

Florida Department of Environmental Protection CITIZEN SUPPORT ORGANIZATION ANNUAL REPORT

Required Signatures: No Signature
Year: 2019
Citizen Support Organization (CSO) Name: The Barnacle Society, Inc.
Mailing Address: Post Office Box 330579, Coconut Grove, Florida 33233
Telephone Number: 305-442-6866 Website Address (if applicable): www.TheBarnacle.org
Statutory Authority: Section 20.2551, F.S., Citizen support organizations; use of property; audit; public records; partnerships. In summary, the statute specifies the organizational requirements, operational parameters, duties of a CSO to support the Department of Environmental Protection (Department), or individual units of the Department, use of Department property, audit requirements, public records requirements, and authorizes public-private partnerships to enhance lands managed by the Department. Section 258.015, F.S., Citizen support organizations; use of property; audit. In summary, the statute defines a CSO, requires authorization by the Division of Recreation and Parks, and specifies the use of property. This statute authorizes the Partnerships in Parks (PIP) program for state parks, the program's operational parameters, CSO's operational parameters, and donor recognition.
Brief Description of the CSO's Mission:
Participation of the property of the state
The Democle Coniety Inc. is a voluntearnon and the sitions arounded argumentation
The Barnacle Society, Inc. is a volunteer non-profit, citizen-supported organization
created to generate public awareness, education, and financial support for
the preservation and maintenance of The Barnacle Historic State Park.



Florida Department of Environmental Protection CITIZEN SUPPORT ORGANIZATION ANNUAL REPORT

Brief Description of the CSO's Results Obtained:
See Attached List of Accomplishments up to 2018
Brief Description of the CSO's Plans for Next Three Fiscal Years:
See Attached List of Goals for 2019, 2020, 2021
✓ Copy of the CSO's Code of Ethics attached (Model provided; see CSO 2014 instructions)

✓ Certify the CSO has completed and provided to the Department the organization's most recent Internal Revenue Service (IRS) Form 990, 990-EZ, or 990-N/Annual Financial Statement

Accomplishments of The Barnacle Society ~ 2018:

- Hosted a wide variety of fundraising and educational events and programs at The Barnacle:
 - Moonlight Concert Series from September through May
 - Starlight Classic Movie Series (March & November)
 - O Up Past Bedtime Kids' Movie Series (September)
 - Haunted Ballet (October)
 - Shakespeare in the Park (January)
 - o Twice-weekly Yoga by the Sea
 - Annual Lawn Party
 - Commodore's Birthday Party
 - Celebrated 22th Anniversary of Washington's Birthday Regatta Revival (2018)
 - O Annual Celebrations in the Park:
 - Washington's Birthday Regatta (February)
 - Earth Day (April)
 - Woofstock (May)
 - Cars & Cigars Father's Day (June)
 - Old-Fashioned July 4 Picnic
 - Christmas
- Maintain involvement with local community through partnerships with:
 - Grove Merchants
 - Coconut Grove Business Improvement District
 - Coconut Grove Chamber of Commerce
 - Coconut Grove Village Council
 - o and other civic organizations
 - Dade Heritage
 - Rotary
 - The Villagers
 - King Mango
 - Florida Shakespeare Theatre (Shakespeare Miami)
 - Coconut Grove Garden Club
 - Ralph Middleton Munroe Chapter of the Traditional Small Craft Association
 - Little Ladies & Gents
- Updated Strategic Plan with long-range goals.
- · Augment park budget as needed.
- With Grants awarded to The Barnacle Society, funded:
 - Boathouse Hurricane Repairs (2017)
- Funded:
 - o Reprinting of The Commodore's Story by Ralph Munroe and Vincent Gilpin
 - o Projects for National Public Lands Day
 - o Projects for Make a Difference Day
 - Projects for Gandhi Day of Service
 - o Installation of Fire Suppression Systems for both The Barnacle House and the Boathouse (installation begun in 2017)
- Continual funding of:
 - O Park's electronic entrance gate repair and upkeep.
 - O Upkeep of four wooden sailboats, including The Barnacle's Egret.
- Continued to operate the extensive Gift Shop as a fundraising mechanism for the benefit of The Barnacle.
- Redeveloped website and social media outreach program.
- Raised funds for Fire Suppression System for The Barnacle House & The Boathouse
- Maintained a Multi-Generational Boat-building Partnership with South Miami High School Shop Program
- Organized Annual Giving Campaign through Give Miami Day
- Membership Appreciation Lecture

