			EXTENDED TO JULY 15, 20	20		_					
	0	90	Return of Organization Exempt From	m lı	ncome Tax	OMB No. 1545-0047					
Forr	n J	JU	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code	-							
		of the Treasury	Do not enter social security numbers on this form as it	-		Open to Public					
		enue Service	► Go to www.irs.gov/Form990 for instructions and the l ar year, or tax year beginning AUG 1, 2018 and endin		UL 31, 2019	Inspection					
	heck if		f organization	<u>y U</u>	D Employer identifi						
D C	pplicab	le:	organization			cation number					
	Addre	THE	TREVOR PROJECT INC.								
	Name Chang	681287									
	Initial returr	Number		/suite	E Telephone numbe						
	Final returr termi	0	SANTA MONICA BOULEVARD 200			203-0073					
	ated]Amer	City or t	own, state or province, country, and ZIP or foreign postal code HOLLYWOOD, CA 90069		G Gross receipts \$	21,238,631.					
	_lreturr]Appli		nd address of principal officer: AMIT PALEY		H(a) Is this a group re for subordinates						
	⊥tiòn pend		AS C ABOVE		H(b) Are all subordinates in						
ΙT	ax-ex	empt status:		527		list. (see instructions)					
			THETREVORPROJECT.ORG		H(c) Group exemptio	,					
ΚF	orm o	f organization:	X Corporation Trust Association Other ▶ L	Year o		A State of legal domicile: CA					
Pa	irt I										
ė	1		e the organization's mission or most significant activities: THE TRE	VOR	PROJECT IS	DETERMINED					
Activities & Governance			SUICIDE AMONG LGBTQ YOUTH.								
'ern	2										
30	3		20								
& (4		lependent voting members of the governing body (Part VI, line 1b)			20					
ies	5		of individuals employed in calendar year 2018 (Part V, line 2a)			128					
tivi	6		of volunteers (estimate if necessary)			306					
Ac			d business revenue from Part VIII, column (C), line 12			0.					
	b	Net unrelated	business taxable income from Form 990-T, line 38								
		Contributions	and suggets (Dart) (III line 14)		Prior Year 13,075,115.	Current Year 20,444,506.					
anı	8		and grants (Part VIII, line 1h)		<u> </u>	20,444,500.					
Revenue	9		ce revenue (Part VIII, line 2g)		1,674.	21,976.					
Re	10		come (Part VIII, column (A), lines 3, 4, and 7d) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-327,648.	0.					
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		12,749,141.	20,466,482.					
	13		nilar amounts paid (Part IX, column (A), lines 1-3)		0.	0.					
	14		to or for members (Part IX, column (A), line 4)		0.	0.					
s	15	-	r compensation, employee benefits (Part IX, column (A), lines 5-10)		4,177,706.	6,070,351.					
nse					0.	47,470.					
Expenses			undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) ► <u>1,232,028</u> .								
ĥ			es (Part IX, column (A), lines 11a-11d, 11f-24e)		3,209,940.	6,793,098.					
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)		7,387,646.	12,910,919.					
	19		expenses. Subtract line 18 from line 12		5,361,495.	7,555,563.					
Net Assets or Fund Balances					ginning of Current Year	End of Year					
alan	20	Total assets (F	Part X, line 16)		10,692,685.	18,495,108.					
t As	21	Total liabilities	(Part X, line 26)		964,888.	1,211,748.					
			fund balances. Subtract line 21 from line 20		9,727,797.	17,283,360.					
	nrt II	Signature									
			I declare that I have examined this return, including accompanying schedules and s			y knowledge and belief, it is					
true,	corre	ct, and complete	Declaration of preparer (other than officer) is based on all information of which pre-	eparer	has any knowledge.						
		L N			1						

Sign	Signature of officer	Date
Here	LENA BALLANTINE, CHIEF OPERATING OFFICER	
	Type or print name and title	
	Print/Type preparer's name Preparer's signature	Date Check PTIN
Paid	NAZANIN BENYAMINI NAZANIN BENYAMINI	07/14/20 ^{if} self-employed P00666808
Preparer	Firm's name SINGERLEWAK LLP	Firm's EIN 95-2302617
Use Only	Firm's address 🔊 10960 WILSHIRE BOULEVARD, 7TH FLOO	R
	LOS ANGELES, CA 90024-3783	Phone no. (310) 477-3924
May the II	RS discuss this return with the preparer shown above? (see instructions)	X Yes No

832001 12-31-18 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2018)

		HE TREVOR PRO			95-4681287	Pa
Par	t III Statement of Pro	-	-			
			e to any line in this Par	t III		
1	Briefly describe the organizat					
					AMONG LESBIAN,	
	GAY, BISEXUAL,	TRANSGENDER,	QUEER AND	QUESTIONING Y	OUNG PEOPLE.	
2	Did the organization undertak		• ,			v
	prior Form 990 or 990-EZ?				Ye	es X
_	If "Yes," describe these new					es X
3	Did the organization cease co		icant changes in how it	conducts, any program s		es 🔼
A	If "Yes," describe these chan	-	alamanta fay anala af ita			
4	÷ .	÷ .			vices, as measured by expens is to others, the total expense	
	revenue, if any, for each prog		red to report the amou	it of grants and allocation	is to others, the total expense	s, and
4a	(Code:) (Expenses \$	10 923 070	 including grants of \$) (Revenue \$	
td		TECT IS THE W		EST SUICIDE P	REVENTION AND C	RTS
	INTERVENTION OF					
					THE ORGANIZATIO	N
	WORKS TO SAVE					
					TION PROGRAMS C	N
	PLATFORMS WHERE	YOUNG PEOPL	E SPEND THE	IR TIME: THE	24/7 PHONE LIFE	LIN
	CHAT, AND TEXT	. THE ORGANIZ	ATION ALSO	RUNS TREVORSP	ACE, THE WORLD'	S
					YOUTH, AND OPE	
	INNOVATIVE EDUC	CATION, RESEA	RCH, AND AD	VOCACY PROGRA	MS.	
łb	(Code:) (Expenses \$)		including grants of \$) (Revenue \$	
4c	(Code:) (Expenses \$		including grants of \$) (Revenue \$	
	011					
4d	Other program services (Deso				, ,	
4.0	(Expenses \$	including grants o	of \$ 23,070.) (Revenue \$)	
ŧe	Total program service expense	;es 🕨 10,9	4J,0/0.			. 000 /
					Form	n 990 (
2002	2 12-31-18		ე			
60	714 701224 7955	<u>ک</u> ۵۰	4 18 በ6በበበ ጥሀቱ	TREVOR PROJE		55_
50	114 10144 1900	20.	10.00000 IHE	INDVOK FROUP	JCI IIVC• /93	J.J

Form 990 (2018)

THE TREVOR PROJECT INC. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b				
	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		X
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			77
	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,		v	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		v	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
	complete Schedule G, Part III	19		X X
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		
	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			x
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	000	^ (2018)
832003	3 12-31-18	Form	330	(∠018)

