

**Florida Department of Environmental Protection** 

# CITIZEN SUPPORT ORGANIZATION 2014 REPORT

IMPLEMENTATION OF COMMITTEE SUBSTITUTE SENATE BILL 1194

Citizen Support Organization (CSO) Name: <u>Friends of MacArthur Beach State Park, Inc.</u> Mailing Address: <u>10900 Jack Nicklaus Drive, North Palm Beach, FL 33408</u> Telephone Number: <u>561-776-7449</u> Website Address (if applicable): <u>www.macarthurbeach.org</u>

# **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:**

The Friends of MacArthur Beach State Park is a non-profit corporation with a mission of generating supplemental resources to preserve, restore, and interpret the natural and cultural assets of the Park for present and future generations.

# **Brief Description of the CSO's Results Obtained:**

1) Jr. Friends set up a system for collecting and recycling used fishing line, recruited more student volunteers, and provided new activities/highlights during Park events.

- 2) Developed new events and programs to showcase the new Natural Science Education and Nature Centers.
- 3) Submitted 51 grant applications to support natural science education.

4) Increased activity and traffic to the Park using Facebook, our website, a new calendar brochure and scheduled media releases.

- 5) Developed a video and information promotional package.
- 6) Held seven events.

7) Identified 4 new board members, matching skill sets with board needs.

# **Brief Description of the CSO's Plans for Next Three Fiscal Years**:

1) Continue to raise community awareness of the Park through a concentrated marketing, public-relations and mediacoverage campaign.

- 2) Increase activity to and enhance the quality of www.macarthurbeach.org.
- 3) Prepare an annual financial plan and budget to assure that funds are available as needed for Park requirements.
- 4) Consider/evaluate other types of special events and fundraisers to continue to meet Park needs.

5) Continue to identify and elect new board members to enhance the Friends and support John D. MacArthur Beach State Park.

# Copy of the CSO's Code of Ethics attached

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

# FRIENDS OF MACARTHUR BEACH STATE PARK, INC. CODE OF ETHICS

# **PREAMBLE**

- (1) It is essential to the proper conduct and operation of Friends of MacArthur Beach State Park, Inc. (herein "CSO") 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 Statute (Fla. Stat.), requires that the law protect against any conflict of interest and establish standards for the conduct of CSO 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 CSO 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 the CSO. 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 Friends of MacArthur Beach State Park, Inc. board members, officers, and employees in the performance of their official duties.

# **STANDARDS**

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

# 1. Prohibition of Solicitation or Acceptance of Gifts

No CSO 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 the CSO board member, officer, or employee would be influenced thereby.

# 2. Prohibition of Accepting Compensation Given to Influence a Vote

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

# 3. Salary and Expenses

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

# 4. Prohibition of Misuse of Position

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

# 7. Prohibition of Employees Holding Office

No person may be, at one time, both a CSO employee and a CSO board member at the same time.

# 8. Requirements to Abstain From Voting

A CSO board member or officer shall not vote in official capacity upon any measure which would affect his or her special private gain or loss, or which he or she knows would affect the special gain or any principal by whom the board member or officer is retained. When abstaining, the CSO board member or officer, prior to the vote being taken, shall make every reasonable effort to disclose the nature of his or 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 CSO board member or officer 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 CSO Code of Ethics

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

Approved by the Board of Directors July 20, 2014

MARY S. HOPKINS, CPA 9121 N MILITARY TRL STE 222 PALM BEACH GARDENS, FL 33410

FRIENDS OF MACARTHUR BEACH STATE PARK, INC. 10900 STATE ROAD 703 NORTH PALM BEACH, FL 33408

# MARY S. HOPKINS, CPA 9121 N MILITARY TRL STE 222 PALM BEACH GARDENS, FL 33410 561-694-1662 hopkinscpa@aol.com

June 27, 2014

#### CONFIDENTIAL

FRIENDS OF MACARTHUR BEACH STATE PARK, INC. 10900 STATE ROAD 703 NORTH PALM BEACH, FL 33408

Dear :

We have prepared the following returns from information provided by you without verification or audit.

Return of Organization Exempt From Income Tax (Form 990)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

Tax professionals, like all providers of personal financial services, are now required by law to inform their clients of their policies regarding the privacy of client information. Our firm has been, and continues to be, bound by professional standards of confidentiality that are even more stringent than those required by law. We have always protected your right to privacy.

#### **Types of Nonpublic Personal Information We Collect**

We collect nonpublic personal information that is either provided by you or obtained with your authorization.

#### Parties to Whom We Disclose Information

We do not disclose any nonpublic personal information obtained in the course of our practice except as required or permitted by law for both current and former clients. Permitted disclosures include, for instance, providing information to our employees, and in limited situations, to unrelated third parties who need to know that information to assist us in providing services to you. In all such situations, we stress the confidential nature of information being shared.

#### Protecting the Confidentiality and Security of Current and Former Clients' Information

We retain records relating to professional services that we provide so that we are better able to

assist you with your professional needs and, in some cases, to comply with professional guidelines. In order to guard your nonpublic personal information, we maintain physical, electronic, and procedural safeguards that comply with our professional standards.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

MARY S. HOPKINS, CPA

# **Filing Instructions**

# FRIENDS OF MACARTHUR BEACH STATE PARK, INC.

# **Exempt Organization Tax Return**

# **Taxable Year Ended December 31, 2013**

Date Due: August 15, 2014

**Remittance:** None is required. Your Form 990 for the tax year ended 12/31/13 shows no balance due.

Mail To: Department of the Treasury Internal Revenue Service Center Ogden, UT 84201-0027

> If a private delivery service is used, mail to: OSPC 1973 N. Rulon White Blvd. Ogden, UT 84404

**Signature:** The return should be signed and dated on Page 1 by an officer representing the organization.

**Other:** Initial and date the copy of the return, and retain it for your records.

FRIENDS OF MACARTHUR BEACH STATE PARK, INC. 10900 STATE ROAD 703 NORTH PALM BEACH, FL 33408

Department of the Treasury Internal Revenue Service Center Ogden, UT 84201-0027

FRIE	NDS 06/27/2014	9:23 AM	Return of Organization Exempt From Income Tax		OM	B No. 1545-0047
For	m 990	J	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private found	ations)		2013
	artment of the Trea nal Revenue Serv		▶ Do not enter Social Security numbers on this form as it may be made public.			en to Public
			► Information about Form 990 and its instructions is at www.irs.gov/form990.		1.11	nspection
B	Check if applicable	A 11	forganization FRIENDS OF MACARTHUR BEACH	D Emp	oloyer identifica	ition number
( <sup></sup> )	Address change		STATE PARK, INC.			
	Name change		usiness As FRIENDS OF MACARTHUR BEACH STATE PA	65	5-0196	497
	Initial return		and street (or P.O. box if mail is not delivered to street address) Room/suite		phone number	
$\square$	Terminated		00 STATE ROAD 703	56	51-776	-7449
		-	TH PALM BEACH FL 33408	- 0	····	1 000 220
	Amended return	F Name a	nd address of principal officer:	G Gross r	receipts \$	1,009,339
	Application pendin	g	PHANIE PEW H(a) Is this a group	up return fo	r subordinates?	Yes X No
			00 STATE ROAD 703 H(b) Are all subo	ordinates ir	ncluded?	Yes No
		NOF	TH PALM BEACH FL 33408	attach a lis	st. (see instruct	ions)
1	Tax-exempt statu	s: X	501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or 527			
<u>J</u>	Website:	<u>N/A</u>	H(c) Group exer	nption num	nber 🕨	<u> </u>
	Form of organizati	-	rporation Trust Association Other ► L Year of formation:		M State of	iegal domicile; <b>FL</b>
P		Summary				
•			e organization's mission or most significant activities:			• • • • • • • • • • • • • • • • • • • •
nce	501	PORT	MACARTHUR STATE PARK AND ITS FUNCTIONS			•••••
rna	•	· • · · · • • · · · · · · ·	•••••••••••••••••••••••••••••••••••••••		•••••	••••••
Activities & Governance	2 Check	this box 🕨	if the organization discontinued its operations or disposed of more than 25% of its net asse	ts.	•••••	
୍ଷ			nembers of the governing body (Part VI, line 1a)	1	30	
es			ident voting members of the governing body (Part VI, line 1b)		30	
iviti	5 Total n	umber of in	dividuals employed in calendar year 2013 (Part V, line 2a)	5		
Act	6 Total n	umber of vo	lunteers (estimate if necessary)	6	300	
			siness revenue from Part VIII, column (C), line 12	. 7a	<u>ا</u>	0
	b Net uni	related busi	ness taxable income from Form 990-T, line 34	. 7b		0
	8 Contrib	utions and	grants (Part VIII, line 1h)61	<u>,07</u>		urrent Year 645,041
Revenue	9 Progra	m service re	evenue (Part VIII, line 2g)	7,18		225,378
eve				6,89		13,859
Ř	11 Other n	evenue (Pa	rt VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 72	2,13	8	75,066
			d lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,29	2	959,344
			amounts paid (Part IX, column (A), lines 1–3)			0
			for members (Part IX, column (A), line 4)	0 00	-	0
ses	15 Salarie	s, other cor		2,63	/	143,656
Expenses	h Total fu	sional tunor Indraising e	aising fees (Part IX, column (A), line 11e) xpenses (Part IX, column (D), line 25) ► 28,975			• •
Ĕ	17 Other e	voenses (F		0,13	7	358,498
				2,77		502,154
	19 Revenu			8,51		457,190
Net Assets or Fund Balances			Beginning of Cur			and of Year
ssets	20 Total as	ssets (Part	· · · · · · · · · · · · · · · · · · ·	<u>3,43</u>		,302,386
let A	21 Total lia			4,94 8,48		<u>6,707</u> 295,679,
		sets or fund Signature		0,40	9 1	.,295,619
			eclare that I have examined this return, including accompanying schedules and statements, and to the best	st of my k	nowledge an	d belief, it is
			eclaration of preparer (other than officer) is based on all information of which preparer has any knowledge	-	nomedye an	u Deller, it is
Sig	in 🔽	Signature of c	fficer	Da	ate	
He	re	STEP	HANIE PEW PRESIDENT			
<u> </u>			name and title	<del></del>		
<b>D</b> -'		ype preparer's	M	Che		TIN
Paic	naror	S. HOPKI			<u> </u>	200138105
	Only	name 🕨	MARY S. HOPKINS, CPA / / / F 9121 N MILITARY TRL STE 222	irm's EIN 🖡	65-	-0013092
238	-	addraan 🔺	DATH DEACH CADDENC ET 22410	lba#	561-	-694-1662
Mav		address 🕨 🕨	rn with the preparer shown above? (see instructions)	hone no.	001	Yes No
			Notice, see the separate instructions.			Form <b>990</b> (2013)
DAA					•	
			a de la companya de La companya de la comp			

