

Florida Department of Environmental Protection

CITIZEN SUPPORT ORGANIZATION 2016 REPORT (pursuant to Florida Statute 20.058)

Citizen Support Organization (CSO) Name: <u>Stephen Foster Citizen Support Organization, Inc.</u>

Mailing Address: PO Box 666, White Springs, Florida 32096

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:

Preservation of the nature, history & culture of Stephen Foster Folk Culture State Park and Big Shoals Public Lands. We work with the Florida Park Service to enhance, protect, and promote the park.

Brief Description of the CSO's Results Obtained:

Entered into a new contract with Road Scholar with improved program activities and a price increase. Updated our accounting procedures including new computers and programs. Finished the Legends and Legacy Pathway to promote the Florida Folk Festival within the park. Donated \$30,000 for the performers at the Folk Festival. Had 39,997 visitors at the Festival of lights. Continue to support the many events with volunteers and financial support.

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

Continue to sponsor the Festival of Lights and Florida Folk Festival as well as all the other events at the parks. We received approval for the new structure thru the Partners in Parks Program and hope the legislature will fund the program this year so we can start construction.

Copy of the CSO's Code of Ethics attached (Model provided; see CSO 2014 instructions)

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

CSO Code of Ethics – July 2014

Stephen Foster Citizen Support Organization, Inc. CODE OF ETHICS

PREAMBLE

- (1) It is essential to the proper conduct and operation of Stephen Foster Citizen Support Organization, 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 Stephen Foster Citizen Support Organization, 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.

CSO Code of Ethics – July 2014

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.

Form **990**

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Return of Organization Exempt From Income Tax