The Barnacle Society's Goals for 2019, 2020, 2021

- · Continue to host a wide variety of fundraising and educational events and programs at The Barnacle:
 - Moonlight Concert Series from September through May
 - Children's Concerts
 - Old Time Dance Series year-round
 - o Starlight Classic Movie Series twice a year
 - Film Festival
 - Up Past Bedtime Kids' Movie Series two to three times per year
 - Art Festivals
 - o Shakespeare in the Park
 - o Haunted Ballet
 - o Twice-weekly Yoga by the Sea
 - Annual Lawn Parties:
 - Commodore's Birthday Party
 - Others as deemed appropriate
 - Annual Celebrations in the Park:
 - Washington's Birthday Regatta
 - Hot Chili, Cool Cars (revisit concept)
 - Earth Day
 - Woofstock (formerly known as Dog Days)
 - Cars & Cigars Father's Day
 - Old-Fashioned July 4 Picnic
 - Chanukah at The Barnacle (revisit concept)
 - Christmas
- Explore hosting other theatrical performances and community events.
- Explore educational endeavors regarding Munroe and his yachts.
- Assist in expanding park's interpretive and outreach programming.
- Continue Boat-building Educational Program.
- Host Upper Level Membership Lecture Event.
- Develop additional programs and events.
- Continue involvement with local community through partnerships with:
 - Grove Merchants
 - Coconut Grove Business Improvement District
 - Coconut Grove Chamber of Commerce
 - Coconut Grove Village Council
 - o and other civic organizations
 - Dade Heritage
 - Rotary
 - The Villagers
 - King Mango Strut
 - Florida Shakespeare Theatre (Shakespeare Miami)
 - What If Works & FIU
 - Coconut Grove Sailing Club
 - Slow Food Miami
 - Coconut Grove Garden Club
 - Ralph Middleton Munroe Chapter of Traditional Small Craft Association
 - Little Ladies & Gents
- Explore additional partnerships with Sailing Community.
- Monitor Success of TBS's Strategic Plan with long-range goals.
- Continue to augment park budget as needed.
- Seek grant funding and major contributions for Park Projects and Programs as needed.
- Continue funding of:
 - O Park's electronic entrance gate repair and upkeep.
 - O Upkeep of four wooden sailboats, including The Barnacle's Egret.
 - o Complete restoration of Wyannie Malone.
- · Continue using Gift Shop as a fundraising mechanism for the benefit of The Barnacle.
- Create on-line Museum Shop.
- Update and improve website and social media outreach program as needed.
- Explore initiating major capital fund-raising program.
- Develop corporate membership/sponsorship outreach program.
- Promote The Barnacle and TBS Membership with renewed zeal.
- Install Fire Suppression Systems in The Barnacle and in the Boathouse.
- Continue Annual Giving Campaign
- Develop Scholarly Munroe Symposium
- Assist in Hurricane Recovery (2017)
- Work with Park on landscape plan for erosion control and handicap accessibility
- Work with Park to restore Micco Pavilion from Hurricane Irma damage
- Work with Park to restore/rebuild Dock from Hurricane Irma damage
- Assist Park with Volunteer Work Days
- Assist Park with Black History Month event

The Barnacle Society, Inc. Code of Ethics

Preamble

- (1) It is essential to the proper conduct and operation of The Barnacle Society, Inc. (herein TBS) that its board members, officers, and employees be independent and impartial and that their position not be used for private gain. Therefore, the Florida Legislature in Section 112.3251, Florida Statutes (F. S.), requires that the law protect against any conflict of interest and establish standards for the conduct of TBS board members, officers, and employees in situations where conflicts may exist.
- (2) It is hereby declared to be the policy of the state that no TBS board member, officer, or employee shall have any interest, financial or otherwise, direct or indirect, or incur any obligation of any nature which is in substantial conflict with the proper discharge of his or her duties for TBS. To implement this policy and strengthen the faith and confidence of the people in Citizen Support Organizations, there is enacted a code of ethics setting forth standards of conduct required of The Barnacle Society, Inc. board members, officers, and employees in the performance of their official duties.

Standards

The following standards of conduct are enumerated in Chapter 112, F.S., and are required by Section 112.3251, F.S., to be observed by TBS board members, officers, and employees.

1. Prohibition of Solicitation or Acceptance of Gifts

No TBS board member, officer, or employee shall solicit or accept anything of value to the recipient, including a gift, loan, reward, promise of future employment, favor, or service, based upon any understanding that the vote, official action, or judgment of TBS board member, officer, or employee would be influenced thereby.

2. Prohibition of Accepting Compensation Given to Influence a Vote

No TBS board member, officer, or employee shall accept any compensation, payment, or thing of value when she/he knows, or, with reasonable care, should know that it was given to influence a vote or other action in which TBS board member, officer, or employee was expected to participate in his or her official capacity.

3. Salary and Expenses

No TBS board member or officer shall be prohibited from voting on a matter affecting his or her salary, expenses, or other compensation as a board member or officer of TBS, as provided by law.

4. Prohibition of Misuse of Position

A board member, officer, or employee of TBS shall not corruptly use or attempt to use one's official position or any property or resource which may be within one's trust, or perform official duties, to secure a special privilege, benefit, or exemption.

5. Prohibition of Misuse of Privileged Information

No TBS board member, officer, or employee shall disclose or use information not available to members of the general public and gained by reason of one's official position for one's own personal gain or benefit or for the personal gain or benefit of any other person or business entity.

6. Post-Office/Employment Restrictions

A person who has been elected to TBS board or office or is employed by TBS may not personally represent another person or entity for compensation before the governing body of TBS of which he/she was a board member, officer, or employee for a period of two years after he/she vacates that office or employment position.

7. Prohibition of Employees Holding Office

No person may be, at one time, both an employee and board member of TBS at the same time.

8. Requirements to Abstain From Voting

A board member or officer of TBS shall not vote in official capacity upon any measure which would affect his/her special private gain or loss, or which he/she knows would affect the special gain or any principal by whom the board member or officer is retained. When abstaining, the board member or officer of TBS, prior to the vote being taken, shall make every reasonable effort to disclose the nature of his/her interest as a public record in a memorandum filed with the person responsible for recording the minutes of the meeting, who shall incorporate the memorandum in the minutes. If it is not possible for the board member or officer of TBS to file a memorandum before the vote, the memorandum must be filed with the person responsible for recording the minutes of the meeting no later than 15 days after the vote.