FRIENDS 06/27/2014 9:23 AM

Form	990 (2013) FRIENDS OF MACARTHUR BEACH 65-0196497	Page <b>2</b>
	Int III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission: UPPORT OF MACARTHUR STATE PARK AND ITS FUNCTIONS	
	OFFORI OF MACARINOR STATE FARE AND ITS FUNCTIONS	•••••
	•••••••••••••••••••••••••••••••••••••••	
		• • • • • • • • •
2		_
	prior Form 990 or 990-EZ?	X No
•	If "Yes," describe these new services on Schedule O.	
્3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Y No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	
	the total expenses, and revenue, if any, for each program service reported.	
	(Code: ) (Expenses \$ 62,516 including grants of \$ ) (Revenue \$	
F I M I T	URCHASED & DONATED TO MACARTHUR STATE PARK FOR THE SUPPORT OF PARK UNCTION, PROGRAMS, VISITOR AMENITIES, ADVERTISING AND PR. EQUIPMENT NCLUDING AN ELECTRIC TRAM FOR VISITOR ACCESSIBILITY, TOOLS, REPAIR AND AINTENANCE OF AQUARIA AND GENERAL MAINTENANCE SUPPLIES. PROGRAM SUPPLIES NCLUDING NATURAL SCIENCE SUPPLIES, OFFICE SUPPLIES, AND GENERAL AINTENANCE SUPPLIES. PRINTED MATERIALS INCLUDED A QUARTERLY NEWSLETTER, WICE-ANNUAL CALENDAR BROCHURE OF ACTIVITIES, AS WELL ASOTHER ACTIVITY AN DUCATIONAL BROCHURES.	· · · · · · · · · · · · · · · · · · ·
		•••••
P S S I M T	(Code: )(Expenses \$ 209,054 including grants of \$ )(Revenue \$ ROVIDED FOR NATURAL SCIENCE EDUCATION FOR OVER 5000 PALM BEACH COUNTY TUDENTS, SUMMER SCIENCE CAMPS FOR CHILDREN AGES 7 TO 14, COLLEGE INTERN TUDENTS FROM ACROSS THE U.S. PROVIDED FUNDING FOR SPECIAL EVENTS NCLUDING NATURESCAPING, INTERNATIONAL COASTAL CLEAN-UP, MACARTHUR UNDER OONLIGHT CONCERTS, SCIENCE SPEAKER SERIES, AND NATURAL SCIENCE TEACHER RAINING EVENTS. PROVIDE FOR VOLUNTEER CORPS UNIFORMS, SUPPLIES AND QUIPMENT, VOLUNTEER APPRECIATION EVENT AND VOLUNTEER HOLIDAY PARTY.	)
	······	
		• • • • • • • • •
	***************************************	
F	(Code: )(Expenses \$ 36,378 including grants of \$ )(Revenue \$ UNDING CONSTRUCTION AND RENOVATION OF THE NATUARAL SCIENCE EDUCATION ENTER AND NATURE AND VISITOR CENTER.	)
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	•••••••••••••••••••••••••••••••••••••••	••••••••••••••••••••••••••••••••••••••
	· · · · · · · · · · · · · · · · · · ·	• • • • • • • • • • • • • • • •
	Other program services. (Describe in Schedule O.) (Expenses \$ 52,986 including grants of \$ ) (Revenue \$ )	
	(Expenses \$ 52,986 including grants of \$ ) (Revenue \$ )         Total program service expenses ► 360,934	
		90 (2013

# Form 990 (2013) FRIENDS OF MACARTHUR BEACH Part IV Checklist of Required Schedules

65-0196497

			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	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		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		x
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II			
•	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
		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.		in th	
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	X	
b	Did the organization report an amount for investmentsother 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		X
C	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	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		X
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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			1
	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	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			i
	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 foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	. 18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		1	
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H			X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	1	1

Part IV

# Form 990 (2013) FRIENDS OF MACARTHUR BEACH

Checklist of Required Schedules (continued)

65-0196497

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
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," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			ĺ
	disqualified persons? If so, complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	]	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
с	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			:
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		x
38	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	38	x	

Form **990** (2013)