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3

24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002° If "Yes," insmer lines 24b through 24d and complete Schedule K. 1 No., 'go to fine 22a. 24a 24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b 25a Did the organization invest any proceeds of tax-exempt bonds outstanding escrow at any time during the year to defease any tax-exempt bonds? 24c 25a 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 in a prior year, and that the transaction was that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any carrent or forms officers, furstees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part I 25c 27b Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, lagrast steactor on comittee member, or to a 3% controlled entry or family member of any of these persons? If 'Yes,' complete Schedule L, Part II 27c 27b Was the organization anyer that a basistance to an officer, director, trustee, key employees, substantial continuitor or angline thereof, ag and selection comittem termether, or tas?key controlled entry or family ember of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
and former offices, directors, trustees, key employees, and highest compensated employees? If "Yes," complete 23 4a 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 Discender 31, 2022 // "Yes," answer lines 24b through 24d and complete 24a b Did the organization mixet any proceeds of tax exempt bonds beyond a temporary period exception? 24b c Did the organization mixet any an eacrow account other than a refunding escrew at any time during the year? 24d 2 Did the organization at as an 'on behalf of' issue for bonds outstanding at any time during the year? 24d 2 Did the organization and as an 'on behalf of' issue for bonds outstanding at any time during the year? 24d 2 Did the organization and as an 'on behalf of' issue for bonds outstanding at any time during the year? 24d 2 Did the organization any any anount on Part X, line 5, 6, or 22 for reexiables from or payables to any current or former officer, director, trustee, key employee, substantial contribution or employee Birchadule L, Part II 25a 10 Did the organization approvale a business transaction with a disqualified persona? If 'Yes,' complete Schedule L, Part IV 26a 2 Did the organization approvale a busines transaction with a caspuscine former officer, director, trustee, exel, exel, employee Bir Yes,' complete Schedule L, Part IV 27			22		X
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44a 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 'Yea,' answer lines 24b through 24d and complete Schedule K. 1 Wo:' go to line 25a 24a b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24b c Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24c d Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24c d Did the organization and as an 'on behal of' issuer for bonds outstanding at any time during the year? 24d d Did the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction negone in an excess benefit transaction with a sin or bene reported on any of the organization ergons? If 'Yes,' complete Schedule L, Part I 25b d Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustee, or key employees, rustee, key employees, substantial contributor or employee thereol, a grant selection committee member, or to a 35% controlled antity or family member of any of these persons? If 'Yes,' complete Schedule L, Part IV 26c A current or former officer, director, trustee, or key employees? If 'Yes,' complete Schedule L, Part IV 28a A current or former officer, director, trustee, or key employees? If 'Yes,' complete Schedul				37	
Is at day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete 24a Is Dot the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Is Dot the organization invest any proceeds of tax-exempt bonds period exception? 24c Is Dot the organization invest any proceeds of tax-exempt bonds period exception? 24c Is The organization and at any time during the year? 24d Is the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year? 24d Is the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year? 24d Is the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year? 24d Is the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year? 24d Is the organization and act as an "on behalf of "issuer for bonds outstanding at any time during the year? 24d Is the organization and act as an "on behalf of "issuer for bonds outstanding at any time during the year? 24d Is the organization and act as an addition and acception on any of the organization and acception any acception on any of the organization and acception any acception and acception and acception and acception and acception and acception. 25d ID did the organization accept exempt any			23	X	
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c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 5s 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 in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If 'Yes,' complete Schedule 1, Part I 25b 5 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustese, key employees, highest compnensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part I 26i 7 Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, highest componensated employees, culstantial contributor or employee thereof, a grant selection committee member, or to a 53% controlled entity or family member of any or these person? If 'Yes,' complete Schedule L, Part IV 27 8 Was the erganization aprive to a business transaction with one of the following parties (see Schedule L, Part IV 28a 9 A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a 9 Did the organization neeve eortholutions of arch, thistorical treasures, or ther similar assets, or qualified conservation contrb	h				
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d Did the organization act as an "on behalf of Issuer for bonds outstanding at any time during the year? 24d 55 Section 507(cp3), 507(cp4), and 507(cp3) organizations. Did the organization success benefit transaction with a disqualified person in a prory year, and that the transaction any of the organization's pror Forms 900 or 902-211 /*vs, "complete Schedule L, Part I 25a b Is the organization avare that it engaged in an excess benefit transaction with a disqualified person in a prory year, and that the transaction has not any of the organization's pror Forms 900 or 902-211 /*vs, "complete Schedule L, Part I 25b 6 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, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these conducts. <i>L Part II</i> 26 7 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 conducts. <i>L Part IV</i> 28 8 A current or former officer, director, trustee, or key employee (1 * Yes, "complete Schedule L, Part IV 28 9 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes," complete Schedule L, Part IV. 28 9 Did the organization receive contributions of at thistorical treasures, or other similar assets? If 'Yes," complete Schedule L, Part IV. 28 9 Did the org			24c		
transaction with a disqualified person during the year/ If 'Yes,' complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ/ If 'Yes,' complete Schedule L, Part I 25b c 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 D Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thered, 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 II 27 Was the organization provide a grant or other assistance to with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): 28 a A current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or explete Schedule L, Part IV 28a 9 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 10 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 30 11 Did the organization r	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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3 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 4 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 5a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? 35a 5 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 35b 7 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 8 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 Note. All Form 990 filers are required to complete Schedule O 38 38 9 Enter the number reported in Box 3 of Form 1096. Enter -0 if not applicable 1a 30 1 1 30 1b 0 2 Did the organization comply with backup withholding rules for reportable payments to			32		X
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Part V, line 1 34 5a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 6 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 7 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 8 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 • Note. All Form 990 filers are required to complete Schedule O 38 • Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1 30 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1 30 1b 0 0 0 0 0 1b 0 0 0 0 0 0 <td></td> <td>sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I</td> <td>33</td> <td></td> <td>X</td>		sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
5a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 6 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 7 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 8 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 • Note. All Form 990 filers are required to complete Schedule O 38 • Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 30 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 1c	4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 6 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 7 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 8 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 • Note. All Form 990 filers are required to complete Schedule O 38 9 • Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1 1 1 Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1 1 30 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1 1 0 1 b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 1 1 1 1		· · · · · · · · · · · · · · · · · · ·			X
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66 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 1/f "Yes," complete Schedule R, Part V, line 2 36 77 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 8 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 9 Note. All Form 990 filers are required to complete Schedule O 38 9 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Y 1a 30 1 b Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 30 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 1c	b				
If "Yes," complete Schedule R, Part V, line 2 36 7 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 8 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 37 8 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 9 Note. All Form 990 filers are required to complete Schedule O 38 9 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 30 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c	~		350		
17 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			36		x
and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i> 37 8 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1b 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c			30		
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Note. All Form 990 filers are required to complete Schedule 0 38 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule 0 contains a response or note to any line in this Part V Y 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 30 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c	8				
Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 30 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c		Note. All Form 990 filers are required to complete Schedule O	38	Х	
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 30 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 1c	Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
1a 30 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1a 30 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 1c		Check if Schedule O contains a response or note to any line in this Part V			
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 1c				Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c					
(gambling) winnings to prize winners?					
	С		4.	x	
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Form 990	(2018)	THE	TREVOR	PROJECT	INC.
Part V	Statements	Regard	ing Other I	RS Filings ar	nd Tax Compliance (continued)

			Yes	No						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return 2a 128									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х							
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)									
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		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	3b								
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a									
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X						
b	If "Yes," enter the name of the foreign country:									
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).									
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X X						
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?									
	c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?									
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit									
	any contributions that were not tax deductible as charitable contributions?	6a		X						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts									
	were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c).		37							
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X							
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		x						
ام	to file Form 8282?	7c								
	, , , , , , , , , , , , , , , , , , , ,	7e								
	 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization during the user, pay premiume directly or indirectly or a personal benefit contract? 									
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?									
	 g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 									
8										
-	sponsoring organizations maintaining donor advised runds. Did a donor advised rund maintained by the sponsoring organization have excess business holdings at any time during the year?									
9	Sponsoring organizations maintaining donor advised funds.									
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a								
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b								
10	Section 501(c)(7) organizations. Enter:									
а	Initiation fees and capital contributions included on Part VIII, line 12 10a									
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b									
11	Section 501(c)(12) organizations. Enter:									
	Gross income from members or shareholders 11a									
b	Gross income from other sources (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)									
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40-								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a								
h	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the									
D	• · · · · · · · · · · · · · · · · · · ·									
~	organization is licensed to issue qualified health plans 13b Enter the amount of reserves on hand 13c									
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		x						
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14a								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1-10								
	excess parachute payment(s) during the year?	15		x						
	If "Yes," see instructions and file Form 4720, Schedule N.									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х						
	If "Yes," complete Form 4720, Schedule O.									

Form **990** (2018)

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Form 990 (2	2018)
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THE TREVOR PROJECT INC.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI						_		
ject	ion A. Governing Body and Management					Vee	Т		
4.		ا مه ا		20		Yes	$\frac{1}{2}$		
	Enter the number of voting members of the governing body at the end of the tax year	1a					l		
	If there are material differences in voting rights among members of the governing body, or if the governing						l		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			20					
	Enter the number of voting members included in line 1a, above, who are independent	· · · · · · · · · · · · · · · · · · ·							
	Did any officer, director, trustee, or key employee have a family relationship or a business relations	hip with a	any other		-		1		
	officer, director, trustee, or key employee?			······	2		-		
	Did the organization delegate control over management duties customarily performed by or under			I	-				
	of officers, directors, or trustees, or key employees to a management company or other person?				3	v	-		
	Did the organization make any significant changes to its governing documents since the prior Forn				4	Х	_		
	Did the organization become aware during the year of a significant diversion of the organization's a				5		_		
	Did the organization have members or stockholders?			····· -	6		_		
	Did the organization have members, stockholders, or other persons who had the power to elect or								
	more members of the governing body?			L	7a		_		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members	, stockho	lders, or						
	persons other than the governing body?			L	7b				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y	ear by the	following:						
а	The governing body?				8a	Х			
b	Each committee with authority to act on behalf of the governing body?				8b	Х			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be r	eached at	t the						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9				
ect	ion B. Policies (This Section B requests information about policies not required by the Internal	Revenue	Code.)						
				_		Yes			
i0a	Did the organization have local chapters, branches, or affiliates?			[10a				
	If "Yes," did the organization have written policies and procedures governing the activities of such								
	and branches to ensure their operations are consistent with the organization's exempt purposes?								
	Has the organization provided a complete copy of this Form 990 to all members of its governing bo				11a	Х	1		
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	,	0				-		
	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	Х			
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ri				12b	Х			
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If			·····			-		
	in Schedule O how this was done				12c	х			
	Did the organization have a written whistleblower policy?				13	Х	-		
	Did the organization have a written document retention and destruction policy?				14	X	-		
	Did the process for determining compensation of the following persons include a review and appro				14		-		
			lependent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision				150	Х	1		
	The organization's CEO, Executive Director, or top management official				15a	X	_		
	Other officers or key employees of the organization			·····	15b	- 21	-		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		41						
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrang				10				
	taxable entity during the year?			····· -	16a				
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu		-						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org	janization	ı'S						
	exempt status with respect to such arrangements?				16b		-		
	ion C. Disclosure						-		
	List the states with which a copy of this Form 990 is required to be filed $ ightarrow ext{CA}$, NY , AL , AK ,						-		
	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990,	and 990-1	T (Section 50	1(c)(3)s	only	avail	12		
	for public inspection. Indicate how you made these available. Check all that apply.								
	X Own website Another's website X Upon request X Other (expla	in in Sche	edule O)						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, o	conflict of	interest poli	cy, and	finan	cial			
	statements available to the public during the tax year.								
	· · · ·								
20	State the name, address, and telephone number of the person who possesses the organization's t	books and	d records 🕨						
20	State the name, address, and telephone number of the person who possesses the organization's RAMIT PALEY $-212-695-8650$						-		
20	State the name, address, and telephone number of the person who possesses the organization's t	OOD,		069			_		