9. Failure to Observe TBS Code of Ethics

Failure of a board member, officer, or employee of TBS to observe the Code of Ethics may result in the removal of that person from their position. Further, failure of TBS to observe the Code of Ethics may result in the Florida Department of Environmental Protection terminating its Agreement with TBS.

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

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

OMB No. 1545-1150 **2018**

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990EZ for instructions and the latest information.

A	For the	e 2018 calenc	dar year, or tax year beginning , and ending								
В	Check if Address	applicable:	C Name of organization		D Emplo	oyer identification number					
Н	Name ch	(23)	THE BARNACLE SOCIETY, INC.		59	-2662462					
П	Initial ret	urn	Number and street (or P.O. box, if mail is not delivered to street address)	oom/suite	E Teleph	none number					
П	Final ret	urn/terminated	3485 MAIN HIGHWAY		30.	5-442-6866					
П	Amended	d return	City or town, state or province, country, and ZIP or foreign postal code		F Group	Exemption					
П	Application	on pending	COCONUT GROVE FL 33133-5915		Numb						
G	Accour	nting Method:	X Cash Accrual Other (specify) ▶	H Check	ightharpoonup	if the organization is not					
1	Websit		BARNACLE.ORG			ach Schedule B					
J	Tax-exe	empt status (ch	neck only one) — X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527	-0 10		0-EZ, or 990-PF).					
		of organization				*					
L	Add line	es 5b, 6c, and 7	b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets	5							
(Par	t II, colu	mn (B)) are \$50	00,000 or more, file Form 990 instead of Form 990-EZ		. > \$	100,553					
P	art I	Reven	ue, Expenses, and Changes in Net Assets or Fund Balances (se	e the instructi	ons for	Part I)					
		Check i	if the organization used Schedule O to respond to any question in this Part	Carrera arrera am		X					
	1	Contributions,	gifts, grants, and similar amounts received	and different and different and differ	1	43,794					
	2	Program ser	vice revenue including government fees and contracts		2						
	3		dues and assessments		3						
	4	Investment i	ncome		4	25					
	5a	Gross amou	nt from sale of assets other than inventory 5a								
ae	b		r other basis and sales expenses 5b								
	С	a mino mino mino mino mi									
	6	Gaming and fundraising events:									
	a	Gross incom	ne from gaming (attach Schedule G if greater than								
		\$15,000)	6a								
Revenue	b	Gross incom	ne from fundraising events (not including \$ of contribution	s							
Re		from fundrais	sing events reported on line 1) (attach Schedule G if the								
		sum of such	gross income and contributions exceeds \$15,000) 6b	50,131							
	С	Less: direct	expenses from gaming and fundraising events 6c	34,293	<u>3</u>]						
	d	Net income	or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract								
			eporta eporta epirta epirta epirtan partan partan partan partan partan partan epirta epirta epirta epirta esca	en courses grangs po	6d	15,838					
	7a	Gross sales	of inventory, less returns and allowances 7a	6,603							
	b	Less: cost of	f goods sold 7b	2,720	<u> </u>						
	С	Gross profit	or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	3,883					
	8	Other revenu	ue (describe in Schedule O)	ni neseria estrera ger	8						
	9	Total reven	ue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	ani manikani manka	9	63,540					
	10		similar amounts paid (list in Schedule O)		10						
	11		d to or for members		11						
S	12	Salaries, oth	er compensation, and employee benefits		12						
nse	13	Professional	fees and other payments to independent contractors	ero emisserra emissiona emi	13	650					
Expenses	14	Occupancy,	rent, utilities, and maintenance	ia adecesa adecesa ad	14						
ш	15		olications, postage, and shipping	ra parezia parizia pa	15	E0 4EE					
	16		ses (describe in Schedule O)	na manana manana <u>1</u> 55	16	73,455					
	17		nses. Add lines 10 through 16	ni mana mani 🔊	17	74,105					
S	18		leficit) for the year (Subtract line 17 from line 9)	ANT ENGINEERS PROPERTY FOR	18	-10,565					
set	19		or fund balances at beginning of year (from line 27, column (A)) (must agree with			160 500					
Net Assets			figure reported on prior year's return)	en neferens estereis nef	19	168,529					
Net	20		es in net assets or fund balances (explain in Schedule O)	ra parteria partera 50	20	155 064					
_	21	Net assets o	or fund balances at end of year. Combine lines 18 through 20		21	157,964					

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2018)

Form 990-EZ (2018) THE BARNACLE SOCIETY, INC.