Check If Schedule O contains a response or note to any line in this Part V       Yes         1a       Enter the number reported is Rox 3 of Form 1996, Enter -0: front applicable       1a       3       1a       0         0       Enter the number reports VRO Rould on line in the is form 2-0 rout applicable       1a       0       1a       0         2       Enter the number of some VROP Rould on line in the issue overed by this return reportable gamma is a nd 2 ni greater than 250, you may be required to effect (see instructions)       2a       12         2       If at least one is a nd 2 ni greater than 250, you may be required to effect (see instructions)       3a       X         9       If at least one of the origin country (sech as a bank account, securities account, or other financial account); over, a financial account is foreign country.       3a       X         54       Way it a bank account, securities account, or other financial account, account is foreign country.       5a       X         54       Way it way it way it and a security (sech as a bank account, securities account, or other financial account, account is foreign country.       5a       X         54       Way it way it way it and on account is a provide ta soluble as other instructions?       5a       X         54       Way it way it way it and a solut or account is a solut of account is a count is a co		1990 (2013) FRIENDS OF MACARTHUR BEACH 65-0196	497			F	age <b>5</b>				
a         Enter the number reported in Box 3 of Form 1086. Enter -D- If not applicable         Image: The number of Enorma W-25 included in The 1a. Enter -D- If not applicable         Image: The number of Enorma W-25 included in The 1a. Enter -D- If not applicable         Image: The number of Enorma W-25 included in The 1a. Enter -D- If not applicable         Image: The number of Enorma W-25 included in The 1a. Enter -D- If not applicable         Image: The number of Enorma W-25 included in the 1a. Ender -D- If not applicable included in Enormality and the included include	Pa										
a Enter the number reported in Rox 3 of Form 1006. Enter -0. If not applicable         1         1         1         0           b Enter the number of Forms V-2.0 in applicable         1         0		Check if Schedule O contains a response or note to any line in this Part V	<u></u>			Voc					
b         Image: Second Se	1a	Enter the number reported in Box 3 of Form 1096. Enter $-0-$ if not applicable	1a	3		169					
c       Deter organization comply with backup withholding ules for reportable payments to vendors and reportable payment granting (gambing) with reverse?       Image: the payment is a marked on Fram Wi-3, Transmittal of Wage and Tax.         2a       East the number of employees reported on Fram Wi-3, Transmittal of Wage and Tax.       Image: Tax relations and the payment is a relations?       Image: Tax relations and tax is granted in Fine all required forderal employment tax relations?       Image: Tax relation is a relation of the tax relations?       Image: Tax relation is a relation of the tax relations?       Image: Tax relation is a relation of the tax relations?       Image: Tax relation is a relation of the tax relations?       Image: Tax relation is a relation of the relation of the tax relations?       Image: Tax relation is a relation of the relation of the tax relations?       Image: Tax relation is a relation of the relation											
reportable gaming (gaminding) winnings to pize winnes?       1c         2a Enter the number of employees reported on Form WA. Transmittal of Wage and Tax       2a       12         b If at least one is reported on form WA. Transmittal of Wage and Tax       2a       12         b If at least one is reported on file way. And the expandation file all required federal employment tax returns?       2a       X         b If the organization have unrelated basiness gross moome of 3,000 or more during the ser?       3a       X         b If the organization have unrelated basiness gross moome of 3,000 or more during the ser?       3a       X         b If the organization bave unrelated basiness gross moome of 3,000 or more during the ser?       3a       X         b If the organization bave the organization fare a sub net occurn, securities accurn, or other financial accounts.       3b       X         b Was the organization a party to a prohibited tax takeler transaction at required prohibited tax takeler transaction at required addities at the second regulation and the organization fare from 886-7?       6a       X         b Organization a party to arganization fare from 886-7?       6b       X       X         b If "Yes," did the organization fare more addition and that such contributions or gifts were not tax decubilies at schrabe contributions or gifts were not tax decubilies?       7a       X         b Organization solit any contributed tax theler transaction fa free morelaxet on the reguired fare free masschrabe c											
2a         Entry the number of employees reported on Form V-3, Transmittal of Wage and Tax         2a         12         2b         X           5         Statements, file for the calcendre year ending with with the year overed by this return of the tax and 2 is greater than 600, you may be residued to a file (cas instructions)         3a         Xa           3a         Diff the capanization that we uncleade basiness grass income of 51 (000 ar more during the year?         3a         X           3b         If "Yes," has it filed a Form 980-T for this year? If "No" line 33, provide an explanation in Scheduls O         3b         X           3b         If "Yes," has it filed a Form 980-T for this year? If "No" line 33, provide an explanation in Scheduls O         3b         X           3b         Trys," and it filed a Form 980-T for this year? If "No" line 33, provide an explanation in Scheduls O         3b         X           3c         With explanation the anomality state as a bank account, securities account?         3a         X           3c         With explanation the anomality state anomality are anomality grater than \$100,000, and did the organization the organization the Form 888-T?         5a         X           3c         With explanation the manual grass receipts that are normality grater than \$100,000, and did the organization the anomal account?         5a         X           3c         With explanation the manual grass receipts that are normality grater than \$100,000, and did the or					1c						
b     If at least one is reported on line 2, a disk be organization file all required feed method on the set of the organization have unrelated business gross income of \$1,000 or more during the year?     3a     X       3a     Did the organization have unrelated business gross income of \$1,000 or more during the year?     3a     X       3a     At any time during the calendary year, dit the organization have an interest in, or a signature or other authority over, a financial excountly are, dit the organization have an interest in, or a signature or other authority over, a financial excountly.     4a       5a     More, financial excountly is a constructive to a prohibite tax sheller transaction at any time during the starker?     5a     X       5a     We she organization as party to a prohibite tax sheller transaction at any time during the tax year?     5a     X       6a     Vest to organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization neicher express tatement that such contributions or gifts were not tax deductible as charable contributions or gifts were not tax deductible as a softbuling and party for goods and services provided to the payor?     7a       7     Organization neicker apprent in exceeds of \$16 made party as a contribution and party for goods and services provided to the payor?     7a       7     Organization neicker apprent in exceeds of \$16 middle payors and benefit contract?     7a       7     Organization neicker apprentin exceeds of \$16 middle payors and paroty as a parotibut	2a		1								
Note, if the sum of lines 1a and 2a is greater fma 250, you may be required to affin (see instructions)       3a       X         3a       Did the organization have unrelated business gross income of \$1,000 or more during the year?       3a       X         3b       If "see," has it filed a Form 990-T for this year /If "too" to line 3b, provide en explanation in Schedule 0       3a       X         4a       At any time during the calendar year, did the organization have an inferest in or a signature or other authority over, a financial account in a foreign country.       4a       4a       X         bit of any izable park notify the organization have an inferest in or a signature or other authority over, a financial Accounts.       5a       X         bit of any izable park notify the organization have an inferest in park and Financial Accounts.       5a       X         bit on any contributions that are normally greater than \$100,000, and did the organization noted multice with were solitation an excress statement that ch contributions or gifts were not tax deductible or schartable contributions or gifts were not tax deductible.       5a       X         bit of the organization notify the donor of the value of the grospication and party or parket.       5a       X         constructure of the organization have an inder section 170(c).       6a       X         bit organization notify the donor of the value of the goods or services provided?       7a       7a         corganization neelve a payment in excress of \$76 made p		Statements, filed for the calendar year ending with or within the year covered by this return	2a	12							
3a       Did the organization have uncellade business gross income of \$1,000 or more during the year?       3a       X         bit If "ves," has it field a Form 3000 Tork this year! ("No's to its 3b, yourkee an explanation in Schedule 0	b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	s?		2b	X					
b       17%s," has it filed a Form 500-1 for this year," of NoV 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       3b         voer, a financial accourt in a foreign country: >       5c         See instructions for filing requirements for Form TD F 80-22.1, Report of Foreign Bank and Financial Accounts.       5c         Was the organization a party to a prohibited tax sheler transaction at any time during the tax year?       5c       X         Does the organization in the organization from 8869 F7.       5c       X         Mode any toxable party notify the organization from 8869 F7.       5c       5c       X         Does the organization party cost prohibited the Form 8869. F7.       5c       5c       X         M 17 Ves," full the organization induce with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under socian 170(c).       6c       5c         Did the organization neight the down of the varies statement that such contributions or gifts were not tax deductible contributions under social property for which it was required to the Form 8282. Trace statement that such contributions or gifts were not tax deductible contributions under social property for which it was required to the Form 8282. Trace statement that such contributions forms 8298 are sequred?       7c         If Yes," did the organization neevies a payment in acceas of 375 made partiy as a contribution or gi		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)									
4a At any time during the calendar year, old the organization have an interest in, or a signature or other number of the relation of the organization for filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.       4a       X         b If Yes, "refer the name of the foreign country (such as a bank account, securities account, or other financial accounts for filling reguirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.       5a       X         5a Was the organization a party to a prohibited tax sheller transaction at any time during the tax year?       5a       X         5a Does the organization solid any contributions that were not tax deductible as chartable contributions?       5a       X         c granization solid any contributions that were not tax deductible as chartable contributions?       6a       X         7b Tyes," did the organization include with every solicitation an express atternent that such contributions or glifts were not tax deductible?       6a       X         7c Torganization receive a payment in excess of 375 made partiy as a contribution and party for goods and services provided to the payor?       7a       7a       7a         d If 'Yes, "indicate the number of Forms S222 filed during the year       [7d]       7a       7a         10 the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7a       7a         11 'Yes," indicate the number of Forms S232 filed during the year?       7a       7a       7a	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X				
over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts)     4a     X       b     If Yes, "enter the name of the foreign country; >     5e     5       See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.     5a     X       b     Ud any taxable party notify the organization in the it was or is a party to a prohibited tax sheller transaction?     5b     X       b     Does the organization a party to a prohibited tax sheller transaction?     5c     5c       c     TY Wes," for the organization in Form 898-17?     5a     X       b     Did any taxable party notify the organization in Erom 898-17?     5a     X       c     Does the organization aparty can prohibited tax sheller transaction?     5a     X       f     Yes," indicate the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 170(c).     7b     7c       a     If Yes," indicate the number of Form 8382.7 file during the year     7d     7b       b     Did the organization network as contribution of qualified indive you indirectly, to pay premiums on a personal benefit contract?     7d       d     If Yes," indicate the number of Form 8382.7 file during the year?     7d     7d       d     If Yes," indicate the number of Form 8382.7 indive you indincectly, to pay premiums o	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						
account?     4a     X       b     If "Yes," enter the name of the foreign country: >     4a     X       See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.     5a     X       54     Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?     5b     X       55     Was the organization a party to a prohibited tax shelter transaction?     5c     X       c     If "Yes," to line Sa or 5b, did the organization the romally greater than \$100,000, and did the organization solicit any contributions that were nort tax deductible as charitable contributions?     5a     X       f     If "Yes," to lid the organization never solicitation an express statement that such contributions or gifts were not tax deductible?     6b     7a       70     Organization solicit any receive deductible contributions under section 170(c).     7a     7b       10     If "Yes," to lid the organization nevels e apyment in excess of 157 made party as a contribution and party for goods and services provided to the payor?     7a     7c       10     If "Yes," to lid the organization nevels e apyment in excess or otherwhices provided?     7a     7c       11     If "Yes," to lid the organization nevels apyment in excess or otherwhices provided?     7a     7c       11     If "Yes," to lid the organization nevels apyment in excess or otherwhices provided?     7c     7c       11	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other at	uthority	1							
b       If "Yes," enter the name of the foreign country, I-See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.       5a         See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.       5a       X         Did any taxable party only the organization that it was or is a party to a prohibited tax shelter transaction?       5b       X         Did any taxable party only the organization that it was or is a party to a prohibited tax shelter transaction?       5c       X         Did any taxable party only the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6a       X         Organizations that may receive deductible contributions under section 170(c).       0b       7a       7a         Did the organization neakly a payhibet due of the goods or services provided?       7a       7a         If "Yes," ididate to reganization on thy the donor of the value of the goods or services provided?       7a       7a         Did the organization neakly any torgo methy in a file a poronal property for which it was required to file Form 3282?       7a       7a         Did the organization neakly a continuous of pay premiums on a personal benefit contract?       7a       7a       7a         If "Yes," indicate the number of Form 3282? filed during the year?       7a       7a       7a       7a       7a		over, a financial account in a foreign country (such as a bank account, securities account, or other financial	ncial								
See instructions for fling requirements for Form TD F 90:22.1. Report of Foreign Bank and Financial Accounts.       5a       X         Sa Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5a       X         Bors the organization receives that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6a       X         Organization solicit any contributions that were not tax deductible as charitable contributions or gifts were not tax deductible?       6b       X         Organization solicit any contributions under section 170(c).       0       7a       7a       7a         Did the organization neceive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor?       7a       7a         Did the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7a       7a         Did the organization received a contribution of qualified intellectual property, for which it was required to file Form 82829 as required?       7i       7i         Did the organization neceived a contribution of qualified intellectual property, for bene organization, fave excess basiness boldings at any time during the year?       7a       7i         Di		· · · · · · · · · · · · · · · · · · ·			4a		X				
5a     Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?     5a     X       b     Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?     5b     X       6a     Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as chartable contibutions?     6a     X       7     Organization receive a payment in excess of 357 made party as a contribution and party for goods and services provided the payor?     7a     7a       7     Did the organization notify the donor of the value of the goods or services provided?     7b     7c       7     Did the organization notify the donor of the value of the goods or services provided?     7c     7c       7     Did the organization notify the donor of the value of the goods or services provided?     7c     7c       7     Did the organization notify the donor of the value of the goods or services provided?     7c     7c       7     Did the organization notify the year (y or indirecity, to pay premiums on a personal benefit contract?     7c     7c       7     Did the organization receive a outribution of cass, boats, aiphanes, or other vehicles, did the organization file Form 8289 as required to file form 8289     7d     7d       9     Did the organization received a contribution of cass, boats, aiphan	b										