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	I	411120			npoi	iout	(D)	(E)	(F)
Name and Title				Pos	C) ition	ı		Reportable	(L) Reportable	Estimated
Name and The	Average	hours per box, unle					one	compensation	compensation	amount of
	week					pr/trus		from	from related	other
	(list any	tor						the	organizations	compensation
	hours for	- direc				eq		organization	(W-2/1099-MISC)	from the
	related	tee or	trustee			ensat		(W-2/1099-MISC)		organization
	organizations	l trus	nal tr		oyee	duo				and related
	below	Individual trustee or director	Institutional 1	cer	Key employee	Highest compensated employee	Former			organizations
	line)	Indi	Inst	Officer	Key	High	Fori			
(1) GINA MUNOZ	10.00									_
CHAIR		Х		Х				0.	0.	0.
(2) JULIAN MOORE	10.00									
CO VICE-CHAIR		Х		Х				0.	0.	0.
(3) BRIAN WINTERFELDT	10.00									
CO-VICE CHAIR		Х		Х				0.	0.	0.
(4) MIKE DILLON	10.00									
TREASURER		X		Х				0.	0.	0.
(5) THOMAS SANCHEZ	10.00									
SECRETARY		X		Х				0.	0.	0.
(6) AMY TAYLOR	10.00									
EXECUTIVE COMMITTEE MEMBER		X		Х				0.	0.	0.
(7) PEGGY RAJSKI	10.00									
FOUNDER		X		Х				0.	0.	0.
(8) MICHAEL NORTON	10.00									
CHAIR EMERITUS		X		Х				0.	0.	0.
(9) PHIL ARMSTRONG	2.00									
BOARD MEMBER		X						0.	0.	0.
(10) CAROLINE BIRD	2.00									
BOARD MEMBER		X						0.	0.	0.
(11) ORLAN BOSTON	2.00									
BOARD MEMBER		X						0.	0.	0.
(12) CHRIS COFFEY	2.00									
BOARD MEMBER		X						0.	0.	0.
(13) JASON COLE	2.00									
BOARD MEMBER		X						0.	0.	0.
(14) CARLOS CORTEZ	2.00									
BOARD MEMBER (UNTIL 6/2019)		X						0.	0.	0.
(15) BRIAN DORSEY	2.00									
BOARD MEMBER		X						0.	0.	0.
(16) CLIFF HOPKINS	2.00									
BOARD MEMBER		x						0.	0.	0.
(17) MEREDITH KADLEC	2.00	1								
BOARD MEMBER		x						0.	0.	0.
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Part VII Section A. Officers, Directors, Trus		ploy	ees			ghes	st C	Compensated Employe	es (continued)	r		
(A) (B)					C)			(D)	(E)	(F)		
Name and title	Average	Position (do not check more than one					ne	Reportable	Reportable		Estim	ated
	hours per box, u			ox, unless person is both an officer and a director/trustee)				compensation	compensatio	n	amou	nt of
	Week			nd a d	lirecto	or/trust	tee)	from	from related	1	oth	er
	(list any	ector						the	organization		comper	isation
	hours for	or din				ted		organization	(W-2/1099-MIS	SC)	from	the
	related	stee	ruste			oen sa		(W-2/1099-MISC)			organiz	
	organizations below	al tru	onal t		loyee	com ge					and re	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				organiz	ations
(18) MICHAELA MENDELSOHN	2.00	Ē	Ë	5	, Ke	e Hi	ß			\rightarrow		
BOARD MEMBER	2.00	x						0.		ο.		0.
(19) LAUREN MORELLI	2.00											
BOARD MEMBER	2.00	x						0.		ο.		0.
(20) RUBEN RAMIREZ	2.00		-	-	-			· · ·				0.
	2.00	x						0.		ο.		0.
BOARD MEMBER (21) ADAM SHANKMAN	2.00							0.				0.
BOARD MEMBER (UNTIL 12/2018)	2.00	x						0.		ο.		0.
(22) SOPHIE WATTS	2.00											
BOARD MEMBER		x						0.		0.		0.
(23) JEFFREY P. WOLFF	2.00											
BOARD MEMBER (UNTIL 10/2018)		X						0.		0.		0.
(24) AMIT PALEY	40.00											
CEO & EXECUTIVE DIRECTOR				Х				301,550.		0.	12,	886.
(25) SAM DORISON	40.00									_		
CHIEF OF STAFF						Х		147,627.		0.	12,	142.
(26) BRADEN P. LAY-MICHAELS	40.00									_		
CHIEF DEVELOPEMENT OFFICER						Х		118,351.		0.		307.
1b Sub-total								567,528.		0.		335.
c Total from continuation sheets to Part VI	I, Section A					I		225,293.		0.		962.
d Total (add lines 1b and 1c)								792,821.		0.	63,	297.
2 Total number of individuals (including but n	ot limited to th	iose	liste	ed al	bove	e) wh	o r	eceived more than \$100	,000 of reportab	le		_
compensation from the organization 🕨												5
										г	Ye	s No
3 Did the organization list any former officer,				-	•			•				37
line 1a? If "Yes," complete Schedule J for s										·····	3	X
4 For any individual listed on line 1a, is the su			•						the organization			
and related organizations greater than \$150										·····	4 X	·
5 Did any person listed on line 1a receive or a								•		·		v
rendered to the organization? If "Yes," com	plete Schedul	e J f	or si	uch	pers	son .					5	X
Section B. Independent Contractors									• ·			
1 Complete this table for your five highest co	-									pensa	ation from	1
the organization. Report compensation for	the calendar y	ear	enai	ng v	vitn	or wi	thir		/ear.		(0)	
(A) Name and business	address							(B) Description of s	ervices	C	(C) ompensa	tion
STAMP EVENT MANAGEMENT LI							\dashv	,				
247 CENTRE ST - 7TH FL, M		Χ,	NY	Y 1	100	013	3	EVENT COORDI	NATOR		145,	436.
	SIGNATURE ANALYTICS, 10120 PACIFIC HEIGHTS											
BLVD 110, SAN DIEGO, CA 9	92121							ACCOUNTING S	UPPORT		119,	856.
ON RAMPS												

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2

\$100,000 of compensation from the organization

8 00 דאד 200(

3

307-7TH AVE - SUITE 901, NEW YORK, NY 10001 RECRUITING AGENCY

Total number of independent contractors (including but not limited to those listed above) who received more than

SEE PART VII, SECTION A CONTINUATION SHEETS

2018.06000 THE TREVOR PROJECT INC.

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Form 990 (2018)

117,500.

	OR PROJI	EC	г	INC	2.				95-468	1287
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest								Compensated Employ	ees (continued)	
(A) (B) (C)								(D)	(E)	(F)
Name and title	Average							Reportable	Reportable	Estimated
	hours	(c	(check all that apply)		compensation	compensation	amount of			
	per							from	from related	other
	week	5				loyee		the	organizations	compensation
	(list any hours for	lirecto				l em p		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	related	e or c	tee			satec		(00-2/1099-00130)		and related
	organizations	Individual trustee or director	Institutional trustee		yee	mper				organizations
	below	dual	ution	<u> </u>	Key employee	stco	er			
	line)	Indiv	Instit	Officer	Keye	Highest compensated employee	Former			
(27) CALVIN STOWELL	40.00									
CHIEF GROWTH OFFICER		1				Х		116,101.	Ο.	10,485.
(28) JOHN CALLERY	40.00									
HEAD OF IT		1				Х		109,192.	0.	11,477.
		<u> </u>		┣		<u> </u>				
		-								
				-						
		1								
		1								
		{								
				<u> </u>		<u> </u>				
		-								
		-	-		-	-	-			
		1								
		├		├						
	1	<u> </u>	I	I	I	L	I			
Total to Part VII, Section A, line 1c		<u></u>	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>	225,293.		21,962.

832201 04-01-18

Pa	rt V	/111	Statement of Rever	nue						
			Check if Schedule O cont	ains a respo	nse	or note to any lin			(0)	
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1	а	Federated campaigns	1a						
Gra		b	Membership dues	1b						
ts, (Arr			Fundraising events			2,617,691.				
Gif ilar			Related organizations							
ns, Sim			Government grants (contribut			308,677.				
utio er {			All other contributions, gifts, gran							
Oth			similar amounts not included abo			17,518,138.				
ont		-	Noncash contributions included in lines				20 444 506			
a O		h	Total. Add lines 1a-1f				20,444,506.			
•	•	_				Business Code				
vice	2	. '								
Program Service Revenue		b o								
		c d								
Be		e.								
Pro			All other program service reve	nue						
			Total. Add lines 2a-2f			i				
	3		Investment income (including			I				
			other similar amounts)			· · · · · · · · · · · · · · · · · · ·	21,976.			21,976
	4		Income from investment of tax			- F				
	5		Royalties			🕨 🚺				
				(i) Real		(ii) Personal				
			Gross rents							
			Less: rental expenses							
			Rental income or (loss)	-						
			Net rental income or (loss)							
	7		Gross amount from sales of	(i) Securit	es	(ii) Other				
			assets other than inventory							
			Less: cost or other basis							
			and sales expenses							
			Gain or (loss) Net gain or (loss)							
			Gross income from fundraisin							
Other Revenue	Ŭ		including \$ 2,617							
eve			contributions reported on line							
r B			Part IV, line 18	-	а	772,149.				
the			Less: direct expenses							
0		с	Net income or (loss) from fund	draising ever	nts	🕨	0.			
	9		Gross income from gaming ac							
			Part IV, line 19							
			Less: direct expenses							
			Net income or (loss) from gam		s	····· •				
	10		Gross sales of inventory, less							
			and allowances							
			Less: cost of goods sold							
		С	Net income or (loss) from sale		у					
	11	2	Miscellaneous Revenu			Business Code				
		a b			_					
		р С								
			All other revenue							
			Total. Add lines 11a-11d							
	12		Total revenue. See instructions				20,466,482.	0.	0.	21,976
83200						F				Form 990 (2018

THE TREVOR PROJECT INC.

Form 990 (2018)

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95-4681287 Page 9

THE TREVOR PROJECT INC. Part IX Statement of Functional Expenses

	ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon				X
	not include amounts reported on lines 6b, 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				
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				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	222 104	001 600	20. 202	20 074
	trustees, and key employees	332,184.	281,628.	20,282.	30,274
6	Compensation not included above, to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
	persons described in section 4958(c)(3)(B)		4 107 000	207 200	442 700
7	Other salaries and wages	4,868,867.	4,127,869.	297,269.	443,729.
8	Pension plan accruals and contributions (include	02 000	70 600	F 722	0 550
	section 401(k) and 403(b) employer contributions)	93,900.	79,609.	5,733.	8,558
9	Other employee benefits	361,391.	306,390.	22,065.	32,936.
10	Payroll taxes	414,009.	351,001.	25,277.	37,731.
11	Fees for services (non-employees):				
а	Management				
b	F	220 004	100 707	12 776	20 201
	Accounting	238,894.	192,727.	13,776.	32,391.
	Lobbying	11,000.	8,874.	635.	1,491.
е	Professional fundraising services. See Part IV, line 17	47,470.			47,470.
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	1 710 052	1 405 141	101 065	100 047
	column (A) amount, list line 11g expenses on Sch 0.)	1,719,053.	1,425,141.	101,865.	192,047.
12	Advertising and promotion	415,644.	415,644. 202,053.	14,552.	21,720.
13	Office expenses	238,325. 837,379.	706,556.	50,880.	79,943
14	Information technology	037,379.	100,550.	50,000.	19,943.
15	Royalties	1 252 740	1 062 096	76 196	114,168.
16	Occupancy	1,252,740.	1,062,086. 414,128.	76,486.	
17	Travel	488,469.	414,120.	29,824.	44,517.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20					
21	Payments to affiliates	57,940.	49,122.	3,538.	5,280.
22	Depreciation, depletion, and amortization	57,940.	49,144.	5,550.	J,200.
23					
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	RESOURCE DEVELOPMENT	584,334.	495,403.	35,677.	53,254.
b	STRATEGIC INITIATIVES	482,404.	408,987.	29,453.	43,964.
с	BANK & MERCHANT FEES	278,931.	236,479.	17,030.	25,422.
d	BAD DEBT EXPENSE	69,018.	58,514.	4,214.	6,290,
е	All other expenses	118,967.	100,859.	7,265.	10,843.
25	Total functional expenses. Add lines 1 through 24e	12,910,919.	10,923,070.	755,821.	1,232,028.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