5	9-	2	6	62	24	62

F	Part II Balance Sheets (see the instructions for I		anasta is this Ded I	F		X
-	Check if the organization used Schedule O	to respond to any		ginning of year	es inextens	(B) End of year
22	Cash savings and investments			168,586	22	158,037
23	Cash, savings, and investments Land and buildings			0	23	200,007
	Other assets (describe in Schedule O)	perena perena perana ner		0	24	
	Total accore			168,586	25	158,037
	Total liabilities (describe in Schedule O)	mediated foldations foldations were	A	57	26	73
	Net assets or fund balances (line 27 of column (B) must ag	ree with line 21)	MONEY WORKSHOP WORKS	168,529	27	157,964
7	Part III Statement of Program Service Accor		ee the instructions for			
	Check if the organization used Schedule O			· -		Expenses
Wh	nat is the organization's primary exempt purpose?			Introduct Colorest	(Red	quired for section
	SEE SCHEDULE O				275000000000	c)(3) and 501(c)(4)
Des	scribe the organization's program service accomplishments for	each of its three la	rgest program services,		1/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2	nizations; optional for
as	measured by expenses. In a clear and concise manner, descri	ibe the services pro	vided, the number of		othe	
per	rsons benefited, and other relevant information for each progra	m title.			(100,000,000	
28	SEE SCHEDULE O					
	AND DESIGN CONTROL CON					
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	(Grants \$) If this amount includes	foreign grants, che	ck here	• • • • • • • • • • • • • • • • • • •	28a	56,931
29					5	
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	THE COURT CO	PERSONAL PROPERTY CONTROL OF THE				
	(Grants \$) If this amount includes	foreign grants, che	ck here	▶ □	29a	
30						
	Cla premi parera parera parera parera parera parera parera parera parera perina		AND DESCRIPTION OF THE PERSON OF THE PERSON			
			THE RESIDENCE PRODUCES PRODUCED CONTROLS	v 1000000000000000000000000000000000000		
	(Grants \$) If this amount includes	s foreign grants, che	ck here		30a	
31	Other program services (describe in Schedule O)	DESCRIPTION DESCRI		i iniminani iniminani-ining		
	(Grants \$) If this amount includes	s foreign grants, che	ck here	▶	31a	
32	Total program service expenses (add lines 28a through 31a			<u> </u>	32	56,931
F	Part IV List of Officers, Directors, Trustees, and Key I Check if the organization used Schedule O to res	Employees (list eac	h one even if not compe	nsated — see the	e instruc	tions for Part IV)
	Check if the organization used deficulte o to les	(b) Average	(c) Reportable	(d) Health ber	nefits.	
	(a) Name and title	hours per week	compensation (Forms W-2/1099-MISC)	(d) Health ber contributions to e benefit plans,	mployee	(e) Estimated amount of other compensation
		devoted to position	(if not paid, enter -0-)	deferred compe	nsation	outer compensation
į	JOHN PALENCHAR	B	000			
_ 1	PRESIDENT	6.00	0		0	(
\$	SWEET PEA ELLMAN	40				
	1ST VICE PRESIDENT	4.00	0		0	(
as 45	LEE TAYLOR	8				
_2	2ND VICE PRESIDENT	4.00	0		0	30
000 100	JOHN W. POWERS	20 100 100 100 100	500			9
_	TREASURER	8.00	0		0	(
59 59	TERESA (TEE) SORRENTINO	45				
_	RECORDING SECRETARY	6.00	0		0	(
acr 463	LILIAN A. WALBY	8 72 7272	727		700	
-	CORRESPONDING SEC	6.00	0		0	(
	LOLLY ANDERSON	2 202	_		2	
_	DIRECTOR	2.00	0		0	
	ROBERT D. BRENNAN	40				
_	DIRECTOR	2.00	0		0	ļ
35 (3	LOUIS MICHAEL DEL BORRELLO	All controls	727		700	,
100	DIRECTOR	2.00	0		0	
2012	VICKI KATZ	28 <u>28</u> 120120	500		350	9
_	DIRECTOR	2.00	0		0	
er si	JON PEATTIE	40			.cases	Allen
_	DIRECTOR	2.00	0		0	
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I	DIRECTOR	2.00	0		0	

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THE BARNACLE SOCIETY, INC.

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Pa	art V Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V.) Check if the organization used Schedule O to respond to any question in the contract statement of the contract statement requirements.	in the nis Part V		П
3 1	modulotto to that v., officer in the organization about confound to the respond to any question in the	no r dre v	Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		×
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			
•	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
	change on Schedule O. See instructions	34		X
35a	and the state of t	1 Makabat Makabat		
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		X
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
C	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,	s someone someone		
	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			5000
	during the year? If "Yes," complete applicable parts of Schedule N	36	_	X
37a	Description of the control of the co	200-0		١,,
b	Did the organization file Form 1120-POL for this year?	37b	_	X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			37
1000	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
b	The strategy repetute representation of the control	-		
39	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9 39a			
a b	Initiation fees and capital contributions included on line 9 Gross receipts, included on line 9, for public use of club facilities 39b	-		
40a				
400	section 4911 ► ; section 4912 ► ; section 4955 ►			
b	SUPPLIES CONTROL A, 12 CONTROL AND	*		
O la	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year			
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed	1 (61.61) (61.61)		
	on organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line			
	40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter	100		x
44	transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed ▶ FL	40e	1	
41 42a	List the states with which a copy of this return is filed FL The organization's books are in care of JOHN W. POWERS Telephone no.	▶ 305-44	4-4	286
420	3803 LITTLE AVENUE		77	200
	Located at ▶ COCONUT GROVE FL ZIP + 4 ▶	33133-	641	2
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
2 21 0	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	1	X
	If "Yes," enter the name of the foreign country ▶			5,000
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and	*		
	Financial Accounts (FBAR).			
C	At any time during the calendar year, did the organization maintain an office outside the United States?	42c		X
	If "Yes," enter the name of the foreign country ▶			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here	1	1011111	
	and enter the amount of tax-exempt interest received or accrued during the tax year	43	Т	T
-			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be	2.2		v
	completed instead of Form 990-EZ	44a		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be	446		v
920	completed instead of Form 990-EZ		\vdash	X
C	Did the organization receive any payments for indoor tanning services during the year?	44c		1
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an	44d		
45a	explanation in Schedule O Did the organization have a controlled entity within the meaning of section 512(b)(13)?	150		X
45a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? Did the organization receive any payment from or engage in any transaction with a controlled entity within the	458		1
J	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			
		45b		Х
	Form 990-EZ. See instructions	1430		

Form 990-EZ (2018)

THE BARNACLE SOCIETY, INC.