b       Did any taxable party notify the organization that it was or is a party to a prohibited tax sheller transaction?       5b       X         c       If "Yes" to line 6a or 5b, did the organization file Form 8886-17       5c       5c         d       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?       5c       5c         b       If "xes," did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization receive a payment in excess of \$75 made party as a contributions or gifts were not tax deductible?       7c       7c         7       Organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor?       7a       7c         b       If "xes," indite organization necelve a payment in excess of \$75 made party as a contribution and partly for which it was required to file Form 8222?       7c       7c         d       If "xes," indite organization necelve a payment in excess of \$75 made party as a contribution or which it was required to file form 8222?       7c       7d       7c         10       the organization feelower a payment in excess of \$75 made party as a contribution or which it was required to file form 8222?       7c       7d       7d       7d         11       Trees," indition the unther of forms 8222 filed during the year       7d       7			ccoun	ts.	a an	1944 A					
c     If "Yes" to line 5a or 5b, did the organization file Form 8886-T?     5c       6a     Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solid any contributions fast were not tax deductible as charitable contributions or gifts were not tax deductible as charitable contributions or gifts were not tax deductible as charitable contributions or gifts were not tax deductible?     6a     X       7     Organization studie with every solicitation an express statement that such contributions or gifts were not tax deductible?     6b     7a       0     Organization receive a payment in excess of 375 made partly as a contribution and partly for goods and services provide the payor?     7b     7b       0     If "Yes," did the organization notify the donor of the value of the goods or services provided?     7b     7c       1     If "Yes," indicate the number of Forms 8282 filed during the year     7c     7c       1     If "Yes," indicate the number of forms 8282 filed during the year     7c     7d       1     If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?     7c       1     Did the organization material station of qualified intellectual property, did the organization file a Form 8398 as required 7     7d       1     If the organization material station or davised fund and section 509(a)(3) supporting organizations matrialining donor advised fund material by a sponsoring organizations materialining donor advised fund scient 509(a)(3) supporting organizations materia	5a						<u> </u>				
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     ff "Ves," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?     6b     6b       c     Organizations that any notifubutions that were not tax deductible contributions under section 170(c).     8b     6b       d) ff "Ves," did the organization notify the donor of the value of the goods or services provided?     7a     7a       ff "did the organization notify the donor of the value of the goods or services provided?     7b     7c       c) bid the organization notify the donor of the value of the goods or services provided?     7c     7c       c) bid the organization notify the donor of the value of the goods or services provided?     7c     7c       c) bid the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?     7c     7d       file the organization receive a contribution of qualified intellectual property, did the organization file Form 8893 as required?     7f     7f       g) if the organization, might ever, pay permitme, dires ection 599(d)(3) supporting organization. have excees business holdings at any time during the year?     8     9       g) Sponsoring organization maintaining door advised funds.     9a     9a     9a       g) bid the organiz	b		on?				<b>X</b>				
organization solicit any contributions that were not tax deductible as charitable contributions?     6a     X       b     ff*Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?     6b     6b       7     Organizations that may receive deductible contributions under section 170(c).     7a     7a       a)     Did the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?     7a       b)     di 'Yes," did the organization notify the donor of the value of the goods or services provided?     7b       c)     Did the organization notify the donor of the value of the goods or services provided?     7c       c)     Did the organization notify the donor of the value of the goods or services provided?     7c       c)     Did the organization notify the donor of the value of the goods or services provided?     7c       c)     Did the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract?     7e       f)     Did the organization neceive any tornski distributions under section 4904(A) supporting     7d       g)     f the organization neceive any funds, distributions under section 4904(A) supporting     7f       g)     f the organization neceive any taxake distributions under during the year?     7h       g)     Sponsoring organizations maintaining donor advised fund saintained by a sponsoring organiza	_			· · · · · · · · · · · · · · · · · · ·	<u>5c</u>		<u> </u>				
b       If "Yes," did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible?       6b         c       Organizations that may receive deductible contributions under section 170(c).       6b         a       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         b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b         c       Did the organization notify the donor of the value of the goods or services provided?       7c         c       If "Yes," indicate the number of Forms 8282 filed during the year       7d         did the organization receive a contribution of qualified intelleculal property, did the organization file orm 8282?       7fe         f       Did the organization received a contribution of qualified intelleculal property, did the organization file orm 1098-0?       7fd         g       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-0?       7fd         g       Sponsoring organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization. Neave a distribution to a donor, donor advised fund maintained by a sponsoring organization make any taxable distributions under section 4966?       9a         g       Sponsoring organization make any taxable distribution such ado or advised per	6a		:								
gifts were not tax deductible?     6b       7 Organizations that may receive deductible contributions under section 170(c).     6b       a 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       b If "Yes," did the organization notify the donor of the value of the goods or services provided?     7a       c Did the organization notify the donor of the value of the goods or services provided?     7c       c Did the organization notify the donor of the value of the goods or services provided?     7c       d If "Yes," indicate the number of Forms 8282 filed during the year     1d       f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?     7c       f If the organization received a contribution of cars, boats, anglanes, or other vehicles, did the organization file a Form 1098-C?     7h       8 Sponsoring organizations meaked a contribution of a unbids, anglanes, or other vehicles, did the organization file a Form 1098-C?     7h       8 Sponsoring organizations maintaining donor advised fund maintained by a sponsoring organization make any taxable distributions under section 4966?     9a       9 Sponsoring organizations cellistibutions under section 4966?     9a       9 Soction 501(c)(7) organizations. Enter:     10a       10 bit dre organization neceived chorthy thills, 12 for public use of club facilities     10b       11 section 501(c)(12) organizations. Enter:     11a       12 Sec					<u>6a</u>						
7       Organizations that may receive deductible contributions under section 170(c).       a         a       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         b       If "Yes," did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 3222?       7b         c       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7c         d       If "Yes," indicate the number of Forms 8282 filed during the year       [7d]       7e         d       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f         f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f         g       If the organization received a contribution of qualified intellectual property, did the organization file a Form 1086-C?       7n         f       Sponsoring organizations maintaining door advised fund anintained by a sponsoring organization make any taxable distributions under section 509(4)(3) supporting organization make any taxable distributions under section 49667       9a         g       Sponsoring organizations.       9b       9b         g       Did the organization make any taxable distributions under section 49667       9a         g       G	b		s or			1					
a       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         b       If "Yes," id the organization notify the donor of the value of the goods or services provided?       7b         c       Did the organization notify the donor of the value of the goods or services provided?       7c         c       Did the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7c         f       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7c         f       Did the organization receive a contribution of qualified intellectual property, did the organization file Form 8289 as required?       7d         g       If the organization received a contribution of cars, boats, aiplanes, or other vehicles, did the organization file Form 8089 as required?       7n         g       If the organization, have excess business holdings at any time during the year?       8         goranization, have excess business holdings at any time during the year?       8a         goranization make a distribution such a door, door advisor, or related person?       9a         goranization make a distributions included on Part VIII, line 12       10a         lob dit the organization make a distributions. Enter:       11a         a Gross income from memebers ore shareholders       11a	-	-	••••		00						
and services provided to the payor?     7a       b If "Yes," did the organization notify the donor of the value of the goods or services provided?     7b       c Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?     7c       d If "Yes," indicate the number of Forms 8282 filed during the year     7d     7c       e Did the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract?     7e     7f       g If the organization received a contribution of qualified intellectual property, did the organization file a Form 8899 as required?     7g     7f       g If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?     7h     7h       g Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization. So a donor advised fund anitale by a sponsoring organizations maintaining donor advised fund anitale by a sponsoring organization make a distribution to a donor, donor advised fund anitale by a sponsoring organization make a distributions under section 4966?     9a       g Sponsoring organizations maintaining donor advised funds antial depreson?     9b     9b       g Section 501(c)(7) organizations. Enter:     10a     10b       g Gross income from members or shartenholders     11a     10b       g Section 501(c)(12) organizations. Enter:     11a     12a       g Gross income from members or shartenholders     11a     12a			da								
b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b         c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7c         d       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7c       7c         f       Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?       7n       7n         g       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7n       7n         8       Sponsoring organizations maintaining donor advised funds and section 509(a)(3 supporting organization, have excess business holdings at any time during the year?       8a       9         9       Sponsoring organizations maintaining donor advised funds.       9a       9b       9b       9b         0       Did the organization make any taxable distributions under section 4966?       9a       9b	a		Jous		70		1 12				
c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 82827       7c         d       If "Yes," indicate the number of Forms 8282 filed during the year       [7d]       7e         d       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       7e         f       Did the organization receive a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7f       7d         g       If the organization receive a contribution of any shares, or other vehicles, did the organization file Form 1098-C?       7h       7d         8       Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization. That excess business holdings at any time during the year?       8       9         9       Sponsoring organization make any taxable distributions under section 4966?       9a       9b       9b         10       Section 501(c)(7) organizations. Enter:       10a       10b       9a       9b       9c       <	· h	If "Vec," did the experimetion paties the dense of the value of the goods as services previded?	•••••	•••••			+				
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g       If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g         h       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h         8       Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, have excess business holdings at any time during the year?       8         9       Sponsoring organizations maintaining donor advised funds.       8         0       Did the organization make any taxable distributions under section 4966?       9a         b       Did the organization make any taxable distributions under section 4966?       9a         b       Did the organizations. Enter:       10a         10       Section 501(c)(7) organizations. Enter:       10a         a       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.)       11b       12a         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a       13a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a       13a       13a         14       Type       13a       13a	-										
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13       Section 501(c)(29) qualified nonprofit health insurance issuers.         a       Is the organization licensed to issue qualified health plans in more than one state?         Note. See the instructions for additional information the organization must report on Schedule O.         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans         c       Enter the amount of reserves on hand         13a       13b         13b       13c         14a       X	12a		1		12a	1 1 1 1 1	A NGA <sup>1</sup>				
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Note. See the instructions for additional information the organization must report on Schedule O.       Image: Schedule O.         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       Image: Imag	13			· · ·			4 (396)3 				
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14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X	_	Enter the emount of record on hand									
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Forn	1 990 (2013) FRIENDS OF MACARTHUR BEACH 65-0196497				P	age <b>6</b>
Pa	Int VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through	gh 7b	below, and	for a "	No"	
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes ir	1 Sch	edule O. Se	e instr	uctior	IS.
	Check if Schedule O contains a response or note to any line in this Part VI					X
Sec	tion A. Governing Body and Management					
				<b></b>	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	30			
	If there are material differences in voting rights among members of the governing body, or					
	if the governing body delegated broad authority to an executive committee or similar					
_	committee, explain in Schedule O.		20			
d	Enter the number of voting members included in line 1a, above, who are independent	1b	30	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with				슬린 같은 : ·	
	any other officer, director, trustee, or key employee?	• • • • • • •		2		x
3	Did the organization delegate control over management duties customarily performed by or under the direct					v
	supervision of officers, directors, or trustees, or key employees to a management company or other person?		•••••	3		X
4 5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	•••••	••••	4		X
6	Did the organization become aware during the year of a significant diversion of the organization's assets?	•••••		6		X
0 7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint					
	one or more members of the governing body?			7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	••••				
~	stockholders, or persons other than the governing body?			7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	by the	e followina:			25.35
a	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?		· · · · · · · · · · · · · · · · · · ·	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at					
•	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Inter	nal R	levenue C	ode.)		
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing t	he for	n?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to con	flicts?	12b		<u> </u>
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"					
	describe in Schedule O how this was done			12c		
13	Did the organization have a written whistleblower policy?			1		X
14	Did the organization have a written document retention and destruction policy?		• • • • • • • • • • • • •	14	a standard	X
15	Did the process for determining compensation of the following persons include a review and approval by					
:	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
a	The organization's CEO, Executive Director, or top management official			15a		X
b	Other officers or key employees of the organization			15b	22-0-0	X
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable partity during the upper			- 189733 - 189	1997 de la	n se si s Nota se si
.' •	with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	· · · · · ·	• • • • • • • • • • • • • • • • • • • •	16a	Teach Traite	X
b	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			- 1430-23 - 225-235		
				16b		1999
Sac	organization's exempt status with respect to such arrangements?	<i>.</i>	••••••••••••••••	100		
17	List the states with which a conv of this Form 990 is required to be filed <b>NONE</b>				•••••	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501			• • • • • • • • • •	• • • • • •	• • • • • • • •
	available for public inspection. Indicate how you made these available. Check all that apply.					
	Own website     Another's website     X     Upon request     Other (explain in Schedule O)					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest	t polic	v and			
	financial statements available to the public during the tax year.	r pont	<b>3, and</b>			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne				
	organization: MARY S HOPKINS 9121 N MILITARY TRA		#222			
PZ	ALM BEACH GARDENS FL 3341			1-69	4-1	.665
DAA						0 (2013)