OMB No. 1545-0047

							Exempt Fro ernal Revenue Code					2014
Dep		of the Treasury enue Service		► Do . ► Info	not enter social sermation about Form	ecurity numbers n 990 and its ins	on this form as it m tructions is at www	hay be mad v. <i>irs.gov</i> /	e public. form990.			Open to Public Inspection
<u>A</u>	For th	he 2014 calen		year, or tax year			, 2014, ar			31		, 2014
B	Check i	if applicable:	С	Name of organization	Stephen Fos	ter <u>C</u> itizen	Support Organ	nizatio	n, Inc.	D Employ	/er iden	tification number
	Ac	ldress change		Doing business as						59-	3135	743
	Na	ame change		Number and street (or	P.O. box if mail is not	delivered to street	address)	Room/si	uite	E Telepho	one num	ber
	Ini	itial return		<u>0. Box 666</u>			·····			(38	6) 3	97-4462
	Fin	al relunvterminated		City or town, state or p	rovince, country, and	ZIP or foreign posta	al code					
	An	nended return		ite Spring			FL 3	32096		G Gross r	eceipts	\$ 207,996.
	Ap	plication pending	F	Name and address of	principal officer:				•••	a group return	for sub	ordinates? Yes X No
				rol Stob Po	<u>D Box 782</u>	White	Springs FL 3	32096	H(b) Are all	subordinates attach a list. (included	I? Yes No
1		exempt status	X	501(c)(3) 50	l(c) ()◄	(insert no.)	4947(a)(1) or	527	11 110,	undon a nat. (300 1130	locoonsy
<u> </u>	Wel	bsite: 🕨 ht		://www.step	henfoster	cso.org/i	index.html	1	H(c) Group	exemption nu	mber 🕨	•
K		of organization:		Corporation Tru	st Association	Other ►	L Year	r of formation	n: 199	6 M 8	State of I	egal domicile: FL
Pa	irt I	Summar							<u> </u>			
	1	Briefly describ	be the	e organization's r	nission or most s	ignificant activ	vities: Suppo	ort and	benefit	. Stepher	n Fos	ter Cultural Center
e					-							
Ш										···· ··· ··· ··· ···		
Governance												
õ	23	Check this bo: Number of yet		If the organ	ization discontinu	Jed its operation	ons or disposed o	of more th	an 25% c	of its net as		
ార	-	Number of ind	dener	ndent voting men	overning body (i bers of the dove	rning body (P) art VI, line 1b) .	••••	• • • • •	••••	3	7
Activities	5	Total number	ofin	dividuals employ	ed in calendar ve	ar 2014 (Part	V, line 2a)	• • • • • •	•••••	• • • •	4	7
tivit	6	Total number	of vo	olunteers (estimat	te if necessary)		•••••				6	0
Ac	7a	Total unrelated	ed bu	siness revenue fr	om Part VIII, col	umn (C), line 1	12				7a	0.
_	b	Net unrelated	busi	ness taxable inco	ome from Form 9	90-T, line 34 .					7b	0.
									P	rior Year		Current Year
e										74,6	87.	27,408.
nue	9	Program servi	ice re	evenue (Part VIII,	line 2g)		• • • • • • • • •			181,7		110,032.
Revenue	10	Investment inc	come	e (Part VIII, colum	nn (A), lines 3, 4,	and 7d)	•••••			6,1	44.	3,103.
æ							11e)			47,7	80.	26,117.
							ımn (A), line 12)			310,4	01.	166,660.
							• • • • • • • • •			70,2	13.	31,340.
Se			alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)									
penses	16 a	Professional fu	undra	aising fees (Part	IX, column (A), li	ne 11e)	• • • • • • • • •					
Expe	b	Total fundraisi	ing e	xpenses (Part IX	, column (D), line	e 25) ►		0.	Mar Size	· · · · · · · · · · · · · · · · · · ·		Mar 12 18 Ce
щ	17	Other expense	es (P	art IX, column (A), lines 11a-11d,	11f-24e)	• • • • • • • • •			320,5		142,047.
							line 25) • • • •			390,7		173,387.
	19	Revenue less	expe	enses. Subtract li	ne 18 from line 1	2	•••••••			-80,3		-6,727.
2 8							h / AND		Beginnir	ng of Currer		End of Year
Not Assets or Fund Balances	20	Total assets (F	Part 2	X, line 16)						479,9		536,454.
A B	21	Total liabilities	s (Pa	rt X, line 26) • •						13,1		76,338.
8 F	22	Net assets or f	fund	balances. Subtra	act line 21 from li	ne 20				466,8		460,116.
Pa	rt II	Signature							-l			100/110.
Unde	r penaltie				s return, including acc	ompanying schedu	les and statements, an	d to the best	of my knowl	edge and bel	ef. it is t	rue, correct, and
comp	lete. Dec	claration of prepare	er (othe	er than officer) is based	d on all information of	which preparer has	any knowledge.		-			
			r	NM.	Slot					8/04/1	5	
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				Jasper			FL 32052			Phone no.	(38	6) 792-1906
							tions)					. X Yes No
BAA	For	Paperwork Re	educ	ction Act Notice	, see the separa	te instruction	15.	TEEA	0101 05/2	8/14		Form 990 (2014)

	990 (2014) Stephen Foster Citizen Support Organization, Inc.	59-3135743	Page 2
Par	have the entering of the second se		
<u> </u>	Check if Schedule O contains a response or note to any line in this Part III	<u> </u>	<i>.</i> []
1	Briefly describe the organization's mission:		
	Support and benefit Stephen Foster Cultural Center		
2	and the sign and the sign and the program between both and the post which were not here the		—
	Form 990 or 990-EZ?	[] Ye	s 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 service	es?Ye	es X 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 Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to and revenue, if any, for each program service reported.	 as measured by expe others, the total expension 	nses. ses,
4a	(Code:)(Expenses \$ 166,354. including grants of \$ 31,340.)	(Revenue \$	139,252.)
	Promoted cultural awareness at the Stephen Foster Folk Culture		139,232.
	via the following events:		
	Duloimor Detroit Fostival of Liebte Blanksstel		
	Florida Folk Festival, Old Time Music Camp, Quilt Shows,		
	Rural Folklife Days, Antique Tractor Shows, and numerous		
	craft shows.		
	Approximately 29,675 individuals attended the Park's Festival o		
	Approximatery 237073 individuals accended the raik 5 restival o		
	(Code:) (Expenses \$ including grants of \$)		
4.5		(Revenue \$)
			·
			• •• •• •• •• •• ••
. <u> </u>			
4 c	: (Code:) (Expenses \$ including grants of \$)	(Revenue \$)
4 c	Other program services. (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue	\$)
	Total program service expenses 166, 354.		
BAA	TEEA0102 05/28/14	F	orm 990 (2014)

