

EXTENDED TO MAY 15, 2018

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2016

Department of the Treasury
Internal Revenue Service

- ▶ Do not enter social security numbers on this form as it may be made public.
- ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A For the 2016 calendar year, or tax year beginning **JUL 1, 2016** and ending **JUN 30, 2017**

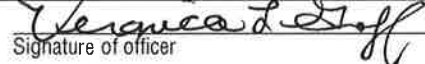
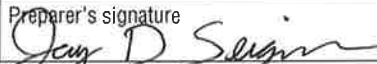
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE CENTER FOR INDIVIDUAL AND FAMILY SERVICES, INC. Doing business as CATALYST LIFE SERVICES Number and street (or P.O. box if mail is not delivered to street address) Room/suite 741 SCHOLL ROAD City or town, state or province, country, and ZIP or foreign postal code MANSFIELD, OH 44907 F Name and address of principal officer: VERONICA L. GROFF SAME AS C ABOVE	D Employer identification number 34-1190641 E Telephone number (419) 756-1717 G Gross receipts \$ 12,935,998. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)() (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.CATALYSTLIFESERVICES.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		
L Year of formation: 1952		M State of legal domicile: OH

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE CENTER ASPIRES TO PROVIDE TO CLIENTS, COMMUNITY, AND STAFF A SAFE, CONFIDENTIAL, AND SUPPORTIVE 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 17 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 17 5 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 714 6 Total number of volunteers (estimate if necessary) 6 16 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. 7b Net unrelated business taxable income from Form 990-T, line 34 7b 0.													
Revenue	8 Contributions and grants (Part VIII, line 1h) 586,412. 437,367. 9 Program service revenue (Part VIII, line 2g) 14,459,367. 12,122,082. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 121,773. 100,855. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 0. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 15,167,552. 12,660,304.	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:50%;">Prior Year</th> <th style="width:50%;">Current Year</th> </tr> </thead> <tbody> <tr> <td>586,412.</td> <td>437,367.</td> </tr> <tr> <td>14,459,367.</td> <td>12,122,082.</td> </tr> <tr> <td>121,773.</td> <td>100,855.</td> </tr> <tr> <td>0.</td> <td>0.</td> </tr> <tr> <td>15,167,552.</td> <td>12,660,304.</td> </tr> </tbody> </table>	Prior Year	Current Year	586,412.	437,367.	14,459,367.	12,122,082.	121,773.	100,855.	0.	0.	15,167,552.	12,660,304.
Prior Year	Current Year													
586,412.	437,367.													
14,459,367.	12,122,082.													
121,773.	100,855.													
0.	0.													
15,167,552.	12,660,304.													
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 98,279. 114,606. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 9,142,871. 10,070,095. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 5,493,334. 3,180,918. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 14,734,484. 13,365,619. 19 Revenue less expenses. Subtract line 18 from line 12 433,068. -705,315.													
Net Assets or Fund Balances	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:60%;"></th> <th style="width:20%;">Beginning of Current Year</th> <th style="width:20%;">End of Year</th> </tr> </thead> <tbody> <tr> <td>20 Total assets (Part X, line 16)</td> <td>10,794,304.</td> <td>9,914,122.</td> </tr> <tr> <td>21 Total liabilities (Part X, line 26)</td> <td>2,819,509.</td> <td>2,372,067.</td> </tr> <tr> <td>22 Net assets or fund balances. Subtract line 21 from line 20</td> <td>7,974,795.</td> <td>7,542,055.</td> </tr> </tbody> </table>		Beginning of Current Year	End of Year	20 Total assets (Part X, line 16)	10,794,304.	9,914,122.	21 Total liabilities (Part X, line 26)	2,819,509.	2,372,067.	22 Net assets or fund balances. Subtract line 21 from line 20	7,974,795.	7,542,055.	
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22 Net assets or fund balances. Subtract line 21 from line 20	7,974,795.	7,542,055.												

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer:  VERONICA L. GROFF, PRESIDENT/ CEO Type or print name and title	Date: May 12, 2018
Paid Preparer Use Only	Print/Type preparer's name: JAY SEIGNEUR Preparer's signature:  Date: 05/11/18 Firm's name: WHITED SEIGNEUR SAMS & RAHE CPAS, LLP Firm's address: 213 SOUTH PAINT STREET CHILLICOTHE, OH 45601-3828 Firm's EIN: 31-0962125 Phone no.: (740) 702-2600	Check if self-employed <input type="checkbox"/> PTIN: P01455483

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

THE CENTER FOR INDIVIDUAL AND FAMILY SERVICES, INC.

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Part VIII Statement of Revenue

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

		(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 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	122,837.			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	314,530.			
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f		437,367.			
Program Service Revenue	Business Code					
	2 a PATIENT FEES & CHARGES FOR SERVICE	624100	10,209,682.	10,209,682.		
	b WORKSHOP SALES/SERVICES/CONTRACTS	624310	1,912,400.	1,912,400.		
	c					
	d					
	e					
	g Total. Add lines 2a-2f		12,122,082.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		54,792.	54,792.		
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	(i) Real				
		(ii) Personal				
		b Less: rental expenses				
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less: cost or other basis and sales expenses		2,250.		
		c Gain or (loss)		-2,250.		
	d Net gain or (loss)		46,063.	46,063.		
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
	b Less: direct expenses	b				
c Net income or (loss) from fundraising events						
9 a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses	b					
c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a					
b Less: cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11 a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions.		12,660,304.	12,222,937.	0.	0.	

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
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	114,606.	114,606.		
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, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	8,196,928.	7,459,204.	737,724.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	139,904.	127,313.	12,591.	
9 Other employee benefits	952,735.	866,989.	85,746.	
10 Payroll taxes	780,528.	710,280.	70,248.	
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	69,212.	62,983.	6,229.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	489,831.	445,746.	44,085.	
12 Advertising and promotion				
13 Office expenses	881,900.	804,313.	77,587.	
14 Information technology				
15 Royalties				
16 Occupancy	332,289.	311,974.	20,315.	
17 Travel	150,665.	137,105.	13,560.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	80,028.	72,825.	7,203.	
20 Interest	1,761.		1,761.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	258,421.	235,163.	23,258.	
23 Insurance	135,603.	123,399.	12,204.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a SUPPLIES	431,562.	403,294.	28,268.	
b PASS-THROUGH SERVICE CO	234,947.	234,947.		
c REPAIR & MAINTENANCE	114,699.	104,376.	10,323.	
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	13,365,619.	12,214,517.	1,151,102.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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