DAA

# FRIENDS 06/27/2014 9:23 AM

Form 990 (20	(3) FRIENDS OF MACARINUR BEACH	03-0190497	Page I
Part VII	Compensation of Officers, Directors, Trustees, K	ey Employees, Highest Compensated E	mployees, and
	Independent Contractors		
	Check if Schedule O contains a response or note to	any line in this Part VII	<i>.</i>
Section A.	Officers, Directors, Trustees, Key Employees, and Highest C	compensated Employees	
1a Complete organization's	this table for all persons required to be listed. Report compensation $\ensuremath{s}$ tax year.	for the calendar year ending with or within the	
	of the organization's current officers, directors, trustees (whether inc n. Enter -0- in columns (D), (E), and (F) if no compensation was paid.	<b>v</b>	
<ul> <li>List all</li> </ul>	of the organization's current key employees, if any. See instructions	for definition of "key employee."	
who received	organization's five <b>current</b> highest compensated employees (other to reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 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.

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

(A) Name and Title	(B) Average hours per week (list any hours for	bo: off	x, unle icer ar	ss pe nd a d	ition more rson i irecto	than or s both r/truste	an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(	organization and related organizations
(1) MEREDITH TRIM										
PRESIDENT	2.00	x		x				0	0	0
(2) HAL REED			Í ····							<u>_</u>
	2.00									
TREASURER (3) PATRICIA WELCH	0.00	x		X				0	0	0
····	2.00								_	
VICE PRESIDENT (4) AMY WOODS	0.00	x		X				0	0	0
(4) AMI WOODS	2.00									
SECRETARY	0.00	X		х				0	0	0
(5) SEE ATTACHED LIS	T 0.00									
	0.00	x						0	0	0
(6)										
······										
(7)										
	· · · · · · · · · · · · · · · · · · ·									
(8)										
(9)										
······										
(10)										
(11)	· · · · · · · · · · · · · · · · · · ·									<u> </u>
	1							1 ···		

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For	n 990 (2013) FRIENDS (								65-019	an a	Page 8
<u> </u>			Istee	es, K			oyee	es, a	Ind Highest Compensated	-	
-	(A) Name and title	(B) Average hours per week (list any	bo	ix, unl	Pos check ess pe	erson	than d is both pr/trust	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
		hours for related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(44-271055-4411GC)	organization and related organizations
(12)						$\square$			1		
		•			ŀ						
(13)											
· · · ·		•									
(14)	······································										
	•••••••••••••••••••••••••••••••••••••••										
(15)											
(16)		-									
									-		
(17)											
(18)	······································										
	,										
(19)											
	·····										
	Sub-total							•			
d	Total from continuation she Total (add lines 1b and 1c)							▶			
2	Total number of individuals (in reportable compensation from	cluding but not li	mite	d to f				oove	e) who received more than t	\$100,000 in	
	····										Yes No
3	Did the organization list any for employee on line 1a? If "Yes,"	complete Sched	ule .	for	such	indi	ividu	al .			3 X
4	For any individual listed on line organization and related organ										
5	individual Did any person listed on line 1	a receive or accr	ue c	omp	ensa	ation	from	any	y unrelated organization or	individual	
Section	for services rendered to the or on B. Independent Contractor		es," (	com	olete	Sch	edul	eJi	for such person		5 X
1	Complete this table for your fiv	e highest compe									
	compensation from the organi	Zation. Report co (A) I business address	mpe	ensat	tion f	or th	ie ca	lend		(B) (B) bition of services	ar. (C) Compensation
	inditic diff	- Jointogo addirodd							2630N		
								┢			
									•		
								1			
		<b>.</b>								<i></i>	e Sector (algebra e de Maleite e de
2	Total number of independent of received more than \$100,000								e listed above) who	0	

# Form 990 (2013) FRIENDS OF MACARTHUR BEACH

#### Part VIII

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

65-0196497

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
월월 1a Federated campaigns	1a			and the second second	· · · · · · · · · · · · · · · · · · ·	
b Membership dues		148,016				5. 197
c Fundraising events						
d Related organizations						and a star for the star of the
e Government grants (contributions		19,430	<b>*</b>		<ul> <li>A state of the sta</li></ul>	8
f Ali other contributions, gifts, gran						
and similar amounts not included		477,595				
g Noncash contributions included in		19,430				
S h Total. Add lines 1a-1f			645,041			
	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	Busn. Code				
2 2a KAYAK RENTALS		Buan. coue	124,218			124,218
b NATURE EVENTS	• • • • • • • • • • • • • • • • • • • •		101,160			101,160
B NATURE EVENTS			101,100			101,100
S a						
		}				
1a       Federated campaigns         b       Membership dues         c       Fundraising events         d       Related organizations         e       Government grants (contributions falls of the contributions, gifts, gran and similar amounts not included in h         Total. Add lines 1a-1f         2a       KAYAK RENTALS         b       NATURE EVENTS         c       d         e       All other program service         d       All other program service         d       Land difference			225,378	ing an teachtachtachtachtachtachtachtachtachtacht	L. Sanatali - Sanat	L
g rotal. Add intoo 24 21			225,576			1
3 Investment income (incl	•	,	16 204			16 204
and other similar amour	nts)		16,304	•		16,304
4 Income from investment	•	•				
5 Royalties			and states a	in the second state of the second		
<u>_</u>	) Real (i	i) Personal				
6a Gross rents						
b Less; rental exps.						
c Rental inc. or (loss)					· · · · · ·	
d Net rental income or (los 7a Gross amount from			a hara texto de la la come	an a		· · · · · · · · · · · · · · · · · · ·
(i) S sales of assets		(ii) Other				
other than inventory	47,550	<b></b>				
b Less: cost or other						
basis & sales exps.	49,995		그 홍영 옷 다 같은			
c Gain or (loss)	-2,445					
d Net gain or (loss)		🕨	-2,445	-2,445		
Ba Gross income from fundraisi	ng events					
(not including \$						
of contributions reported on						
See Part IV, line 18						
of contributions reported on See Part IV, line 18 b Less: direct expenses	b					n haga tanàn amin'ny kaodim-paositra dia mampika minina dia kaominina dia kaominina dia kaominina dia kaominina
c Net income or (loss) from	n fundraising <u>events</u>	►				
9a Gross income from gaming a						
See Part IV, line 19	a					
b Less: direct expenses	b					
c Net income or (loss) from	n gaming act <u>ivities</u> .	🕨				
10a Gross sales of inventory	, less					
returns and allowances	a					
b Less: cost of goods sold	b					
c Net income or (loss) fror	n sales of inventory					
Miscellaneous R	evenue	Busn. Code				
11a NET SALES OF INV	ENTORY		73,057			73,057
<b>b</b> SALE OF KAYAKS			2,009			2,009
• • • • • • • • • • • • • • • • • • • •						
d All other revenue						
e Total. Add lines 11a-11		•	75,066			
12 Total revenue. See inst			959,344		C	316,748
		·····•				Form <b>990</b> (201:

FRIENDS 06/27/2014 9:23 AM				
Form 990 (2013) FRIENDS OF MACARI	HUR BEACH	65-0	196497	Page <b>10</b>
Part IX Statement of Functional Exp	enses			
Section 501(c)(3) and 501(c)(4) organizations must con Check if Schedule O contains a respon			omplete column (A).	X
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the				
U.S. See Part IV, lines 15 and 16 4 Benefits paid to or for members				
5 Compensation of current officers, directors.				

127,999

15,657

9,468

295,645

16,436

36,949

502,154

	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	Pension plan accruals and contributions (include
	section 401(k) and 403(b) employer contributions)

- Other employee benefits 9 10 Payroll taxes
- 11 Fees for services (non-employees): Management а Legal b c Accounting
- d Lobbying Professional fundraising services. See Part IV, line 17 е Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, column g
- (A) amount, list line 11g expenses on Schedule O.) Advertising and promotion 12 Office expenses 13 Information technology 14 15
- Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Interest
- 21 Payments to affiliates Depreciation, depletion, and amortization 22
- Insurance 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 O.) а ......
- e All other expenses 25 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and i
- fundraising solicitation. Check here following SOP 98-2 (ASC 958-720) DAA

Form 990 (2013).