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Check here

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

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	990 () t X	2018) THE TREVOR PRO	JECI	INC.		95-	4681287 Page 11
		Check if Schedule O contains a response or no	te to any	/ line in this Part X			
			to to any		(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing				1	13,139,912.
	2	Savings and temporary cash investments			8,516,428.	2	189,212.
	3	Pledges and grants receivable, net		1,716,422.	3	4,291,275.	
	4	Accounts receivable, net		4			
	5	Loans and other receivables from current and f					
		trustees, key employees, and highest compens					
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqua					
		section 4958(f)(1)), persons described in sectio					
		employers and sponsoring organizations of sec					
S		employees' beneficiary organizations (see instr)				6	
Assets	7	Notes and loans receivable, net				7	
¥	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			275,779.	9	316,664.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	883,933.			
	b	Less: accumulated depreciation		575,850.	184,056.	10c	308,083.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line		F		12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			0.	15	249,962.
	16	Total assets. Add lines 1 through 15 (must equ			10,692,685.	16	18,495,108.
	17	Accounts payable and accrued expenses			846,263.	17	1,170,915.
	18	Grants payable				18	
	19	Deferred revenue			118,625.	19	25,000.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV o	of Schedule D		21	
es	22	Loans and other payables to current and forme	r officers	s, directors, trustees,			
iliti		key employees, highest compensated employe					
Liabilities		Complete Part II of Schedule L				22	
-	23	Secured mortgages and notes payable to unrel		· · · · · · · · · · · · · · · · · · ·		23	
	24	Unsecured notes and loans payable to unrelate	ed third p	arties		24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on line	s 17-24).	Complete Part X of	0		1 5 0 2 2
		Schedule D	0.	25	15,833.		
	26	Total liabilities. Add lines 17 through 25			964,888.	26	1,211,748.
		Organizations that follow SFAS 117 (ASC 95		k here 🕨 🖾 and			
ces		complete lines 27 through 29, and lines 33 and			0 051 500		16 500 056
lan	27	Unrestricted net assets	<u>8,851,580.</u> 876,217.	27	16,588,056. 695,304.		
Ba	28	Temporarily restricted net assets	0/0,21/.	28	095,504.		
Net Assets or Fund Balances	29	Permanently restricted net assets		29			
Ĕ		Organizations that do not follow SFAS 117 (A					
o s	00	and complete lines 30 through 34.				00	
set	30	Capital stock or trust principal, or current funds		F		30	
As	31	Paid-in or capital surplus, or land, building, or e		F		31	
Net	32	Retained earnings, endowment, accumulated in			9,727,797.	32	17,283,360.
-	33	Total net assets or fund balances			10,692,685.	33	18,495,108.
	34	Total liabilities and net assets/fund balances			10,002,000.	34	Form 990 (2018

Form **990** (2018)

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Form	1 990 (2018) THE TREVOR PROJECT INC.	95-46	581287	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	20,46		
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,91		
3	Revenue less expenses. Subtract line 2 from line 1	3	7,55		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9,72	7,7	97.
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			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	17,28	3,3	60.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2018)

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SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form	990	or	990-E	EZ)
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Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2018
Open to Public Inspection
tal and the second second second second

Name of the o	rganization
---------------	-------------

Employer identification number

		THE	TREVOR PRO	JECT INC.				9	5-4681287		
Pa	rt I	Reason for Public	Charity Status (/	All organizations must co	omplete th	nis part.) Se	e instructions	3.			
The	organ	ization is not a private found									
1											
2	\square	 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 									
	\square	A school described in section 170(b) (1(A)(ii): (Altach Schedule 2 (1 offin section 170(b)(1)(A)(iii).									
3	\square		1 0				,				
4		A medical research organiz	ation operated in co	njunction with a hospital	described	d in sectio	n 170(b)(1)(A	(III). Enter	the hospital's name,		
		city, and state:									
5		An organization operated for		llege or university owned	d or opera	ted by a g	overnmental u	unit descrik	bed in		
		section 170(b)(1)(A)(iv). (C	Complete Part II.)								
6		A federal, state, or local go	vernment or governn	nental unit described in s	section 17	70(b)(1)(A)	(v).				
7	X	An organization that norma	ally receives a substa	intial part of its support f	rom a gov	vernmental	unit or from t	he general	public described in		
		section 170(b)(1)(A)(vi). (C	omplete Part II.)								
8		A community trust describe		(1)(A)(vi). (Complete Par	EIL)						
9	\square	An agricultural research org				ed in conii	inction with a	land-grant	college		
0		or university or a non-land-g									
			grant college of agric			manne, cit	y, and state of	the colleg			
10		university:									
10		An organization that norma									
		activities related to its exen	-						-		
		income and unrelated busin	ness taxable income	(less section 511 tax) fro	om busine	esses acqu	ired by the or	ganization	after June 30, 1975.		
		See section 509(a)(2). (Cor	. ,								
11		An organization organized a	and operated exclus	ively to test for public sa	fety. See	section 50	09(a)(4).				
12		An organization organized a	and operated exclus	ively for the benefit of, to	perform	the function	ons of, or to ca	arry out the	e purposes of one or		
		more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section	509(a)(2).	See section 5	5 09(a)(3). (Check the box in		
		lines 12a through 12d that	describes the type of	of supporting organizatio	n and con	nplete line:	s 12e, 12f, and	d 12g.			
а		Type I. A supporting orga							<i>r</i> aivina		
		the supported organization									
		organization. You must c									
b		Type II. A supporting org			tion with it	te cunnort	od organizatio	n(c) by br	wing		
		control or management o			ame perso	ons that co	Siliroi or mana	.ge the sup	poned		
		organization(s). You mus									
С		Type III functionally interpretent of the second						lly integrate	ed with,		
		its supported organizatio	n(s) (see instructions	s). You must complete I	Part IV, Se	ections A,	D, and E.				
d		Type III non-functionally	y integrated. A supp	oorting organization oper	ated in co	nnection \	with its suppo	rted organi	zation(s)		
		that is not functionally int	tegrated. The organiz	zation generally must sat	tisfy a dist	ribution re	quirement and	d an attent	iveness		
		requirement (see instruct	ions). You must con	nplete Part IV, Sections	A and D	, and Part	V.				
е		Check this box if the orga	anization received a	written determination fro	m the IRS	S that it is a	а Туре I, Туре	II, Type III			
		functionally integrated, or	r Type III non-functio	nally integrated support	ing organi	zation.					
f	Ente	er the number of supported of	• •	• • •							
		vide the following informatior							· .		
		(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed ing document?	(v) Amount of	monetary	(vi) Amount of other		
		organization		(described on lines 1-10	Yes	No	support (see in	structions)	support (see instructions)		
				above (see instructions))							
Tota	al										
		Paperwork Reduction Act N	Notice, see the Instr	uctions for Form 990 o	r 990-EZ.	. 832021 10-	11-18 Scheo	Jule A (For	m 990 or 990-EZ) 2018		

2018.06000 THE TREVOR PROJECT INC.

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Schedule A (Form 990 or 990-EZ) 2018 THE TREVOR PROJECT INC.

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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	5,258,588.	4,839,985.	9,470,351.	13,075,115.	20,444,506.	53,088,545.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge \dots						
4	Total. Add lines 1 through 3	5,258,588.	4,839,985.	9,470,351.	13,075,115.	20,444,506.	53,088,545.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						948,761.
	Public support. Subtract line 5 from line 4.						52,139,784.
	ction B. Total Support		i				
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 4	5,258,588.	4,839,985.	9,470,351.	13,075,115.	20,444,506.	53,088,545.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,		110		4 684	04 056	
	and income from similar sources \dots	392.	412.	445.	1,674.	21,976.	24,899.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital				221 225		
	assets (Explain in Part VI.)	47,563.	8,058.	243.	391,896.		447,760.
	Total support. Add lines 7 through 10						53,561,204.
	Gross receipts from related activities,	•	,			12	
13	First five years. If the Form 990 is for	-	first, second, third	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	. —
Se	organization, check this box and stop ction C. Computation of Publ	ic Support Pei	centage				
	Public support percentage for 2018 (I			olumn (f))		14	97.35 %
	Public support percentage from 2017		•			15	96.63 %
	33 1/3% support test - 2018. If the c						, -
	stop here. The organization qualifies	0		•			
b	33 1/3% support test - 2017. If the c						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						
k	10% -facts-and-circumstances test						
	more, and if the organization meets th						
	organization meets the "facts-and-circ				• •		>
18	Private foundation. If the organizatio						s ►
						dule A (Form 990	

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7955___1

Schedule A (Form 990 or 990-EZ) 2018 THE TREVOR PROJECT INC.