Form 990 (2014) Stephen Foster Citizen Support Organization, Inc. Part IV Checklist of Required Schedules

59-	-3135743	Page 3

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A.	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (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	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.	11 a	x	
	b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b		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	11 c		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	11 d		x
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	ļ	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
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	x	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		x
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14	a 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 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	7 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	B 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	complete Schedule G, Part III	19		x
2	0 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20	b	

Form 990 (2014) Stephen Foster Citizen Support Organization, Inc. Part IV: Checklist of Required Schedules (continued)

23 Did the organization answer Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and forms' officers, fluedors, fluedors, trustees, key employees, and highest compensated employees? If Yes, complete Schedule 4, If Ye				Yes	No
column (A), line 221 If Yes,' complete Schedule (J. Parts I and III	1	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	х	
and former officers, directors, trustees, key employees, and highest compensated employees? If Yes, complete 23 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 was issued after December 31, 2002? If Yes, 'answer lines 24 bitruip? 24d and complete Schedule X. If Yus, 'go to line 25a. 24a b Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day and proceeds of tax-exempt bonds beyond a temporary pariod exception? 24b c Did the organization nearistin an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c 25a Section 501(c)(3), 501(c)(4), and 501(c)(23) organizations. Did the organization engage in an excess banefit transaction with a disqualified person in a prior year, and then the transaction report any amount on Part X. lipe 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, or disqualide persons? 25b 26 Did the organization or pay ables to any current or there assistance to an officer, director, trustee, key employee, substantial contributor or employee thered, a grant selection contributor or employees thered, a grant selection controbitotic or employees thered, a grant selection contributor or empl	2	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If Yes, 'complete Schedule I, Parts I and III	22		х
24 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, 20027 if Yes, 'answer lines 2x6 through 24d and 'complete Schedule I, Year, 'answer lines 2x6 through 24d and 'complete Schedule I, Year, 'answer lines 2x6 through 24d and 'complete Schedule I, 'answer lines 2x6 through 24d and 'complete Schedule I, 'answer lines 2x6 through 2x4 and 'complete Schedule I, 'answer lines 2x6 through 2x4 and 'complete Schedule I, 'answer lines 2x6 through 2x4 and 'complete Schedule I, 'answer lines 2x6 through 2x4 and 'complete Schedule I, 'answer lines 2x6 through 2x4 and 'complete Schedule I, 'answer lines 2x6 through 2x4 and 'complete Schedule I, 'answer lines 2x6 through 2x4 and 'complete Schedule I, 'answer lines 2x6 through 2x4 and 'complete Schedule I, 'answer lines 2x6 through 2x4 and 'complete Schedule I, 'answer lines 2x6 through 2x4 and 'complete Schedule I, 'answer lines 2x6 through 2x4 and 'complete Schedule I, 'answer lines 2x6 through 2x4 and 'complete Schedule I, 'answer lines 2x6 through 2x4 and 'complete Schedule I, 'answer lines 2x6 through 2x4 and 'complete Schedule I, 'and I'.'.'.'.'.'.'.'.'.'.'.'.'.'.'.'.'.'.'.	3	and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete	00		x
the last day of the year, that was issued after December 31, 2002? If Yes, 'ariswer lines 24b through 24d aid 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 24d d Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 24d 25 a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualided person time gives complete Schedule L, Part I 25a b Is the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustee, key employees, inghesi complexes or disqualified persons in prove year, and that the transaction as a grant selection committee member, or to a 35% controlled persons in prove year, and there were proves, trustees, key employees, highesi companisated maintoge a grant or other assistance to an efficer, director, trustee, key employees, so the services in the service in the service and the organization provide a grant or other assistance to an efficer, director, trustee, controlled entity or family member of any of the organization requires and the service and the secopelons? If Yes, complete Schedule L, Part IV	4 -		23		~
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c 24d 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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 // Yes, 'complete Schedule L, Part // 25b 26 Did the organization are not been reported on any of the organization's prior Forms 990 or 990-E27 // Yes, 'complete Schedule L, Part // 25b 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, or disqualided persons? 26 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV) 28 29 Was the organization receive more rofficer, director, trustee, or key employee? (I' Yes,' complete Schedule L, Part IV) 28a 29 Did the organization receive more than \$25,000 in non-cash contributions? If Yes,' complete Schedule L, Part I 29a 30 Did the organization sell, exchange, dispose 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		х
any tax-exempt bonds?. 24c 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), 501(c)(4), and 501(c)(29) 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 25b Did the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and thet the transaction to been reported on any of the organization proferms 900 or 930-EZ? If 'Yes,' complete Schedule L, Part I 25b 25b 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, or disqualified persons? 26 27 Did the organization provide a grant or other assistance to an officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 26 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV) 28a 29 Did the organization receive contributions of art, historical trassures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule L, Part IV 28a 29 Did the organization receive contributions of art, historical trassures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule L, Part IV 28a 29 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedu	b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		-
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 90 or 930-E27 If 'Yes,' complete Schedule L, Part I 25b complete Schedule L, Part I 25b 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, substantial contributor or employes 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 IV 26 27 Did the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 27 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28a 29 Did the organization receive contributions? If Yes,' complete Schedule L, Part IV 28a 29 A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a 29 Did the organization receive contificutions of art, historical treasures, or other similar assets, or qualified conservation contributions? If Yes,' complete Schedule L, Part IV 28a 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conserv	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		