28,975

51,200

6,263

4,734

31,914

18,134

112,245

12,800

1,566

947

9,214

3,626

822

63,999

7,828

3,787

254,517

15,614

15,189

360,934

b

С d Form 990 (2013) FRIENDS OF MACARTHUR BEACH

#### 65-0196497

Part	0 (2013) FRIENDS OF MACARTHUR BE X Balance Sheet			-0196497		Page 11
	Check if Schedule O contains a response or note to	any line in thi	s Part X			
				(A) Beginning of year		(B) End of year
1	Cash—non-interest bearing			1,652	1	5,864
2	Savings and temporary cash investments	• • • • • • • • • • • • • • • • • • •		427,709	2	467,030
3	Pledges and grants receivable, net	• • • • • • • • • • • • • • • • • • •			3	
4	Accounts receivable, net				4	
5	Loans and other receivables from current and former offic	ers. directors.	• • • • • • • • • • • • • • • • • • • •			
	trustees, key employees, and highest compensated employees					[안전] 일 같은 것같이 속 같이라. 또 말 것 같은 것
	Complete Part II of Schedule L	-			5	
6	Loans and other receivables from other disgualified perso					
	4958(f)(1)), persons described in section 4958(c)(3)(B), a	•				
	sponsoring organizations of section 501(c)(9) voluntary er	•	· · ·			
2	organizations (see instructions). Complete Part II of Scher	ا مانام	•		6	
SD000 7					7	
ζ 8	Inventories for sale or use			24,827	8	26,391
9	Prepaid expenses and deferred charges	• • • • • • • • • • • • • • • • • •			9	
10a	Land, buildings, and equipment: cost or		••••••			
	other basis. Complete Part VI of Schedule D	10a	32,954			이는 요구가 전 것을 알고 있는다. 같은 것은 도구한 것은 것은 것이다.
b	Less: accumulated depreciation	10b	32,954		10c	
11	Investments—publicly traded securities	· · · ·		389,250	11	803,101
12	Investments-other securities. See Part IV, line 11				12	
13	Investments—program-related. See Part IV, line 11			· .	13	
14	Intangible assets				14	
15	Other assets. See Part IV, line 11				15	
16	Total assets. Add lines 1 through 15 (must equal line 34)		• • • • • • • • • • • • • • • • • • • •	843,438	16	1,302,386
17	Accounts payable and accrued expenses			4,949	17	6,707
18	Grants payable				18	
19	Deferred revenue				19	
20	Tax-exempt bond liabilities				20	
21	Escrow or custodial account liability. Complete Part IV of	Schedule D 🚊			21	
g 22	Loans and other payables to current and former officers, o	directors,				
	trustees, key employees, highest compensated employee	s, and				
	disqualified persons. Complete Part II of Schedule L				22	
23	Secured mortgages and notes payable to unrelated third				23	
24	Unsecured notes and loans payable to unrelated third par				24	
25	Other liabilities (including federal income tax, payables to					
	parties, and other liabilities not included on lines 17-24). C	•				
	of Schedule D			4 0 4 0	25	C 705
26	Total liabilities. Add lines 17 through 25			4,949	26	6,707
	Organizations that follow SFAS 117 (ASC 958), check	here 🕨 🗴	and			
	complete lines 27 through 29, and lines 33 and 34.			07 764	1945 N.S.	166 703
27	Unrestricted net assets			<u>97,764</u> 740,725		166,723
8 28	Temporarily restricted net assets	· · · · · · · · · · · · · · · · · · ·		140,125		1,128,956
29	Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958)				29	
27 28 29		, спеск пеге	and			
30	complete lines 30 through 34.			an tairige francista and an a sta	20	ા છે. આ આ સામગ્રે જે બેલ્ફી લોકો વધારો
2 31	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment				<u>30</u> 31	
30 31 32	Retained earnings, endowment, accumulated income, or o	other funde			32	
33				838,489		1,295,679
33	Total liabilities and net assets/fund balances			843,438		1,302,386
34	Total nabilities and het assets/fully balances		• • • • • • • • • • • • • • • • • • • •		1 34	1 1,502,50

Form 990 (2013)

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Form 990	(2013) FRIENDS OF MACARTHUR BEACH	65-0196497			Pag	je <b>12</b>
Part X	Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any	line in this Part XI	<u></u>	<u></u>	<u></u>	
1 Tot	al revenue (must equal Part VIII, column (A), line 12)		1		59,3	
<b>2</b> Tot	al expenses (must equal Part IX, column (A), line 25)		2		)2,1	
3 Rev	venue less expenses. Subtract line 2 from line 1		3	45	57,3	190
4 Net	t assets or fund balances at beginning of year (must equal Part X, line 3	33, column (A))	4	83	38,4	<u>489</u>
5 Net	t unrealized gains (losses) on investments		5			
6 Doi	nated services and use of facilities		6			
	estment expenses		7			
	or period adjustments	·····	8			
9 Oth	ner changes in net assets or fund balances (explain in Schedule O)		9			
	t assets or fund balances at end of year. Combine lines 3 through 9 (mi					
33,	column (B))	· · · · · · · · · · · · · · · · · · ·	10	1,29	95,0	<u>679</u>
Part X	II Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any	line in this Part XII	<u></u>	<u></u>	<sub>.</sub>	
					Yes	No
.1 Acc	counting method used to prepare the Form 990: X Cash	Accrual Other				
lf th	ne organization changed its method of accounting from a prior year or o	hecked "Other," explain in				
Sch	nedule O.					
2a We	re the organization's financial statements compiled or reviewed by an i	ndependent accountant?		2a		X
וf "ז	res," check a box below to indicate whether the financial statements fo	r the year were compiled or				
revi	iewed on a separate basis, consolidated basis, or both:					
· _	Separate basis Consolidated basis Both consolidate	ed and separate basis				
b We	re the organization's financial statements audited by an independent a	ccountant?		2b	X	
lf "ገ	res," check a box below to indicate whether the financial statements fo	r the year were audited on a				
sep	parate basis, consolidated basis, or both:					
X	Separate basis Consolidated basis Both consolidated	ed and separate basis				
c lf"\	Yes" to line 2a or 2b, does the organization have a committee that assu	mes responsibility for oversight				
ofi	the audit, review, or compilation of its financial statements and selectio	n of an independent accountant?		2c	X	
lf th	e organization changed either its oversight process or selection proces	ss during the tax year, explain in				
Sch	nedule O.					Server.
3a As	a result of a federal award, was the organization required to undergo a	n audit or audits as set forth in				
the	Single Audit Act and OMB Circular A-133?			<u>3a</u>		X
b lf "ץ	res," did the organization undergo the required audit or audits? If the o	rganization did not undergo the				
req	uired audit or audits, explain why in Schedule O and describe any step	s taken to undergo such audits.	<u></u>	3b		
				For	m 990	<b>)</b> (2013)

SCHEDULE A	Pub	lic Charity Statu	s and	Publ	ic Sı	ippo	rt		ом	B No. 15	45-0047	
(Form 990 or 990-EZ)	Complet	e if the organization is a sect	tion 501(c)	)(3) orgai	nization	or a se	ction			20		<u> </u>
		4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.							1. J. A.	1011-10		
Department of the Treasury	N. Information also								C	Open to		iC
Internal Revenue Service		ut Schedule A (Form 990 or 990 ACARTHUR BEACH	-EZ) and its	s instructi	ions is a	WWW.IFS	T T		• • • • •	Inspe	ction	
Name of the organization	STATE PARK,	-					E	-019(	ication nur 6497	nber		
Part I Reason		Status (All organizations	s must co	omplete	this pa	art.) Se						
		e it is: (For lines 1 through 11, o								**		
1 A church, conve	ention of churches, or asso	ociation of churches described	in section	170(b)(1	)(A)(i).							
2 A school descri	bed in section 170(b)(1)(	A)(ii). (Attach Schedule E.)										
		e organization described in se										
4 A medical researcity, and state:	arch organization operated	f in conjunction with a hospital	described i	in sectio	n 170(b)	(1)(A)(iii	i). Ente	r the hos	spital's n	ame,		
	operated for the benefit of (1)(A)(iv). (Complete Part	of a college or university owned 11.)	or operate	ed by a go	vernme	ntal unit	describ	ed in				
(*****)		overnmental unit described in s	ection 17	0(b)(1)(A)	)(v).							
7 X An organization	that normally receives a s	substantial part of its support fre	om a govei	rnmental	unit or fr	om the g	general	public				
	ction 170(b)(1)(A)(vi). (C											
		70(b)(1)(A)(vi). (Complete Par	•				-					
		) more than 33 1/3% of its support functions							6			
		pt functions—subject to certain d unrelated business taxable ir	-									
		), 1975. See section 509(a)(2)				nom bu	0110000					
		exclusively to test for public saf										
11 An organization	organized and operated a	exclusively for the benefit of, to	perform th	e functior	ns of, or	to carry	out the					
		ed organizations described in s						ection				
, in the second s		ne type of supporting organizati						<b>.</b>				
a Type I	b Type II	c Jype III–Functior			d	···			onally in	tegrate	d	
		r than one or more publicly sup					-					
or section 509(a		r than one of more publicly sup	poned org	anzation	3 GÇ30I II	000 111 00		00(0)(1)				
•		rmination from the IRS that it is	a Type I, 1	Type II, or	r Type III	support	ing					
organization, ch	eck this box											
=		ion accepted any gift or contrib	ution from	any of the	e							
following perso										Г		
		ntrols, either alone or together	with perso	ns descril	bed in (ii	) and			ſ		Yes	No
	the governing body of the ember of a person describ	••• ••							···· F	11g(i) 11g(ii)	_	
		escribed in (i) or (ii) above?		•••••		•••••	• • • • • • • • •		· · · · · · F	11g(iii)		
		ne supported organization(s).	•••••		• • • • • • • • • •			· · · · · · · · · · ·	L	- g(al/		
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section	in col. (i) li	organization isted in your document?	the orga	you notify nization in of your	organiza (i) organ	Is the tion in col. ized in the	(vii) Ai	mount of suppo		1
		(see instructions))	Yes	No	sup Yes	port? No	Yes	S.? No				
(A)												
(B)												
(C)			-									
(D)												
(E)												
Total									<u> </u>			
	n Act Notico, coo the In		- <b>-</b>	1	1	1411 1111	Cabad.					

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. chedule A (Form 990 or 990-EZ) 2013

Sche	dule A (Form 990 or 990-EZ) 2013 FRI					-0196497	Page 2
Pa	rt II Support Schedule for O						
	(Complete only if you che						under
	Part III. If the organization	fails to qualify	under the tests	ilisted below, p	please complete	e Part III.)	
	tion A. Public Support						
Caler	idar year (or fiscal year beginning in) 🕨	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
•	membership fees received. (Do not						
	include any "unusual grants.")	90,851	229,242	343,174	615,075	645,041	1,923,383
2	Tax revenues levied for the						
	organization'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	19,850	17,150				37,000
4	Total. Add lines 1 through 3	110,701	246,392	343,174	615,075	645,041	1,960,383
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)						
6	Public support. Subtract line 5 from line 4.					in an an an an an Alban	1,960,383
	tion B. Total Support dar year (or fiscal year beginning in) ►	(-) 0000	(1) 0040	(-) 0044	(-1) 0040	(-) 0040	<u>(0. T. I.)</u>
		(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	110,701	246,392	343,174	615,075	645,041	1,960,383
8	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties and income from similar						
	sources	136	4,962	619	6,899	16,304	28,920
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 assets	198,875	148,992	189,598	219,318	300,444	1,057,227
11	(Explain in Part IV.) Total support. Add lines 7 through 10		<b>140,332</b>	103,330	219,310	500,444	3,046,530
12	Gross receipts from related activities, etc.	(see instructions)	and the second of the second	والمربية الروار ويتركز المرتزي والمحود	And the state of the state of the state	12	5,040,550
13	First five years. If the Form 990 is for the			rth or fifth tay year			
	organization, check this box and stop here	-		-			
Sec	tion C. Computation of Public Su						
14	Public support percentage for 2013 (line 6			 ו (f))		14	64.35%
15	Public support percentage from 2012 Sche						48.58%
16a	33 1/3% support test-2013. If the organ			3, and line 14 is 3	3 1/3% or more, ch	eck this	
	box and stop here. The organization quali						► X
b	33 1/3% support test-2012. If the organ	ization did not cheo	k a box on line 13	or 16a, and line 1	5 is 33 1/3% or mo	re,	······
	check this box and stop here. The organiz	zation qualifies as a	a publicly supporte	d organization			▶ 🗌
17a							
	10% or more, and if the organization meet	s the "facts-and-cir	cumstances" test, (	check this box and	<b>stop here.</b> Explai	n in	
	Part IV how the organization meets the "fa	cts-and-circumstan	ces" test. The orga	nization qualifies	as a publicly suppo	orted	
	organization						▶ □
b	10%-facts-and-circumstances test-201						
	15 is 10% or more, and if the organization	meets the "facts-ai	nd-circumstances"	test, check this bo	x and stop here.		
	Explain in Part IV how the organization me	ets the "facts-and-	circumstances" tes	t. The organizatior	n qualifies as a put	licly	
	supported organization						► 🗔
18	Private foundation. If the organization did	l not check a box o	n line 13, 16a, 16t	, 17a, or 17b, che	ck this box and see	Э	
	instructions		• •				▶ 🗌