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(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	
include any "unusual grants.") Image: Solid or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Image: Solid or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 Image: Solid or services performed, or spended on its behalf 4 Tax revenues leviel for the organization's benefit and either paid to or expended on its behalf Image: Solid or services or facilities furnished by a governmental unit to the organization without charge 5 The value of services or facilities furnished by a governmental unit to the organization without charge Image: Solid or services or facilities furnished or lines 1, 2, and areaeved from disqualified persons 9 Amount included on lines 1, 2, and areaeved the organet of solid or services of with the amount on line 16 for the year Image: Solid or services of solid or services of solid or services of the year 8 Public support. Support Image: Solid or services of solid or services on securities loans, rents, royalties, and income from interest, dividiends, payments received on securities loans, rents, royalties, and robe solid after June 30, 1975 Image: Solid or services or solid or securities loans, rents, royalties, and robe solid after June 30, 1975 9 Anouts from line 6 Image: Solid or service on securities loans, rents, royalties, and income from initerest, dividends, payments received on securities loans, rents, royalties, and income from initerest, solid or solid or solid or solid or solid or solid o	
2 Gross receipts from admissions, merchandise sold or services performed, of selvices performed, of selvices performs, or selvices or facilities turnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levide for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received thro mediated persons that execute the grader of \$5:00 or % of the amount on lines 3 and 3 received through 5 8 Public support. Subpart line 1/2 months to the grader of \$5:00 or % of the amount on lines 1 for the grader of scilles 1 9 Amounts included on lines 2 and 3 received through 5 10 Grader of the signalitied persons that execute the grader of \$5:00 or % of the amount on lines 1 for the grader of \$5:00 or % of the amount on lines 1 for the grader of \$5:00 or % of the amount on lines 1 for the grader of \$5:00 or % of the amount on lines 1 for the grader of \$5:00 or % of the securities 1 9 Amounts from line 6 (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 9 Amounts from line 6	
merchandise sold or services per- formed, or facilities timished in any activity that is related to the organization's tax-exempt purpose Image: constraint of the c	
formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Image: Construct of the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or bus- iness under section 513 Image: Construct of the organization's tax-exempt purpose 4 Tax revenues levied for the organization without charge furnished by a governmental unit to the organization without charge for Tail. Add lines 1 through 5 Image: Construct of the organization and thout charge 6 Total. Add lines 1 through 5 Image: Construct of the organization and signalified persons Image: Construct of the organization and thout the organization without charge c Add lines 7 and 7b Image: Construct of the organization without charge for the disquilified persons Image: Construct of the organization and thout the size and a received the order than disquilified persons b Amounts included on lines 1, 2, and 3 received from disquilified persons Image: Construct of the organization and thouse 1 store they are executible support. Calendar year (of fiscal year beginning in) Section B. Total Support Image: Construct of the organization without and income from interest, dividends, payments received on securities loans, rents, royallies, arad income from interest, dividends, payments received on securities loans, rents, royallies, arad income from unrelated business acquired after June 30, 1975 Image: Construct of the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) org check this box and stop here 10 Total support. (add lines 9, 10, 11, 112)<	
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3 Gross receipts from activities that are not an unrelated trade or business under section 513 Image: Content of the image: Contentof the image: Content of the image: Conten	
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4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	
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6 Total. Add lines 1 through 5	
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3 received from disqualified persons	
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greate of \$5,000 or 1% of the amount on line 13 for the year c c Add lines 7a and 7b and and 7b 8 Public support. (Subtract line 7c from line 6.) and and year (or fiscal year beginning in) ► 9 Amounts from line 6 and and year (or fiscal year beginning in) ► 9 Amounts from line 6 and and year (or fiscal year beginning in) ► 10a Gross income from interest, dividends, payments received on securities loans, rents, royatties, and income from sinilar sources and income b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 and 10b c Add lines 10a and 10b and and 10b 11 Net income from sinterests activities not included in line 10b, whether or not the business is regularly carried on or loss from the sale of capital assets (Explain in Part VI.) and 10b 12 Other income, 9, 10c, 11, and 12.) and and 10b 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) org check this box and stop here	
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9 Amounts from line 6 0 0a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 0 b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 0 c Add lines 10a and 10b 0 1 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 0 2 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 0 3 Total support. (Add lines 9, 10c, 11, and 12.) 1 4 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) org check this box and stop here	
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b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Image: Comparison of the section 511 taxes) c Add lines 10a and 10b Internet included in line 10b, whether or not the business is regularly carried on Internet include gain or loss from the sale of capital assets (Explain in Part VI.) Image: Comparison of the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) orgonic check this box and stop here	
acquired after June 30, 1975	1
acquired after June 30, 1975	
c Add lines 10a and 10b	
1 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Image: Comparison of the business is regularly carried on 2 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Image: Comparison of the business is regularly carried on 3 Total support. (Add lines 9, 10c, 11, and 12.) Image: Comparison of the business is regularly carried on the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) org check this box and stop here	
activities not included in line 10b, whether or not the business is regularly carried on 2 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 3 Total support. (Add lines 9, 10c, 11, and 12.) 4 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) org check this box and stop here	
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12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Image: Comparison of the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) Image: Comparison of the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) org check this box and stop here	
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assets (Explain in Part VI.) Image: Constraint of the second state of the second	
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check this box and stop here	
	nization,
Section C. Computation of Public Support Percentage)
15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 15	0
16 Public support percentage from 2017 Schedule A, Part III, line 15 16	9
Section D. Computation of Investment Income Percentage	
I7 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 17	0
8 Investment income percentage from 2017 Schedule A, Part III, line 17 18	Q
9a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and li	e 17 is not
b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3	, and
line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	
32023 10-11-18 Schedule A (Form	
16	

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer* (*b*) *and* (*c*) *below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If* "Yes," *describe in* **Part VI** *when and how the organization made the determination.*
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "*Yes*," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Schedule A (Form 990 or 990-EZ) 2018

17

			V	Mir
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations		Vee	Na
	Did the divertery twisters as merchanishing of one or more supported every institute hours the mercanish		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
•	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
<u> </u>	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations		V.	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
<u> </u>	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
	Did the survey in the survey idea to each of the survey in the survey in the start day of the Office survey of the		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
•	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
<u> </u>	supported organizations played in this regard.	3		
	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)	-		
a	The organization satisfied the Activities Test. <i>Complete</i> line 2 <i>below.</i>			
b				
c	L The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	tructions	1	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а				
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	0.5		
	that these activities constituted substantially all of its activities.	2a		
D	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	0Ŀ		
•	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а		0-		
Ŀ	trustees of each of the supported organizations? <i>Provide details in</i> Part VI.	3a		
a	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	0Ŀ		
0000	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		2040
83202	¹⁵ 10-11-18 Schedule A (Form 9	90 0F 95	/∪-⊏Z)	2010

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Schedule A (Form 990 or 990-EZ) 2018 THE TREVOR PROJECT INC.

 Part V
 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

 1
 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All

other Type III non-functionally	v integrated supporting	organizations must	complete Sections	A through E.

on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
Net short-term capital gain	1		
Recoveries of prior-year distributions	2		
Other gross income (see instructions)	3		
Add lines 1 through 3	4		
Depreciation and depletion	5		
Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
Other expenses (see instructions)	7		
Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
Average monthly value of securities	1a		
Average monthly cash balances	1b		
Fair market value of other non-exempt-use assets	1c		
Total (add lines 1a, 1b, and 1c)	1d		
Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
Acquisition indebtedness applicable to non-exempt-use assets	2		
Subtract line 2 from line 1d	3		
Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4		
Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
Multiply line 5 by .035	6		
Recoveries of prior-year distributions	7		
Minimum Asset Amount (add line 7 to line 6)	8		
on C - Distributable Amount			Current Year
Adjusted net income for prior year (from Section A, line 8, Column A)	1		
Enter 85% of line 1	2		
Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
Enter greater of line 2 or line 3	4		
Income tax imposed in prior year	5		
Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
	Net short-term capital gain Recoveries of prior-year distributions Other gross income (see instructions) Add lines 1 through 3 Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) ion B - Minimum Asset Amount Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): Average monthly value of securities Average monthly value of securities Average monthly cash balances Fair market value of other non-exempt-use assets Total (add lines 1a, 1b, and 1c) Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions) Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by .035 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6) ion C	Net short-term capital gain 1 Recoveries of prior-year distributions 2 Other gross income (see instructions) 3 Add lines 1 through 3 4 Depreciation and depletion 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 ion B - Minimum Asset Amount 8 Average monthly value of securities 1a Average monthly cash balances 1b Fair market value of other non-exempt-use assets 1c Total (add lines 1a, 1b, and 1c) 1d Discount claimed for blockage or other factors (explain in detail in Part VI): 3 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by .035 6 Recoveries of prior-year distributions 7	Net short term capital gain 1 Recoveries of prior-year distributions 2 Other gross income (see instructions) 3 Add lines 1 through 3 4 Depreciation and depletion 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Ion B - Minimum Asset Amount (A) Prior Year Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1 Average monthly cab balances 1a Average monthly cab balances 1b Fair market value of other non-exempt-use assets 1c Total (add lines 1a, 1b, and 1c) 1d Discount claimed for blockage or other factors (explain in detall in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions) 5 Multipy line 5 by .035 6

instructions).

Schedule A (Form 990 or 990-EZ) 2018

832026 10-11-18

Pa	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	IS	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive	e	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
c	From 2015			
d	From 2016			
e	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2014			
-	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
e	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

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21 Schedule A (Form 990 or 990-E	Part VI Supplemental Informatic Part IV, Section A, lines 1, 2, 3b, line 1; Part IV, Section D, lines 2 Section D, lines 5, 6, and 8; and (See instructions.)	On. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; o, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, d Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
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21	332028 10-11-18	Schedule A (Form 990 or 990-EZ)
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SCHEDULE C	Pc	litical Campaign a	nd Lobbying	g Activities	OMB No. 1545-0047			
(Form 990 or 990-EZ)	orm 990 or 990-EZ)				2018			
	For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.							
Department of the Treasury Internal Revenue Service	iment of the Treasury							
-		Form 990, Part IV, line 3, or For		e 46 (Political Campaign A	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 organiz	•	•						
		Form 990, Part IV, line 4, or For						
	-	have filed Form 5768 (election und			-			
	-	have NOT filed Form 5768 (electio 1 Form 990, Part IV, line 5 (Proxy						
Tax) (see separate inst		1 FOITH 330, Fait IV, IIIe 3 (FIOXy	Tax) (See Separate II		2 , Falt V , fille 330 (Floxy			
 Section 501(c)(4), (5), or (6) organizat	tions: Complete Part III.						
Name of organization				Emplo	yer identification number			
		VOR PROJECT INC.			95-4681287			
Part I-A Compl	ete if the org	anization is exempt unde	r section 501(c) (or is a section 527 or	ganization.			
 Drovido o doporinti 	on of the erecui-	ution's direct and indirect political	compaign activition in	Dout IV				
		ation's direct and indirect political ures						
		gn activities						
	politiour oumpu	gri dotivitios						
Part I-B Compl	ete if the org	anization is exempt unde	r section 501(c)(3	3).				
		incurred by the organization unde						
		incurred by organization manager						
		n 4955 tax, did it file Form 4720 fo						
					Yes III No			
b If "Yes," describe in		anization is exempt unde	r section 501(c)	except section 501/)/3)			
					,,,(0).			
		d by the filing organization for sect ization's funds contributed to othe						
			-					
		. Add lines 1 and 2. Enter here and		Ψ.				
				▶\$				
		1120-POL for this year?			Yes No			
		nployer identification number (EIN)			the filing organization			
made payments. Fe	or each organiza	tion listed, enter the amount paid	from the filing organiza	ation's funds. Also enter the	e amount of political			
		omptly and directly delivered to a			e segregated fund or a			
political action com	mittee (PAC). If	additional space is needed, provid	1	V.				
(a) Name	e	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political			
				filing organization's funds. If none, enter -0	contributions received and promptly and directly			
					delivered to a separate			
					political organization. If none, enter -0			

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

Schedule C (Form 990 or 990-EZ) 2018

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Pa	Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under							
	section 501(h)).							
A C	A Check 🕨 🛄 if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, a							
	expenses, and share of exces	s lobbying expenditures).						
BC	heck 🕨 📃 if the filing organization check	ed box A and "limited control" provisions apply.	-					
		oying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals				
1a	Total lobbying expenditures to influence pub	lic opinion (grass roots lobbying)	0.					
b	Total lobbying expenditures to influence a leg	gislative body (direct lobbying)	11,000.					
с	Total lobbying expenditures (add lines 1a and	d 1b)	11,000.					
d	Other exempt purpose expenditures		12,899,919.					
е		s 1c and 1d)	12,910,919.					
f	Lobbying nontaxable amount. Enter the amount	unt from the following table in both columns.	795,546.					
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:						
	Not over \$500,000	20% of the amount on line 1e.						
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.						
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess 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.						
			100.000					
-	Grassroots nontaxable amount (enter 25% o	2	198,887.					
h	Subtract line 1g from line 1a. If zero or less, e	0.						
i	Subtract line 1f from line 1c. If zero or less, er		0.					
j		r line 1h or line 1i, did the organization file Form 4720	F					
	reporting section 4911 tax for this year?		L	Yes No				

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total		
2a Lobbying nontaxable amount	438,352.	484,339.	519,782.	795,546.	2,238,019.		
 b Lobbying ceiling amount (150% of line 2a, column(e)) 					3,357,029.		
c Total lobbying expenditures	3,300.		8,000.	11,000.	22,300.		
d Grassroots nontaxable amount	109,588.	121,085.	129,946.	198,887.	559,506.		
e Grassroots ceiling amount (150% of line 2d, column (e))					839,259.		
f Grassroots lobbying expenditures	1,650.		4,000.		5,650.		