59-2662462

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			- A						$\overline{}$		_
46	Did the	organization engage, directly or indirectly, in politic	cal campaign activitie	s on behalf o	of or in oppo	sition			Ye	es No	0_
	to candi	dates for public office? If "Yes," complete Schedul	e C, Part I						46	X	
Pa	rt VI	Section 501(c)(3) Organizations Onl All section 501(c)(3) organizations must ar		–49b and 5	52, and con	nplete the	tables for li	nes			
		50 and 51. Check if the organization used Schedule C) to respond to any	auestion in	n this Part \	/ I				Г	1
									Ye		0
									47	x	
48		ganization a school as described in section 170(b			edule E	u ensuran ensura			48	X	
49a b		organization make any transfers to an exempt no was the related organization a section 527 organ							49a 49b	X	_
50		e this table for the organization's five highest con	CONTRACTOR PROPERTY AND ADDRESS AND ADDRES		officers, dire			one L	+30		_
*********	employe	es) who each received more than \$100,000 of co	mpensation from the	organization	. If there is r	one, enter	"None."				
		(a) Name and title of each employee	(b) Average hours per week devoted to position	compe	oortable nsation 2/1099-MISC)	contributions benefit	h benefits, s to employee blans, and ompensation		mated ar		f
NC	NE	neris meris meris misrii kolorii misrii mirrii mirrii misrii	S. 205								_
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					3						_
	an expense of		y 430								
f	Total nu	mber of other employees paid over \$100,000	1 DISTRICT DISTRICT DESCRIPTION DES)	•			-			_
51		e this table for the organization's five highest com 0 of compensation from the organization. If there			s who each	received mo	ore than				
	ψ100,00	(a) Name and business address of each independent			(h) Typ	e of service		(c) C(ompensa	tion	_
		(a) Hame and business address of each independent	, contractor		(6) 190	e or service		(0) 00	лпрепои		
NO	NE	ODETS CONCES CONCES CONCES CONCES CONCES CONCES CONCES	. 613,673 613,684 633,684 693								
	n organia or	mera mera mera mera mera mera mera mera	n premerro premerro mem	ento entratro							_
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a mere		NATES CONTEST CONTEST CONTEST CONTEST CONTEST CONTEST CONTEST CONTEST		arra orazarra			ų.				_
d 52		imber of other independent contractors each receiver organization complete Schedule A? Note: All sec	See a se suitante suoto mandocumote	ations must	attach a						-
JZ		ed Schedule A	lion 301(c)(3) organiz	ations must	attacii a			X	Yes	No	
		of perjury, I declare that I have examined this return, ind d complete. Declaration of preparer (other than officer) i						dge and	belief, it	is	
				9.8	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	74.97 95.28					_
Sign	l i	Signature of officer JOHN W. POWERS		ят	EASURE						
Here		Type or print name and title			<u> </u>						-
		rint/Type preparer's name	Preparer's signature	TAXPAYER'	S COPY	Date	Check	if	PTIN		
Paid	100	USSELL C. FERGUSON	10011 7 3			05/2		02.1533/2012.02.0	P00853	Measure Voltaile	_
Prep Use	0-b/	irm's name RUSSELL C. FERGU					Firm's EIN	20-	8071	.325	_
			34741-7612				Phone no. 3	05-6	65-4	926	
May	the IRS	discuss this return with the preparer shown above	? See instructions		** ****** *****			▶ X	Yes	□ N ₁	_
								Form	990-E	-Z (201	8)

Part II	Charle if the arganization used Schodule O to		augetien in this Dort	H ^g		
	Check if the organization used Schedule O to	respond to any	7	ginning of year		(B) End of year
22 Cash savir	ngs, and investments			0	22	(b) Life of year
23 Land and b				0		
	ts (describe in Schedule O)	endro menero menero men	State displacation displaces	0		
25 Total asse		acetta inacetta hasconia hasc		0	777.3	C
26 Total liabi	lities (describe in Schedule O)		terr transfer trans	0		C
	or fund balances (line 27 of column (B) must agree			0	27	C
Part III	Statement of Program Service Accom	plishments (se	e the instructions for	Part III)		
	Check if the organization used Schedule O to	respond to any	question in this Part	Ш <u></u> Ц		Expenses
What is the org	ganization's primary exempt purpose?				(Re	quired for section
					501	(c)(3) and 501(c)(4)
	ganization's program service accomplishments for e				orga	anizations; optional for
	y expenses. In a clear and concise manner, describ		vided, the number of		othe	ers.)
persons benefit	ed, and other relevant information for each progran	n title.				
28	reas conceas conceas conceas consens consens consens consens consens con	entra presenta membro mem	erra eramanna erramadra erremadra erremad	no emigrados emigrados emigra		
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	mare minute m	gang panana sagana san			****	
(Grants \$) If this amount includes	foreign grants, che	ck here	01 101033324	28a	
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1000 1000000 100		CACAGOS ANCACAGOS ACEMBRAS ACEMB				
(O					20-	
(Grants \$) If this amount includes				30a	
(Grants \$	ram services (describe in Schedule O)) If this amount includes		ck here		31a	
100000000000000000000000000000000000000	ram service expenses (add lines 28a through 31a)		CK Hele		31a	
Part IV	List of Officers, Directors, Trustees, and Key E	mployees (list eac	h one even if not compe	nsated — see th		ctions for Part IV)
	Check if the organization used Schedule O to resp	AND THE RESERVE AND THE PARTY OF THE PARTY O	n in this Part IV (c) Reportable	fab House Lo		
	(a) Name and title	(b) Average hours per week	compensation (Forms W-2/1099-MISC)	(d) Health bei	neπts, employee	(e) Estimated amount of
	, ,	devoted to position	(if not paid, enter -0-)	benefit plans, deferred compe	and nsation	other compensation
MARY SC	OTT RUSSELL		- 10 - T	77.		
DIRECTOR	\ :	2.00	0		0	c
PAMELA .	J. SHLACHTMAN					
DIRECTOR		2.00	0		0	C
COLLEEN	STOVALL					
DIRECTOR	l.	2.00	0		0	C
BILL TE	NNEY	area desarra				
DIRECTOR	L	2.00	0		0	C
	WEIR-LATTY					
DIRECTOR		2.00	0		0	С
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SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