transaction with a disqualified person during the year? If Yes,' complete Schedule L, Part I 25a b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has to been reported on any of the organization sprior Forms of 90 or 990-E27 If Yes,' complete Schedule L, Part I 25b 27 Did the organization report any amount on Part X, line 5. 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? 26 27 Did the organization report any amount on Part X, line 5. 6, or 22 for receivables from or payables to any current or of any of these persons? 26 27 Did the organization report any amount on Part X, line 5. 6, or 22 for receivables from or payable to any current or of any of these persons? 26 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for explicable ling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If Yes,' complete Schedule L, Part IV 28a 29 Did the organization receive more than \$25,000 in non-cash contributions? If Yes,' complete Schedule M 29 20 20 Did the organization receive contributions of art, historical trassures, or duelified conservation contributions? If Yes,' complete Schedule M 20 29 Did the organization receive controlutions of art, historical trassures, or other similar assets, or qualified conservation contributions	d	Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year?	24d		
that the fransaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If 'Yes', complete 25 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, trustees, key employees, highest compensated employees, or disqualified persons? 26 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereo1, a grant selection committee member, or to a 35% controlled entity of family member of any of these persons? If 'Yes,' complete Schedule L, Part II 26 28 Was the organization a party to a businese transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): 28 a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule M 29 29 Did the organization receive more than 325/000 in non-cash contributions? If 'Yes,' complete Schedule M 29 30 Did the organization sell, exchange, dispose of, or transfer more than 25% of the reganization under Regulations sections 301.7701-3? and 301.7701-3? if Yes,' complete Schedule R, Part I 31 31 Did the organization neelated only fax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part I, III, or IV, and Part V, line 1 32 <td>5a</td> <td>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I</td> <td>25a</td> <td></td> <td>x</td>	5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		x
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27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereol, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Ves,' complete Schedule L, Part II' 27 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): 28 28 Was the organization of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule N, Part I 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule N, Part I 30 31 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule N, Part I 31 32 Did the organization neceive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule N, Part I 31 33 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part I 31 34 Was the organization nealetad to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part I, III, or IV, and Part V, fine 1 35a 35a Did the organization nealetad	6	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?			x
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a c An entity of which a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 28c 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule N, Part I 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part I 31 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If 'Yes,' complete Schedule R, Part I 33 334 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 345 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax puppose? If 'Yes,' complete Schedule R, Part V, line 2 36 <tr< td=""><td>7</td><td>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</td><td></td><td></td><td> X</td></tr<>	7	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			 X
b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV. 28b c 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 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M 30 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 31 32 Did the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, II, or IV, and Part V, line 1 33 33 Did the organization nearce antrolled entity within the meaning of section 512(b)(13)? 35a 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 35a Did the organization s. Did the organization make any transfers to an exempt non-charitable related organization? 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	8	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
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officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part I 31 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 32 34 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part V, line 2 36 37 Did the organization complete Schedule R, Part V, line 2 36 38	b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28b		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 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 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 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 32 34 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 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 V, lines 11b and 19? 36	c	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
30 30 31 30 32 31 33 31 34 32 35 30 36 31 37 30 38 30 39 30 31 31 32 31 33 31 34 32 35 30 36 31 37 38 38 30 39 30 31 32 32 33 33 34 34 35 35 30 36 32 37 37 38 39 39 30 39 30 31 32 32 33 33 34 34 35 35 36 36 37 37 39 38 30	9	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete 32 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 33 34 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1 34 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 35a b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI 36 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 37	0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
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 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	2	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
and Part V, line 1	3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		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	4	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		x
 entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	5 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
organization? If 'Yes,' complete Schedule R, Part V, line 2 36 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 36	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	35Ь		x
treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	6		36		x
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	7	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		x
Note. All Form 990 filers are required to complete Schedule O	8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	x	

