for filing your 155 NORTH BEACON STREET City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions BRIGHTON, MA 02135 Enter the Return Code for the return that this application is for (file a separate application for each return) Application Return Application Return Is For Code Is For Code Form 990-T (corporation) Form 990 or Form 990-EZ 07 01 Form 990-BL 02 Form 1041-A 80 Form 4720 (individual) Form 4720 (other than individual) 09 Form 990-PF Form 5227 10 04 Form 6069 Form 990-T (sec. 401(a) or 408(a) trust) 05 11 Form 990-T (trust other than above) 06 Form 8870 12 CRADLES TO CRAYONS INC The books are in the care of ► 155 NORTH BEACON STREET - BRIGHTON, MA 02135 Telephone No. ► 617-779-4720 Fax No. ▶ 866-841-9995 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box 🕨 🔛 and attach a list with the names and EINs of all members the extension is for. FEBRUARY 15, 2020 , to file the exempt organization return for I request an automatic 6-month extension of time until the organization named above. The extension is for the organization's return for: calendar year ► X tax year beginning APR 1, 2018 , and ending MAR 31, 2019 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return L Change in accounting period 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. За **b** If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

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

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

Form **8868** (Rev. 1-2019)