Schedule A (Form 990 or 990-EZ) 2013

Sche	edule A (Form 990 or 990-EZ) 2013 FRI	ENDS OF M	ACARTHUR	BEACH	65	-0196497	Page 3
Pa	art III Support Schedule for Or						
	(Complete only if you cheo	cked the box o	n line 9 of Part	l or if the orga	nization failed f	o qualify under F	Part II.
<u></u>	If the organization fails to	quality under the	ne tests listed b	elow, please c	complete Part I	l.)	
	tion A. Public Support Indar year (or fiscal year beginning in) >	(-) 0000	(1) 0040	(.) 0044	(1) 0040	4.20040	(0 T. (.)
		(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
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						
6	Total. Add lines 1 through 5				· · · · · ·		
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		ala da seconda da seconda esta				
8	Public support (Subtract line 7c from						
Sec	line 6.) tion B. Total Support	an Marine Marine and Anna an A Anna an Anna an	i de la construcción de la construcción.		a statistic statistic sector		
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						.,
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0					
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the	organization's first	, second, third, fou	rth, or fifth tax yea	ar as a section 501	(c)(3)	
	organization, check this box and stop here	)		•		· · · · ·	<u></u>
Sec	tion C. Computation of Public Su					·	
15	Public support percentage for 2013 (line 8,	column (f) divided	i by line 13, colum	n (f))			%
16 Sec	Public support percentage from 2012 Sche tion D. Computation of Investme				<u></u>	16	%
17	Investment income percentage for 2013 (lin			column (fi)		17	%
18	Investment income percentage for 2013 (in Investment income percentage from 2012 S		il tine 47			40	%
19a	33 1/3% support tests—2013. If the organ		• • • • • • • • • •		more than 33 1/3	·····	
	17 is not more than 33 1/3%, check this bo						►
b	33 1/3% support tests-2012. If the organ	nization did not ch	eck a box on line 1	4 or line 19a, and	line 16 is more that	an 33 1/3%, and	
	line 18 is not more than 33 1/3%, check this						, 🕨 [
20	Private foundation. If the organization did	not check a box of	on line 14, 19a, or 1	9b. check this bo	x and see instructi	ons	

Schedule A (Form 990 or 990-EZ) 2013

•

FRIENDS 06/27/2014 9:23 AM

Part IV Supplemental Information Part III, line 12. Also comple	<ol> <li>Provide the explanations ete this part for any addition</li> </ol>	required by Part II, line 10; Part II, line al information. (See instructions).	∋ 17a or 17b; and
PART II, LINE 10 - OTHER	INCOME DETAIL		
OTHER INCOME	\$	756,783	
			· · · · · · · · · · · · · · · · · · ·
			•••••••••••••••••••••••••••••••••••••••
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Form 990-PF

instructions. **General Rule** 

**Special Rules** 

Complete Parts I and II.

FRIENDS 06/27/2014 9:23 AM			
Schedule B (Form 990, 990-EZ,	Schedule of Contributors	· .	OMB No. 1545-0047
or 990-PF) Department of the Treasury	Attach to Form 990, Form 990-EZ, or Form 990-PF.		2013
Internal Revenue Service	Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www	i.irs.gov/form990.	
Name of the organization		Employer ident	ification number
FRIENDS OF MA	CARTHUR BEACH		
STATE PARK, I	INC.	65-01964	97
Organization type (check o	ne):	·	
Filers of:	Section:		
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as a private foundation		
	527 political organization		

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) exempt private foundation

501(c)(3) taxable private foundation

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or

**X** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub> % support test of the regulations

under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution 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.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary,

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to 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. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or

or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

more during the year

Check if your organization is covered by the General Rule or a Special Rule.

property) from any one contributor. Complete Parts I and II.

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not 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 does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization

FRIENDS OF MACARTHUR BEACH

Page 2 Employer identification number 65-0196497

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<b>. 1</b>	MR. AND MRS. BRUCE MILLER 11279 OLD HARBOUR ROAD NORTH PALM BEACH FL 33408	\$55,000	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	MR. & MRS. HAROLD REED 12298 INDIAN ROAD NORTH PALM BEACH FL 33408	\$ 21,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	THE BATCHELOR FOUNDATION 1680 MICHIGAN AVE PH 1 MIAMI FL 33139	\$ 100,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
<u>4</u>	Name, address, and ZIP + 4 MARNI & MORRIS PROPP II FAMILY FOUND MR. & MRS. MORRIS PROPP 377 EAGLE DRIVE JUPITER FL 33477	Total contributions	Type of contribution         Person       X         Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	MR AND MRS JOHN PEW 11127 OLD HARBOUR ROAD NORTH PALM BEACH FL 33408	\$ 125,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Suppl	lemental	Financia	Statement

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

SCHEDULE D (Form 990)

Form 990) ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.				2013	
Department of the Treasury		Attach to Form 990.		Open to Public	
Internal Revenue Service	Information about Schedule D (F	orm 990) and its instructions is at www.irs		Inspection	
Name of the organization			Employer identificat	ion number	
	ACARTHUR BEACH		65.01064	07	
STATE PARK, I	t-marchan.	d Funda az Othaz Similaz Funda az	65-01964	.97	
Part I Organiza	e if the organization answered "Yes"	d Funds or Other Similar Funds or " to Form 990, Part IV, line 6	Accounts.		
		(a) Donor advised funds	(b) Funds a	and other accounts	
1 Total number at end o	f year	· · · · · · · · · · · ·			
	ns to (during year)				
3 Aggregate grants from	n (during year)				
	d of year				
	nform all donors and donor advisors in writin				
-		s exclusive legal control?		Yes No	
	nform all grantees, donors, and donor adviso				
only for charitable pur	poses and not for the benefit of the donor or	r donor advisor, or for any other purpose		· · · · · · · · · · · · · · · · · · ·	
conferring impermissil	ble private benefit?		<u></u>	Yes No	
Part II Conserva	ation Easements.				
Complete	if the organization answered "Yes'	" to Form 990, Part IV, line 7.			
1 Purpose(s) of conserv	ation easements held by the organization (o				
Preservation of la	nd for public use (e.g., recreation or education	on) Preservation of an historically in	nportant land area		
Protection of natu		Preservation of a certified histo	ric structure		
Preservation of op	•				
		conservation contribution in the form of a conservation	10.00 million (200 million)		
easement on the last of	•			the End of the Tax Yea	
c Number of conservation	on easements on a certified historic structure	e included in (a)	2c		
d Number of conservation	on easements included in (c) acquired after	8/17/06, and not on a			
			2d		
3 Number of conservation	on easements modified, transferred, release	ed, extinguished, or terminated by the organization	ation during the		
tax year 🕨					
4 Number of states when	re property subject to conservation easement	nt is located 🕨			
· •	have a written policy regarding the periodic				
•	ement of the conservation easements it hold			Yes No	
· ·	urs devoted to monitoring, inspecting, and e	enforcing conservation easements during the	year		
▶					
• •		cing conservation easements during the year			
▶\$					
		tisfy the requirements of section 170(h)(4)(B)			
				Yes S No	
		asements in its revenue and expense stateme o the organization's financial statements that o			
	ing for conservation easements.	o the organization's mancial statements that t	Jeschbes uie		
	-	Art, Historical Treasures, or Othe	r Similar Asset		
Complete	if the organization answered "Yes'	" to Form 990, Part IV, line 8.			
1a If the organization elec	ted, as permitted under SFAS 116 (ASC 95	58), not to report in its revenue statement and	balance sheet		
-		ublic exhibition, education, or research in furth			
		nancial statements that describes these items.			
	-	58), to report in its revenue statement and bala			
•	-	ublic exhibition, education, or research in furth			
	the following amounts relating to these iten				
•			▶ \$		
(ii) Assets included in			<b>N A</b>		
		es, or other similar assets for financial gain, pr			
-	uired to be reported under SFAS 116 (ASC				
		·			
b Assets included in For	m 990, Part X		<u> &gt; \$</u>		
	Act Notice, see the Instructions for Forn			hedule D (Form 990) 201	