2018

Open to Public Inspection

Name of the organization

THE BARNACLE SOCIETY, INC

Employer identification number 59-2662462

			THE DAKWACLE	SOCIETY, INC.			39-266	2402
Pa	rt I	Reas	on for Public Charity	Status (All organizations	must c	omplete	this part.) See instructio	ns.
The o	orga	nization is not	a private foundation becaus	e it is: (For lines 1 through 12,	check only	y one box.)	
1	П	A church, co	nvention of churches, or ass	ociation of churches described	in section	n 170(b)(1)(A)(i).	
2	П	A school des	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E (Forr	n 990 or 9	990-EZ).)		
3	П	A hospital or	a cooperative hospital servi	ce organization described in se	ection 170	D(b)(1)(A)(iii).	
4	П	A medical re	search organization operated	in conjunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter the h	ospital's name,
		city, and stat	e:					
5	П			of a college or university owned	or operat	ed by a g	overnmental unit described in	of the last the last the last of the last to
		section 170	(b)(1)(A)(iv). (Complete Part	II.)		-		
6	П			overnmental unit described in	section 1	70(b)(1)(A)(v).	
7		•	ion that normally receives a section 170(b)(1)(A)(vi). (C	substantial part of its support fromplete Part II.)	om a gov	ernmental	unit or from the general public	
8	П		2 43 123 43 5 3	170(b)(1)(A)(vi). (Complete Par	t II Y			
9	H			cribed in section 170(b)(1)(A)(ed in coni	unction with a land-grant collec	ne
- 	ш	A RESIDENCE - SOUTH - DEPARTMENT		of agriculture (see instructions).	manufacture and the second second	Annual Control of the Control	Therefore the first of the seat for the contract of the seat of th	,
10	Χ	receipts from	activities related to its exem) more than 33 1/3% of its sup opt functions—subject to certain	exception	ns, and (2)	no more than 33 1/3% of its	oss
	_	101	· -	nd unrelated business taxable ir 0, 1975. See <mark>section 509(a)(2)</mark>			51	
11	Ц	An organizati	on organized and operated	exclusively to test for public saf	ety. See	section 50	09(a)(4).	
12	Ш			exclusively for the benefit of, to	•		77-7-10-10-10-10-10-10-10-10-10-10-10-10-10-	
				zations described in section 50				17 1 Sec.
			N7	nat describes the type of suppo	500			
	a			erated, supervised, or controlled	TO THE PERSON	The state of the s		ng
				ver to regularly appoint or elect omplete Part IV, Sections A a		or the air	ectors or trustees of the	
	b			pervised or controlled in conne		its sunno	ted organization(s) by having	
	D			ting organization vested in the				ed
			그 보게 되는 이번 얼마나 없는 그들은 것이 되는 아니라면서 되었다. 그런 보이지 않는 것이 되는 아니라 그 그리고 되어 있을 때문에 보았다.	Part IV, Sections A and C.	sumo por	Jon's that	solutor of manage the support	
	С	Type III	functionally integrated. A s	supporting organization operated structions). You must complete	d in conne	ection with	, and functionally integrated w A. D. and E.	ith,
	d			I. A supporting organization ope				on(s)
		that is no	ot functionally integrated. The	e organization generally must s	atisfy a di	stribution	requirement and an attentiven	0.0023 1722 9
	е	Check th	is box if the organization rec	eived a written determination from the communication and the communication allowed the communication and the communication are communication are communication and the communication are communication are communication and the communication are communication are communication are communication and the communication are communication are communication are communication are communication are communication and communication are	om the IR	S that it is		
	f		mber of supported organizati					
	g	Provide the f	following information about the	ne supported organization(s).		ni arangga ang		n spread
(i)	Nam	e of supported	(ii) EIN	(iii) Type of organization	(N) Is the	organization	(v) Amount of monetary	(vi) Amount of
		anization	15 × 9 / 200 × 200	(described on lines 1-10	listed in yo	ur governing	support (see	other support (see
				above (see instructions))		ment?	instructions)	instructions)
					Yes	No		
(A)								
(B)								
(C)								
(D)								
(E)								
Total					1			

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.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total Amounts from line 4 Gross income from interest, dividends, payments received on securities loans. rents, royalties, and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 12 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) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 14 14 Public support percentage from 2017 Schedule A, Part II, line 14 15 16a 33 1/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(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.)