Schedule C (Form 990 or 990-EZ) 2018

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Schedule C (Form 990 or 990-EZ) 2018 THE TREVOR PROJECT INC.

95-4681287 Page 3

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

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(t	(b)	
of the	lobbying activity.	Yes	No	Amo	ount	
1 a	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: Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?					
	Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?					
	Grants to other organizations for lobbying purposes?					
	Direct contact with legislators, their staffs, government officials, or a legislative body?					
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	Other activities?					
	Total. Add lines 1c through 1i					
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					
с	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?		-			
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(5), or se	ction		
	501(c)(6).					
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?					
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			l		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from th					
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section					
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No," OR	(b) Par	t III-A, lir	ne 3, is	
1			1			
2	Dues, assessments and similar amounts from members					
2	expenses for which the section 527(f) tax was paid).	dl				
			20			
	Current year					
	Carryover from last year					
-	Total					
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 exc					
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p					
-	expenditure next year?					
5 Par	Taxable amount of lobbying and political expenditures (see instructions)		5			
			A line			
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	iist); Part II-	A, lines 1 a	ind 2 (see		

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C (Form 990 or 990-EZ) 2018

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SCHEDULE D

(Form 990)

Part I

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Part III

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imp Part II 1

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.



Name of the organizati					
Internal Revenue Service					
Department of the Treasury					

am	e of the organization THE TREVOR PROJECT	INC.			Emp	loyer identification numbe 95-4681287	۶r
Pa	rt I Organizations Maintaining Donor Advised	d Funds or Otl	ner Similar Fur	ds or A	ccou	nts.Complete if the	_
	organization answered "Yes" on Form 990, Part IV, line	e 6.					
		(a) Donor a	dvised funds	() Func	is and other accounts	
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in w	vriting that the ass	ets held in donor ad	dvised fun	ds		
	are the organization's property, subject to the organization's e	exclusive legal con	trol?			🗌 Yes 🗌 N	ο
6	Did the organization inform all grantees, donors, and donor ac	dvisors in writing th	at grant funds can	be used o	only		
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or	for any other purpo	se confer	ring		
	impermissible private benefit?					Yes 📖 N	0
Pa	rt II Conservation Easements. Complete if the orga	anization answered	d "Yes" on Form 99	0, Part IV,	line 7.		
1	Purpose(s) of conservation easements held by the organization	on (check all that a	pply).				
	Preservation of land for public use (e.g., recreation or ed	ducation)	Preservation of a h	nistorically	import	ant land area	
	Protection of natural habitat		Preservation of a c	ertified his	storic s	tructure	
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation co	ontribution in the fo	rm of a co	nserva	tion easement on the last	
	day of the tax year.					Held at the End of the Tax Ye	ır
а	Total number of conservation easements				2a		
b	Total acreage restricted by conservation easements				2b		
С	Number of conservation easements on a certified historic stru	ucture included in (a)		2c		
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and r	not on a historic stru	ucture			
	listed in the National Register				2d		
3	Number of conservation easements modified, transferred, rele	eased, extinguishe	d, or terminated by	the organ	ization	during the tax	
	year						
4	Number of states where property subject to conservation eas			_			
5	Does the organization have a written policy regarding the peri	0.	spection, handling	of			
	violations, and enforcement of the conservation easements it						O
6	Staff and volunteer hours devoted to monitoring, inspecting, h	handling of violatio	ns, and enforcing c	onservatio	on ease	ements during the year	
	▶						
7	Amount of expenses incurred in monitoring, inspecting, handl	ling of violations, a	nd enforcing conse	rvation ea	semen	ts during the year	
_	▶\$						
8	Does each conservation easement reported on line 2(d) above	, ,					
	and section 170(h)(4)(B)(ii)?					Yes	D
9	In Part XIII, describe how the organization reports conservation						
	include, if applicable, the text of the footnote to the organizati	ion's financial state	ements that describ	es the org	janizati	on's accounting for	
201	conservation easements. t III Organizations Maintaining Collections of	Art Historiaa		Othor	Simil	ar Accoto	—
- a	Complete if the organization answered "Yes" on Form	-	-	Other	5111110	a Assels.	
4.0	· · · · · · · · · · · · · · · · · · ·						—
ıa	If the organization elected, as permitted under SFAS 116 (ASC historical traceuros, or other similar assets hold for public oxh						í
	historical treasures, or other similar assets held for public exh		or research in lufth	erance of	public	service, provide, in Part XII	,
h	the text of the footnote to its financial statements that describ		ite rovonue etetem	ont and h	alanac	shoot works of art biotoria	21
u	If the organization elected, as permitted under SFAS 116 (ASC						
	treasures, or other similar assets held for public exhibition, ed	incation, or researc	an in furtherance of	Public ser	vice, p	rovide the following amoun	12
	relating to these items:				b d		
	(i) Revenue included on Form 990, Part VIII, line 1						—
	(ii) Assets included in Form 990, Part X				P 3		

LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	
b	Assets included in Form 990, Part X	
а	Revenue included on Form 990, Part VIII, line 1	
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide

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Schedule D (Form 990) 2018

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Sche		VOR PROJEC						95-46			age 2
Par	t III Organizations Maintaining C	Collections of A	rt, His	torical Tr	easures,	or Oth	er Simila	ar Asse	ts (contir	nued)	
3	Using the organization's acquisition, access (check all that apply):	ion, and other record	ls, chec	k any of the	following that	at are a s	ignificant	use of its	collectio	n item	S
а	Public exhibition	d		Loan or exc	hange progr	ams					
b	Scholarly research	e		Other							
с	Preservation for future generations										
4	Provide a description of the organization's c	ollections and explai	n how th	ney further t	he organizat	ion's exe	mpt purpo	ose in Par	t XIII.		
5	During the year, did the organization solicit of								-		-
	to be sold to raise funds rather than to be m								Yes		No
Pa	t IV Escrow and Custodial Arran		ete if the	e organizatio	on answered	"Yes" or	Form 990), Part IV,	line 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod		•						7		ı
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table:							
									Amoun	t	
	Beginning balance										
	Additions during the year										
	Distributions during the year										
t Or	Ending balance								Yes		
	Did the organization include an amount on F						• • • • • • • • • • • • • • • • • • • •				」No │
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete it]
		(a) Current year		Prior year	(c) Two yea			ears hack	(e) Four	vears	hack
1a	Beginning of year balance	(a) Ourrent year	(6)1	nor year	(c) 100 you	TO BUOK	(d) 11100 y	ouro buon		youro	buok
	Contributions										
	Net investment earnings, gains, and losses										
	Grants or scholarships										
	Other expenditures for facilities										
•	and programs										
f	Administrative expenses										
	End of year balance										
2	Provide the estimated percentage of the cur	rent year end balanc	e (line 1	g, column (a	a)) held as:	I					
а	Board designated or quasi-endowment		%								
b	Permanent endowment	%									
с	Temporarily restricted endowment	%									
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.									
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	and administe	ered for t	he organiz	zation	_		
	by:									Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requi	red on S	Schedule R?) 				3b		
4	Describe in Part XIII the intended uses of the		owment	funds.							
Par	t VI Land, Buildings, and Equipm										
	Complete if the organization answere		-								
	Description of property	(a) Cost or o basis (investr		• •	t or other (other)		ccumulate preciation	d	(d) Bool	k value	3
	Land										
	Buildings				2 050		1 1 1		~		
	Leasehold improvements				3,850.		17,8			5,9	
	Equipment				1,417.		416,5			$\frac{4}{7}, \frac{8}{2}$	
-	Other				8,666.		141,4	45.		7,22	
Tota	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, colur	nn (B), line 1	10c.)				30	8,0	రు.

Schedule D (Form 990) 2018

832052 10-29-18

Complete if the organization answered "Yes"	on Form 990, 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)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, 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)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) BOOK Value
(1) Federal ir	ncome taxes	
(2) DEFER	RRED RENT	15,833.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.) 15,833.

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

Schedule D (Form 990) 2018

832053 10-29-18

Sche	edule D (Form 990) 2018 THE TREVOR PROJECT INC.			95-	4681287 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme	nts W	ith Revenue per P		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	22,225,116.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	1,758,634.		
с	Recoveries of prior year grants				
d					
е	Add lines 2a through 2d			2e	1,758,634.
3	Subtract line 2e from line 1			3	20,466,482.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	20,466,482.
				_	
Pa	rt XII Reconciliation of Expenses per Audited Financial Stateme	ents W	lith Expenses per	Retu	ırn.
Pa	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
Pa				Retu	ırn. 14,669,553.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:			1	
1	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements			1	
1 2	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	2a		1	
1 2	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a 2b		1	
1 2 a b	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	1,758,634.	1	14,669,553.
1 2 a b c	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	1,758,634.	1	14,669,553.
1 2 b c d	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	1,758,634.	1	14,669,553.
1 2 b c d e	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	1,758,634.	1	14,669,553.
1 2 b c d 3	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	1,758,634.	1	14,669,553.
1 2 6 6 8 4	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d	1,758,634.	1	14,669,553.
1 2 a b c d e 3 4 a	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b	2a 2b 2c 2d 4a 4b	1,758,634.	1	14,669,553. 1,758,634. 12,910,919. 0.
1 2 d e 3 4 b c 5	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	1,758,634.	1 2e 3	14,669,553.

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.