For	Paperwork Reduction	Act Notice,	see the	Instructions	for Form 9
DAA					

	_			
Schedule	D	(Form	990)	2013

OMB No. 1545-0047

FRIENDS	06/27/2014	9-23 AM
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Schedule D (Form 990) 2013					65-01					Page <b>2</b>
	ons Maintaining							ets (co	ntinue	d)
3 Using the organization's collection items (check a	acquisition, accessior all that apply):	i, and other records,	check any of the follow	ing that are	a significar	nt use o	of its			
a Public exhibition		d 🗌 L	oan or exchange progr	rams						
b Scholarly research			ther							
c Preservation for futu	ire generations	ـــــا -			• • • • • • • • • • • • • •	• • • • • • • •				
4 Provide a description of XIII.	-	ections and explain h	ow they further the org	anization's	exempt pur	pose ir	Part			
	orgonization collect or	ecolus denotions of	art historiaal traceuros		milar					
	-							Γ	] v	[ <sup>~~</sup> ] ы.
assets to be sold to raise Part IV Escrow an	d Custodial Arra		t of the organization s	collection?			<u></u>	<i>.</i> L_	Yes	<u>No</u>
<ul> <li>Nation Network Constraints</li> </ul>	f the organization		to Form 000 Port	N/ line 0	or ropor	tod a	1 0 0001	at on E	orm	
990, Part X	(, line 21.				_		1 amou			
1a Is the organization an ag		n or other intermediar	y for contributions or c	other assets	not			_	-	
included on Form 990, F								L	Yes	No No
b If "Yes," explain the arra	ngement in Part XIII ar	nd complete the follow	wing table:			,				
								An	nount	
c Beginning balance							1c			
d Additions during the yea	r		<i>.</i>				1d			
e Distributions during the y	year						1e			
f Ending balance							1f			
2a Did the organization incl	ude an amount on For	m 990, Part X, line 2	1?					[	Yes	No
<b>b</b> If "Yes," explain the arra	ngement in Part XIII. C	heck here if the expl							-	
Part V Endowme		·····								
Complete it	f the organization	answered "Yes"	to Form 990. Part	IV. line 1	0.					
		(a) Current year	(b) Prior year	(c) Two yea		(d) Th	ee years ba	ck (	e) Four ye	ars back
1a Beginning of year baland	re –	538,979	152,595	., ,	2,491	.,		`		
b Contributions		537,200	429,686	2	27,165					
c Net investment earnings		331,200	423,000	đ., 1						<b>.</b>
		13,850	6,887		577					
losses		13,850	0,00/	· · ·	- 577					
d Grants or scholarships										
<ul> <li>Other expenditures for fa</li> </ul>										
programs		40,987	31,096		57,347					
f Administrative expenses		21,518	19,093		20,291					
g End of year balance		1,027,524	538,979		52,595					
2 Provide the estimated pe			line 1g, column (a)) he	eld as:						
a Board designated or qua		12.80 %								
<b>b</b> Permanent endowment								•		
c Temporarily restricted er	ndowment 🕨 87	.20 %								
The percentages in lines	2a, 2b, and 2c should	equal 100%.								
3a Are there endowment fu	nds not in the possess	ion of the organization	on that are held and ad	Iministered	for the				·	
organization by:									<u> </u>	es No
(i) unrelated organization	ons				•			🛓	3a(i)	X
(ii) related organization:	-							3	la(ii)	X
b If "Yes" to 3a(ii), are the	related organizations I	isted as required on	Schedule R?						3b	
4 Describe in Part XIII the										
	dings, and Equip									
a gran and a share of the second s	the organization		to Form 990. Part	IV. line 1	1a. See F	Form	990. Pa	rt X. lir	ie 10.	
Description of pr		(a) Cost or other bas				cumulate			) Book val	ue
,		(investment)	(ather			reciation		•		
1a Land					1000-1000 1000-1000		2000			
	••••••				a an an an tha an					
b Buildings	•									
c Leasehold improvement										
d Equipment				12 DEA		20	0 6 4			
e Other				<u>32,954</u>		32	<u>, 954</u>			
Total. Add lines 1a through 1e	. (Column (a) must eq	uai Form 990, Part X	, column (B), line 10(c	<u> ),                                   </u>			🕨			
							S	chedule I	D (Form	990) 2013

	orm 990) 2013 FRIENDS OF MACARTHUR I	BEACH	65-0196497	Page 4
Part VII	Investments-Other Securities.			
	Complete if the organization answered "Yes" to F	1		
	<ul> <li>(a) Description of security or category         <ul> <li>(including name of security)</li> </ul> </li> </ul>	(b) Book value	(c) Method of valuation: Cost or end-of-year market v	
			Goat of end-ox-year market v	
<ol> <li>Financial (</li> <li>Cleasty be</li> </ol>	derivatives			
2) Closely-ne	eld equity interests			
5) Other				
	·····			<b>.</b>
(C)				
(D)				
(E)				
(F)				
(G)	•••••••••••••••••••••••••••••••••••••••			<u> </u>
	n (b) must equal Form 990, Part X, col. (B) line 12.)			an di Albeda Diebare T
Part VIII	Investments—Program Related.		ine 11e Cas Farm 000 Dart V I	ine da
	Complete if the organization answered "Yes" to F			
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market v	
		-	Cost of end-oi-year market v	
<u>1)</u>				
2)				
<u>3)</u>				
(4)	•	,		
5)				
6)				
(7)				
(8)				
(9)				e ture av de l'hur de dag est off
	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.		ine 44d Cap Farm 000 Port V	line 15
•	Complete if the organization answered "Yes" to I	-0111 990, Part IV, 1		
	(a) Description			(b) Book value
( <u>1)</u>				
(2)				
(3)				•
4)				
5)				
6)			·	
(7)				
(8)				
9)	· · · · · · · · · · · · · · · · · · ·			
	(b) must equal Form 990, Part X, col. (B) line 15.)		<b>&gt;</b>	
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" to I	Form 990, Part IV,	line 11e or 11f. See Form 990, F	'art X,
	line 25.	1		
	(a) Description of liability	(b) Book value		
ineri	income taxes			
(2)				
3)				
(4)				
5)	·····			
6)				
7)				
8)				
9)				
( <b>9</b> )				

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.

Part XI Reconciliation of Revenue per Audited Financial S	tatements With Reve	nue per Return.	
Complete if the organization answered "Yes" to Form S		<b>[</b>	
1 Total revenue, gains, and other support per audited financial statements		1	
	•••••••••••••••••••••••••••••••••••••••		
a Net unrealized gains on investments	<u>2a</u>		
b Donated services and use of facilities	2b	vijitvi	
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIII.)	2d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	다. (1994년) 주요동(종)	
b Other (Describe in Part XIII.)			
c Add lines 4a and 4b		4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			· · · ·
Part XII Reconciliation of Expenses per Audited Financial S			
		enses per keturn.	
Complete if the organization answered "Yes" to Form S			
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a Donated services and use of facilities			
b Prior year adjustments	2b		
c Other losses	2c		
d Other (Describe in Part XIII.)	2d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	40		
a Investment expenses not included on Form 990, Part VIII, line 7b			
b Other (Describe in Part XIII.)	4b		
c Add lines 4a and 4b			
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	1	5	
	<u>9</u>	······································	
Part XIII Supplemental Information			
Part XIII Supplemental Information Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;	Part IV, lines 1b and 2b; Part	t V, line 4; Part X, line	
Part XIII Supplemental Information	Part IV, lines 1b and 2b; Part	t V, line 4; Part X, line	
Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Part	t V, line 4; Part X, line tion.	
Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	
Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	
Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	····;···
Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	
Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	·····
Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	
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Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	
Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	
Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	
Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	
Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	
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Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	· · · · · · · · · · · · · · · · · · ·
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Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	
Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	
Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	
Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	
Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	
Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	
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Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	
Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	
Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	
Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	
Part XIII         Supplemental Information           Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;           ; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII	Part IV, lines 1b and 2b; Par rovide any additional informa	t V, line 4; Part X, line tion.	

Schedule D (	Form 990) 2013	FRIENDS	OF MACARTHUR	BEACH	65-01964	97 Page 5
Part XIII	Suppleme	ntal Information	n (continued)			
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FRIENDS 06/27/2014 9:23 AM

SCHEDULE O		Supplemental li	nformation	to Form 990 or 99	90-EZ	ÓMB No. 1545-0047	
(Form 990 or 990-EZ)							
Department of the Treasury		► Attach to Form 990 or 990-EZ.					
Internal Revenue Service Name of the organization		tion about Schedule O (For		and its instructions is at	www.irs.gov/form9		
Hame of the organization	STATE		BLACH		65-0196497		
		I - ADDITIONAL PALM BCH CNTY :			URAL SCIENC	E EDUCATION	
FULFILLED N	ISSION	THROUGH FUNDI	NG TO PAR	K PROGRAMS, E	QUIPMENT, A	ND EVENTS.	
INCREASED A	WARENE	SS THROUGH FOC	USED MARK	ETING PLAN.			
INCREASED A	TTENDE	NCE FOR PROGRAM	MS, EVENT	S AND MEMBERS	HIP.		
· • • • • • • • • • • • • • • • • • • •							
FORM 990, I	ART II	I, LINE 4D - A	LL OTHER	ACCOMPLISHMEN	r		
VARIOUS GEN	IERAL A	CTIVITIES ASSO	CIATED WI	TH ALL THE PR	OGRAMS		
INCLUDING H	ROVIDI	NG ANIMAL FOOD	, AQUARIA	/CAGES/TANKS	AND VETERIN	NARIAN FEES.	
					• ,	·····	
FORM 990, I	PART VI	, LINE 11B - O	RGANIZATI	ON'S PROCESS	TO REVIEW H	FORM 990	
THE TAX RET	URN IS	SENT ELECTRON	ICALLY TO	ALL BOARD ME	MBERS FOR I	REVIEW AND	
APPROVAL BE	FORE F	ILING.					
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FORM 990, I	PART VI	, LINE 19 - GO	VERNING D	OCUMENTS DISC	LOSURE EXPI	LANATION	
UPON REQUES	ST		·····				
FORM 990, I	PART IX	, LINE 11G - O	THER FEES	FOR SERVICES			
DESCRIPTION	T		•				
· · · · · · · · · · · · · · · · · · ·		AM GEDUTCE	мст	C CENEDAT	ETINI	DRAISING	
· · · · · · · · · · · · · · · · · · ·		AM SERVICE	MG1	& GENERAL	FUNI	JAISING	
EXECUTIVE I	IRECTO	R			<u>.</u>		
····	\$	34,966	\$	13,449	\$	5,380	
GRANT EXPEN	ISES						
	\$	68,802	\$	1,404	\$	0	
NATURE EVEN	ITS						
		•••••••••••••••				•••••••••••••••••••••••••••••••••••••••	

Schedule O (Form 990 or 990 lame of the organization					Employer identit	
FR	IENDS	65-0196497				
Ś	5	57,564	\$	0	\$	0
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KAYAK PROGRAM				••••••••••••••••••••••••		• • • • • • • • • • • • • • • • • • • •
	\$	4,930	\$	0	\$	0
PARK SUPPORT	AND EQ	QUIPMENT		· · · · · · · · · · · · · · · · · · ·		
Ş	5	33,273	\$	0	\$	0
BUILDING CAMP						
			•••••			
	\$	36,378	\$	4,280	\$	2,140
ENDOWMENT EXP	INSES		,			
	\$	5,931	\$	847	\$	1,694
REPAIRS AND MA	AINTEI	NANCE				
Ę		5,177	\$	0	\$	0
			······		······	······
PARK IN-KIND (	CONTR.	IBUTION			·····	
	\$	7,496	\$	11,934	\$	0
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