Sec	tion A. Public Support			14000 Br. House Mr. \$1000 GBL House Section 100 Br. House		,	
Caler	ndar 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.")	18,241	14,076	47,164	41,646	43,794	164,921
2	Gross receipts from admissions, merchandise sold 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	57,736	79,378	61,653	43,692	56,734	299,193
4	Tax revenues levied 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	42,645	45,228	39,747	44,822	49,304	221,746
6	Total. Add lines 1 through 5	118,622	138,682	148,564	130,160	149,832	685,860
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						,
С	Add lines 7a and 7b					2	
8	Public support. (Subtract line 7c from line 6.)						685,860
	tion B. Total Support		is a second of T	3 2 2 2 3 2 5 T	soo saa see	100 E-200	
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	118,622	138,682	148,564	130,160	149,832	685,860
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	24	25	23	25	25	122
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	24	25	23	25	25	122
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						ž
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	118,646	138,707	148,587	130,185	149,857	685,982
14	First five years. If the Form 990 is for the	organization's first,	second, third, fou	rth, or fifth tax yea	ras a section 501	has been record	
	organization, check this box and stop here	е	ina menina menina mino			nadioria radioria radioria rad	
Sec	tion C. Computation of Public Su	upport Percent	age				
15	Public support percentage for 2018 (line 8,	, column (f), divided	l by line 13, colum	n (f))	r telepotativa telepotativa telepotativa	15	99.98 %
16	Public support percentage from 2017 Sche					16	99.98 %
Sec.	tion D. Computation of Investme	A SECULAR AND SECULAR		2 929			
17	Investment income percentage for 2018 (li			, column (f))		School and the second s	<u>%</u>
18	Investment income percentage from 2017		2	14 and line 15 io			%
19a	33 1/3% support tests—2018. If the organization of the support tests—2018, if the supp						▶ X
b	33 1/3% support tests—2017. If the organ						CACACANA ANGARIAN
***	line 18 is not more than 33 1/3%, check th			A PARKET NAME OF THE PARKET OF		Control of Comments Control of the C	▶ □
20	Private foundation. If the organization did	A LOCAL CONTRACTOR OF THE CONT					

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

	on an employing organizations			
			Yes	No
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.	1		
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).	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.	3a		
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.	3b		
С	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.	3c		0
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.	4a		
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.	4b		
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.	4c		
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).	5a		
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?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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.	6		
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).	7		
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).	8		
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.	9a		
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.

supporting organizations)? If "Yes," answer 10b below.

determine whether the organization had excess business holdings.)

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**.

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

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

9b

9c

10a

10a

reasons for the organization's position that its supported organization(s) would have engaged in these

activities but for the organization's involvement.

- Parent of Supported Organizations. Answer (a) and (b) below. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

2a		
2b		
3a		
3b	00 or 990-	

Schedule A (Form 990 or 990-EZ) 2018 THE BARNACLE SUCLETY, INC.		59-2662	46 ∠ Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	janizat	ions	
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on No	ov. 20, 19	970 (explain in Part VI). S	See
instructions. All other Type III non-functionally integrated supporting organizations must	st comple	ete Sections A through E	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 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		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):	350		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionally integrated	Type III	supporting organization (see

Schedule A (Form 990 or 990-EZ) 2018

instructions).

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) 5 6 Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive 8 (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 (iii) (i) (ii) Underdistributions Section E - Distribution Allocations (see instructions) **Excess Distributions** Distributable Pre-2018 Amount for 2018 Distributable amount for 2018 from Section C, line 6 Underdistributions, if any, for years prior to 2018 2 (reasonable cause required-explain in Part VI). See instructions. 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. Distributions for 2018 from Section D, line 7: a Applied to underdistributions of prior years b Applied to 2018 distributable amount c Remainder. Subtract lines 4a and 4b from 4. 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. Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2019. Add lines 3j and 4c Breakdown of line 7: a Excess from 2014 b Excess from 2015 c Excess from 2016 d Excess from 2017 e Excess from 2018

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Forn	n 990 or 990-EZ) 2018	$ ext{THE}$	BARNACLE	SOCIETY,	INC.	59-2662462	Page 8
Part VI	Supplemental III, line 12; Part B, lines 1 and 2 3a, and 3b; Par	Information IV, Section A ; Part IV, Section V, line 1; Part	Provide the end, lines 1, 2, 3 ction C, line 1; art V, Section	explanations red b, 3c, 4b, 4c, 5 Part IV, Section B, line 1e; Part	quired by Part II a, 6, 9a, 9b, 9c, on D, lines 2 and V, Section D, Ii	, line 10; Part II, line 17a or 11a, 11b, and 11c; Part IV, d 3; Part IV, Section E, lines nes 5, 6, and 8; and Part V, See instructions.)	17b; Part Section 1c, 2a, 2b,
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Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2018