PART X, LINE 2:

THE ORGANIZATION IS A NOT-FOR-PROFIT ORGANIZATION THAT IS EXEMPT FROM
INCOME TAXES UNDER 501(C)(3) OF THE INTERNAL REVENUE CODE AND 23701(D) OF
THE REVENUE AND TAXATION CODE OF THE STATE OF CALIFORNIA. ACCORDINGLY, NO
PROVISIONS FOR INCOME TAXES OR RELATED CREDITS ARE INCLUDED IN THESE
FINANCIAL STATEMENTS. THE ORGANIZATION RECOGNIZES POTENTIAL ACCRUED
INTEREST AND PENALTIES RELATED TO UNCERTAIN TAX POSITIONS IN INCOME TAX
EXPENSE. DURING THE YEARS ENDED JULY 31, 2019 AND 2018, THE ORGANIZATION
PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS AND DID NOT IDENTIFY
ANY MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR
WHICH MIGHT HAVE AN EFFECT ON ITS TAX-EXEMPT STATUS.

832054 10-29-18

32

Part XIII Supplemental Information	DN (continued)				
2055 10-20-18				Schedu	ile D (Form 990) 2018
2055 10-29-18		33			
60714 701224 7955	2018.06000	THE TRE	EVOR PROJECT	INC.	79551

SCHEDULE G	Suppleme	ental Information Regarding	, Fun	drais	ing or Gaming	Acti	vities	OMB No. 1545-0047
(Form 990 or 990-EZ)		e organization answered "Yes" on organization entered more than \$1				or 19	, or if the	2018
Department of the Treasury	(Attach to Form 990	-		-			Open to Public
Internal Revenue Service	► Go	o to www.irs.gov/Form990 for instr	uctior	is and	I the latest informat	ion.		Inspection
Name of the organization	THE TRE	VOR PROJECT INC.					Employer ide	entification number
		Complete if the organization answe	ered "\	es" o	n Form 990, Part IV,	line 1	7. Form 990-E	Z filers are not
 Indicate whether the a Mail solicitation b Internet and e c Phone solicitation d In-person solid 2 a Did the organization key employees lister 	ons email solicitations ations citations have a written o d in Form 990, F highest paid indi	sed funds through any of the followin e Solicita s f Solicita g X Special pr oral agreement with any individual Part VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra l (inclu	non-g gover aising ding o sional 1	overnment grants nment grants events fficers, directors, true fundraising services?	stees	Yes	
(i) Name and address or entity (fundr		(ii) Activity	have c	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	tò (Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
STAMP EVENT - 247 C	ENTRE ST,		Yes	No				
NEW YORK, NY 10013		FUNDRAISER EVENT PLANNING		X	3,389,840.		47,470	. 3,342,370.
Total					3,389,840.		47,470	. 3,342,370.
-		on is registered or licensed to solicit		oution				•
or licensing.								
NY,CA								
	duction A -t N-t	ice and the Instructions for Form	000 -	000		Pake		
	uction Act Not	ice, see the Instructions for Form	990 O	990-l	EZ. 3	sche	uule G (Form s	990 or 990-EZ) 2018

		of fundraising event contributions and	(a) Event #1	(b) Event #2 TREVOR LIVE NY	(c) Other events NONE	(d) Total events (add col. (a) through
P			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	1,380,665.	2,009,175.		3,389,840.
	2	Less: Contributions	869,923.	1,747,768.		2,617,691.
	3	Gross income (line 1 minus line 2)		261,407.		772,149.
	4	Cash prizes				
<i>(</i> 0	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
Direct E	7	Food and beverages				
	8	Entertainment		261 407		772,149.
		Other direct expenses	JIU,/44.	261,407.		//4.149.
	9 10					
	10	Direct expense summary. Add lines 4 through	ugh 9 in column (d)	· · · · · · · · · · · · · · · · · · ·		772,149
Ра	10	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from II Gaming. Complete if the organization	ugh 9 in column (d) n line 3, column (d)			772,149.
	10 11	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from	ugh 9 in column (d) n line 3, column (d)	n 990, Part IV, line 19, or (b) Pull tabs/instant		772,149. 0.
	10 11	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from II Gaming. Complete if the organization	ugh 9 in column (d) n line 3, column (d) on answered "Yes" on Forn	n 990, Part IV, line 19, or	reported more than	772,149.
Revenue	10 11	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from II Gaming. Complete if the organization	ugh 9 in column (d) n line 3, column (d) on answered "Yes" on Form (a) Bingo	n 990, Part IV, line 19, or (b) Pull tabs/instant	reported more than	772,149. 0.
es Revenue	10 11 rt I	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.	(a) Bingo	n 990, Part IV, line 19, or (b) Pull tabs/instant	reported more than	772,149. 0.
es Revenue	10 11 rt I	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from Gaming. Complete if the organizatio \$15,000 on Form 990-EZ, line 6a.	(a) Bingo	n 990, Part IV, line 19, or (b) Pull tabs/instant	reported more than	772,149. 0.
Revenue	10 11 rt I 1 2	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from Gaming. Complete if the organizatio \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes	(a) Bingo	n 990, Part IV, line 19, or (b) Pull tabs/instant	reported more than	772,149. 0.
es Revenue	10 11 rt I 2 3	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs	(a) Bingo	n 990, Part IV, line 19, or (b) Pull tabs/instant	reported more than	772,149. 0.
es Revenue	10 11 rt I 2 3 4 5	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes	(a) Bingo (a) Bingo (a) Bingo (b) Bingo (b) Bingo (c) Bi	n 990, Part IV, line 19, or (b) Pull tabs/instant bingo/progressive bingo	reported more than	772,149. 0.
es Revenue	10 11 rt I 2 3 4 5	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses	(a) Bingo (a) Bingo (b) Ves% (c) Ves% (c) Ves%	n 990, Part IV, line 19, or (b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	772,149. 0.
es Revenue	10 11 rt I 2 3 4 5 6	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	(a) Bingo (a) Bingo (a) Bingo (b) Constant (c)	n 990, Part IV, line 19, or (b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	772,149. 0.
es Revenue	10 11 rt I 2 3 4 5 6 7	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through	(a) Bingo (a) Bingo (a) Bingo (b) Constant (c)	n 990, Part IV, line 19, or (b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	772,14

832082 10-03-18

Schedule G (Form 990 or 990-EZ) 2018

7955___1

35 2018.06000 THE TREVOR PROJECT INC.

b If "Yes," explain:

<u>Schedu</u> le G	(Form 990 or 990-EZ) 2018 THE TREVOR PROJECT INC.	95-46	8128	7 Page 3
11 Does th	e organization conduct gaming activities with nonmembers?	[Yes	
	rganization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
to adm	nister charitable gaming?	[Yes	s 🗌 No
13 Indicate	the percentage of gaming activity conducted in:			
a The org	anization's facility	L·	13a	%
b An outs	ide facility		13b	%
	e name and address of the person who prepares the organization's gaming/special events books and recor			
Name				
Addres	s ►			
15a Does th	e organization have a contract with a third party from whom the organization receives gaming revenue? $_{\dots}$	[Yes	5 🗌 No
	' enter the amount of gaming revenue received by the organization \blacktriangleright \$ and the amo	unt		
of gam	ng revenue retained by the third party $ ightarrow$ \$			
c If "Yes,	enter name and address of the third party:			
Name				
Addres	s ►			
16 Gaming	manager information:			
Name	•			
Coming	manager compensation \$			
Descrip	tion of services provided			
	Director/officer Employee Independent contractor			
	ory distributions:			
	rganization required under state law to make charitable distributions from the gaming proceeds to	Г		5 🗔 No
	ne state gaming license?			
	e amount of distributions required under state law to be distributed to other exempt organizations or spent	in the		
	ation's own exempt activities during the tax year > \$			
Part IV	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v) 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	, and Part	III, lines	9, 96, 106,
	TSD, TSC, T6, and T7D, as applicable. Also provide any additional information. See instructions.			
332083 10-03-1		G (Form §	90 or 9	90-EZ) 2018
	36	-		-
60714	701224 7955 2018.06000 THE TREVOR PROJECT IN	2.	79	551

10560714 701224 7955

		Oshadula 0 /5
832084 04-01-18	27	Schedule G (Form 990 or 990-EZ
10560714 701224 7955	37 2018.06000 THE TREVOR PROJECT	INC. 79551