Employer identification number

THE BARNACLE SOCIETY, INC. 59-2662462 Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-F7 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule $|\mathbf{X}|$ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering) "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Employer identification number Name of organization THE BARNACLE SOCIETY, INC. 59-2662462 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (a) (c) Total contributions Name, address, and ZIP + 4 Type of contribution No. **ANONYMOUS** 1 Person VARIOUS ADDRESSES Payroll 21,210 Noncash FL 33133 MIAMI (Complete Part II for noncash contributions.) (a) (c) Name, address, and ZIP + 4 Total contributions Type of contribution No. GIVE MIAMI DAY 2018 2 THE MIAMI FOUNDATION Person 40 N. W. 3RD STREET, STE 305 Payroll 5,173 Noncash FL 33128 **MIAMI** (Complete Part II for noncash contributions.) (a) Name, address, and ZIP + 4 Total contributions Type of contribution No. Person Payroll Noncash (Complete Part II for noncash contributions.) (c) (a) Name, address, and ZIP + 4 Type of contribution Total contributions No. Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (c) Name, address, and ZIP + 4 Total contributions Type of contribution No. Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (b) (c) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

<u> 2018</u>

Open to Public Inspection

Name of the organization	INZ TAIC				Employer identificat	
Part I Fundraising Activities. Complete if		nn an	swer	ed "Yes" on Form 9		
Form 990-EZ filers are not required to				ed res sirroinires	o, rarry, mic	distriction
1 Indicate whether the organization raised funds through a	ny of the followin	g activ	ities.	Check all that apply.		
a Mail solicitations	e Solicitation	of no	n-gov	ernment grants		
b Internet and email solicitations	f Solicitation	of go	vernn	nent grants		
c Phone solicitations	g 🔲 Special fur	ndraisi	ng ev	ents		
d In-person solicitations						
2a Did the organization have a written or oral agreement workey employees listed in Form 990, Part VII) or entity	ith any individual	(includ	ding o	fficers, directors, trustees,		☐ Yes ☐ No
b If "Yes," list the 10 highest paid individuals or entities (fu compensated at least \$5,000 by the organization.					ndraiser is to be	☐ Tes ☐ NO
compensated at least \$5,000 by the organization.			id fund-		(v) Amount paid to	(vi) Amount paid to
(i) Name and address of individual	(ii) Activity	custo	have ody or	(IV) Gross receipts	(or retained by) fundraiser listed in col. (i)	(or retained by) organization
or entity (fundraiser)	(1) / (0)		rol of utions?	from activity		
		Yes	No		,	723
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3 List all states in which the organization is registered or li-	censed to solicit	contrib	utions	or has been notified it is	exempt from	•
registration or licensing.						
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Schedule G (Form 990 or 990-EZ) 2018 THE BARNACLE SOCIETY, INC. Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000 (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events COMMODORE BD MOONLIGHT NONE (add col. (a) through col. (c)) (event type) (event type) (total number) Revenue 25,691 8,591 34,282 1 Gross receipts 2 Less: Contributions 3 Gross income (line 1 minus 8,591 34,282 25,691 line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 12,638 2,141 14,779 9 Other direct expenses 14,779 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) 1 Gross revenue 2 Cash prizes Expenses 3 Noncash prizes Direct 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? b If "Yes," explain:

Sche	dule G (Form 990 or 990-EZ) 2018 THE BARNACLE SOCIETY, INC. 59	-2662462	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity	ster processer processer	
	formed to administer charitable gaming?	nam merenam merasan	Yes No
13	Indicate the percentage of gaming activity conducted in:		
а	The organization's facility	13a	%
b	An outside facility	101	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and		303
0.51	records:		
	1000/03.		
	Name ▶		
	Name P	CEN CONTROL CONTROLS	28/34/458/3- 42
	Address		
	Address •		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
ısa	2		Yes No
b	ff "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the		☐ 163 ☐ NO
D	amount of gaming revenue retained by the third party > \$		
^	If "Yes," enter name and address of the third party:		
С	in res, enter hame and address of the tillid party.		
	Name ▶		
	Name P	that enalestes enalestes s	SERENCE RE
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16	Gaming manager information:		
	Curring manager information.		
	Name ▶		
	Name •		
	Gaming manager compensation ▶ \$		
	Description of services provided ▶		
	taring the second control of the con	nena inanannenina ananor	
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?		Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or	nem memorane memoran	
	spent in the organization's own exempt activities during the tax year ▶ \$		
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, column	ns (iii) and (v); and
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional		
	See instructions.		
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SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

2018

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

59-2662462

Department of the Treasury Internal Revenue Service

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

INC.

Name of the organization

THE BARNACLE

SOCIETY,

FORM 990-EZ, PART I, LINE 16 - OTHER EXPENSES DESCRIPTION AMOUNT **EXPENSES** \$ 966 NEWS PACKET WEBSITE \$ 2,348 \$ ADVERTISING 3,820 \$ CREDIT CARD FEES 2,033 \$ DUES AND SUBSCRIPTIONS 150 \$ **INSURANCE** 315 \$ BOAT MAINTENANCE 5,018 \$ CAPITAL OUTLAY 4,935 \$ 1,756 OTHER MAINTENANCE \$ STORAGE 2,011 FIRE SUPRESSION \$ 34,288 **HURRICANE** \$ 8,923 \$ ORGANIZATION BRANDING 2,875 \$ STARLIGHT MOVIE 873 **MEMBERSHIPS** \$ 101

\$

\$

TOTAL

2,753

73,455

290

FORM 990-EZ, PART II, LINE 26 - OTHER LIABILITIES

DESCRIPTION

BEG. OF YEAR END OF YEAR

ACCOUNTS PAYABLE AND ACCRUED EXPENSES

57 \$

73

OTHER COSTS

SALES TAX

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PALT.		L J P	- 1