(Form 990) For cortain Officers. Directors, Trustees, Key Employees, and Highest Component of Employee in the Component of Employee identification number 35-4661287 Determine of the organization The TREVOR PROJECT INC. Employee identification number 35-4661287 Part I Questions Regarding Compensation Yes Note of the organization ************************************	SC	HEDULE J	Compensation Information	1	OMB No. 1	545-00	47
Complete if the organization inswered "Yes" on Form 990, Part IV, line 23. Conservation of the organization inswered "Yes" on Form 990, Part IV, line 23. Conservation of the organization mumber of the organization runnee of	(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	10	2
Deserved the trease to the trease to the construction of the observed to instructions and the latest information. Parent Reserved Section 3. Parent Reserved Section 3.	-	-			ZU	10)
Image of the organization Image of the organization Image of the organization number 95 - 46 81 28 7 Part II Questions Regarding Compensation Image of the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a, complete Part III to provide any previde an	Dono	rtmont of the Treesury			Open to	Publ	ic
THE TREVOR PROJECT INC. 95-4681287 Part I Questions Regarding Compensation Image: Comparison of the compensation provided any of the following to or for a person listed on Form 990, Part VII, Section A, In ta C. Complete Part III to provide any relevant information regarding these items. Yes No Part UI. Scotton A, In ta C. Complete Part III to provide any relevant information regarding these items. Image: Comparison of the Companions Personal services (such as maid, chauffeur, chef) b fray of the boxes on line 1 are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain. 1b Image: Comparison of all of the expenses described above? If 'No,' complete Part III to explain. 1b Image: Comparison of all of the expenses described above? If 'No,' complete Part III to explain. 2 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization 's cellowing with the explorement on the organization to establish compensation committee Image: Compensatio					Inspe	ction	
Part 1 Questions Regarding Compensation 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. Image: Compension Section Part III to provide any relevant information regarding these items. Image: Compension Section Part III to provide any relevant information regarding the series (such as maid, chauffeur, cher) b If any of the boxes on line 1 a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain. 1b c Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trutsels, and officers, including the CEO/Executive Director, parading the times checked on line 1a? 1b c Indicate which, if any, of the following the filing organization used to establish the compensation of the organization is CEO/Executive Director, but explain in Part III. Compensation committee 12 d During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization? 4a X d Participate in, or receive payment from, an equity-based compensation arrangement? 4b X d During the year, did any person listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	Nan	ne of the organizatio	n				mber
a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a, Complete Part III to provide any relevant information regarding these items. Yes No Part VII, Section A, line 1a, Complete Part III to provide any relevant information regarding these items. Provide any relevant information regarding these items. Part VII, Section A, line 1a, Complete Part III to provide any relevant information regarding the set tems. Part VII, Section A, line 1a, Complete Part III to provide any relevant information regarding the set tems. Part VII, Section A, line 1a, Complete Part III to provide any relevant information regarding payment or reimbursement or provision of all of the expenses described above? If No, roomplete Part III to explain. It 2 bit the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the EID/Executive Director, regarding the items checked on line 1a? It 3 Indicate which, if any, of the following the filing organization uses for methods used by a related organization to establish compensation consultant Xiii Compensation survey or study X Form 990 of ther organizations Xiii Approval by the board or compensation committee Xiiii Approval by the board or compensation committee 4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organizations Xiiii Approval by the board or compensation committee 4 Diving the granitation? 4 Xiii Yees'				95-4	68128	7	
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a, Complete Part III to provide any relevant information regarding these items. First class or charter travel Four sonal use Fravel for companions Fravel for companions Fravel for companions drag coss. up payments Fravel for companion and gross. up payments Fravel for companion and gross. up payments Fravel for companion and gross. up payments Fravel for companions drag coss. up payments Fravel for companions drag coss. Up payments Fravel base control to the expenses described above? If "No", complete Part III to explain Z Di the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No", complete Part III to explain Z Di the oxen on line 1a are checked, did the organization only on the organization Z Di the oxen on line 1a are checked, did the organization organization Substantiation prior to reimburse generase incurred by all directors, trustees, and officers, including the filing organization used to establish the compensation of the CEO/Executive Director, but explain in Part III. Compensation committee X Mitten employment contract X Independent compensation form 990, Part VII, Section A, line 1a, with respect to the filing organization regulary payment from, an equity-based compensation arrangement? Ac exit if "Yees" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations The organization? The organization? The organizat	Pa	rt I Question	s Regarding Compensation				
Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. Image: Complete Part III to provide any relevant information regarding these items. Image: Print-class or charter travel Image: Part VII, Section A, line 1a, Complete Part III to provide any relevant information reguring allowing allowance or residence for personal use Image: Part VII, Section A, line 1a, clad the or social club dues or inflution fees Discretionary spending account Personal services (such as maid, chauffeur, chef) Ib J Indicate which, if any, of the following the filing organization follow a written policy regarding payment or reimbursened or provision of all of the expenses described abov? If 'No,' complete Part III to explain. Ib 2 Indicate which, if any, of the following the filing organization used to establish the compensation organization to establish compensation committee Image: View or study Mindicate which, if any, of the following the filing organization used to establish the compensation committee Image: View or study Compensation committee Image: View or study View or study Form 990 of the organizations Image: View or study Image: View organization to establish or compensation committee 4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: Image: View organization a Receive a severance apyriment from, a supplemental nonqualified r						Yes	No
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5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a X a The organization? 5a X b Any related organization? 5b X if "Yes" on line 5a or 5b, describe in Part III. 5b X 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a X a The organization? 6a X b Any related organization? 6b X if "Yes" on line 6a or 6b, describe in Part III. 6b X 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 7 X 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X		If "Yes" to any of lir	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a X a The organization? 5a X b Any related organization? 5b X if "Yes" on line 5a or 5b, describe in Part III. 5b X 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a X a The organization? 6a X b Any related organization? 6b X if "Yes" on line 6a or 6b, describe in Part III. 6b X 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 7 X 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X							
contingent on the revenues of: 5a X a The organization? 5b X b Any related organization? 5b X if "Yes" on line 5a or 5b, describe in Part III. 5b X 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a X a The organization? 6a X b Any related organization? 6b X if "Yes" on line 6a or 6b, describe in Part III. 6b X 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 7 X 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X							
a The organization? 5a X b Any related organization? 5b X lf "Yes" on line 5a or 5b, describe in Part III. 5b X 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a X a The organization? 6a X b Any related organization? 6b X lf "Yes" on line 6a or 6b, describe in Part III. 6b X 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 7 X 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. 8 X	5			on			
b Any related organization? 5b X If "Yes" on line 5a or 5b, describe in Part III. 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a X a The organization? 6a X b Any related organization? 6b X if "Yes" on line 6a or 6b, describe in Part III. 6b X 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 7 X 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. 8 X		•					37
If "Yes" on line 5a or 5b, describe in Part III. 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? b Any related organization? if "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	а	The organization?			5a		
 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? b Any related organization? if "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. 8 Ware any amounts reported on Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. 8 X 	b				5b		
contingent on the net earnings of: 6a X a The organization? 6a X b Any related organization? 6b X If "Yes" on line 6a or 6b, describe in Part III. 6b X 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 7 X 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. 8 X							
a The organization? 6a X b Any related organization? 6b X if "Yes" on line 6a or 6b, describe in Part III. 6b X 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 7 X 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X	6			on			
b Any related organization? If "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		0	5				v
If "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III							
 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III X 	b				6b		Δ
not described on lines 5 and 6? If "Yes," describe in Part III 7 X 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X	_						
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	7				_		v
initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X	~				7		A
	8						v
	~				8		A
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	9						
Regulations section 53.4958-6(c)? 9 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule J (Form 990) 2018							

832111 10-26-18

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THE TREVOR PROJECT INC.

95-4681287

Page 2

 Schedule J (Form 990) 2018
 THE
 TREVOR
 PROJECT
 INC.
 95-4681287

 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.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denetits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) AMIT PALEY	(i)	260,600.	40,950.	0.	3,013.	9,873.	314,436.	0
CEO & EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0
(2) SAM DORISON	(i)	127,627.	20,000.	0.	4,457.	7,685.	159,769.	0
CHIEF OF STAFF	(ii)	0.	0.	0.	0.	0.	0.	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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Schedule J (Form 990) 2018

Schedule J (Form 990) 2018

95-4681287 Page 3

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.

832113 10-26-18

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Schedule J (Form 990) 2018

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service Name of the organization 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.

Employer identification number 95 - 4681287

OMB No 1545-0047

Open to Public

Inspection

18

THE TREVOR PROJECT INC.

FORM 990, PART VI, SECTION A, LINE 4:

THE ORGANIATION MADE THE FOLLOWING CHANGES TO THEIR BYLAWS:

-NEW YORK, NY WAS ADDED AS A POTENTIAL ALTERNATIVE LOCATION FOR THE

ORGANIZATION'S PRINCIPAL EXECUTIVE OFFICE.

-THE ORGANIZATION'S CHARITABLE PURPOSE WAS NARROWED AND CLARIFIED: ITS

CHARITABLE PURPOSE IS TO END SUICIDE AMONG LESBIAN, GAY, BISEXUAL, QUEER,

AND QUESTIONING (LGBTQ) YOUNG PEOPLE.

-A MAXIMUM NUMBER OF CONSECUTIVE TERMS FOR DIRECTORS WAS INSTITUTED.

-A PROVISION ALLOWING FOR REMOVAL OF DIRECTORS WITHOUT CAUSE WAS ADDED.

-PROVISIONS INSTITUTING AN AD-HOC NOMINATING COMMITTEE, AS WELL AS ALLOWING

FOR ADDITIONAL AD HOC AND STANDING COMMITTEES TO BE FORMED, WERE ADDED.

-A PROVISION PROVIDING FOR THE INSTITUTION OF ONE OR MORE ADVISORY COUNCILS WAS ADDED.

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

THE DRAFT 990 IS REVIEWED BY SENIOR MANAGEMENT AS WELL AS THE AUDIT AND

FINANCE COMMITTEES. THE FINAL DRAFT IS THEN SENT TO THE FULL BOARD OF

DIRECTORS FOR A COMMENT PERIOD OF AT LEAST FIVE DAYS PRIOR TO FILING.

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

THE CEO IS IN CHARGE OF MONITORING THE ANNUAL CONFLICT OF INTEREST

STATEMENTS AND ENFORCING THE CONFLICT OF INTEREST POLICY. BOARD MEMBERS

SIGN CONFLICT OF INTEREST STATEMENTS AT THEIR ANNUAL RETREAT.

F	ORM	990,	PART	VI,	SECTION	в,	LINE	15:					
LH	HA For	Paperwo	ork Reduc	tion Ac	t Notice, see th	e Inst	ructions for	r Form	990 or	990-EZ.	Scheo	lule O (Fo	orm 990 or 990-EZ) (2018)
833	832211 10-10-18												
									41				
1056	6071	4 701	224 7	955		20	18.060	000	THE	TREVOR	PROJECT	INC.	79551

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization THE TREVOR PROJECT INC.	Employer identification number 95-4681287
THE CEO'S PERFORMANCE AND COMPENSATION IS REVIEWED ANNUAL	LY BY THE BOARD'S
EXECUTIVE COMMITTEE AS PART OF AN OBJECTIVE AND INDEPENDE	NT REVIEW PROCESS
THAT INCLUDES BENCHMARKING AGAINST COMPARABLE ORGANIZATIO	NS.
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	OF FORM 990:
CA, NY, AL, AK, AR, CO, CT, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MS, NH,	NJ, NM, NC, ND, OH, OK
OR, PA, RI, SC, TN, UT, VA, WV, WI	

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

THE FORM 1023 AND ALL OTHER INFORMATION RETURN DOCUMENTS ARE AVAILABLE TO

THE PUBLIC EITHER THROUGH WWW.GUIDESTAR.ORG OR UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19:

FINANCIAL STATEMENTS AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE ON

THE ORGANIZATION'S WEBSITE OR UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

IT SERVICES:

PROGRAM SERVICE EXPENSES	429,506.
MANAGEMENT AND GENERAL EXPENSES	30,700.
FUNDRAISING EXPENSES	72,185.
TOTAL EXPENSES	532,391.

OTHER PROFESSIONAL FEES:

PROGRAM SERVICE EXPENSES

MANAGEMENT AND GENERAL EXPENSES 71,165.

FUNDRAISING EXPENSES

TOTAL EXPENSES

832212 10-10-18

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

10560714 701224 7955

42 2018.06000 THE TREVOR PROJECT INC. 1,186,662.

995,635.

119,862.

lame of th	e organizatio	on THE	: TF	REVOR	PROJ	ECT I	NC.					Employer 95-4	identification 4681287	num
TOTAL	OTHER							LINE	11G,	COL	A		1,719	,05
					,		/							1
32212 10-10	-18							43			Sche	dule O (Form	990 or 990-E	Z) (2