Form 990 (2014) Stephen Foster Citizen Support Organization, Inc.	59-3135743		Pa	age 5
Part V Statements Regarding Other IRS Filings and Tax Compliance				
Check if Schedule O contains a response or note to any line in this Part V				
			Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 0			Gigi -
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0			
				634
c Did the organization comply with backup withholding rules for reportable payments to vendors and (gambling) winnings to prize winners?	reportable gaming	1 c	x	and the second
		100	and a	terra d
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, filed for the calendar year ending with or within the year covered by this return	2a 0			
b If at least one is reported on line 2a, did the organization file all required federal employment tax re		2 b	1992	اشتفقته
		4 D 1973 197	CET AL	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction		المنتفة اله		لتضيفك
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		<u>X</u>
b If 'Yes' has It filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	· · · · · · · · · · · · · · · ·	3 b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or othe financial account in a foreign country (such as a bank account, securities account, or other financial	er authority over, a			
financial account in a foreign country (such as a bank account, securities account, or other financia	al account)? • • • • • • • • •	4a		_X
b If 'Yes,' enter the name of the foreign country: >				
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financia	al Accounts. (FBAR)			
5 a 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 trans	saction?	5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and dic solicit any contributions that were not tax deductible as charitable contributions?	the organization	~		х
		6 a		
b If 'Yes,' did the organization include with every solicitation an express statement that such contribu-	tions or gifts were	C L		
not tax deductible?		6 b	(all all careful a	Partney 1 A
7 Organizations that may receive deductible contributions under section 170(c).				1.55
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	or goods and			innin)
services provided to the payor?		7 a		<u>X</u>
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it	was required to file			
Form 8282?	· · · · · · · · · · · · · · · · · ·	7 c		X
d If 'Yes,' indicate the number of Forms 8282 filed during the year	_7 d			·•-
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefi	t contract?	7 e		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit co	ntract?	7 f		Х
g If the organization received a contribution of qualified intellectual property, did the organization file	Form 8899			
as required?		7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organ				
Form 1098-C?		7 h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund mainta		3923 Q	1971	
organization have excess business holdings at any time during the year?		8		Х
9 Sponsoring organizations maintaining donor advised funds.				
a Did the sponsoring organization make any taxable distributions under section 4966?		9a		Х
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9 b		X
10 Section 501(c)(7) organizations. Enter:	<u> </u>	23713	2463	New All
a Initiation fees and capital contributions included on Part VIII, line 12.	10-1			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				
			r (j	114
11 Section 501(c)(12) organizations, Enter:				
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.)		231	553	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of For		12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			
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?	· · · · · · · · · · · · · · · · · · ·	13a		
Note. See the instructions for additional information the organization must report on Schedule O.	le la		363	NAX-1
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	13b			
c Enter the amount of reserves on hand	13c			
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a	التكعفتينهم	X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedu		14b		
		140		

Page 6

Part	VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b belo a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes	w, and in	for	
	Schedule O. See instructions.			. X
Soot	Check if Schedule O contains a response or note to any line in this Part VI		· · ·	
Jeci	ion A. Governing body and Management	1	/es	No
	Enter the number of voting members of the governing body at the end of the tax year 1 a 7 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.			
2	Enter the number of voting members included in line 1a, above, who are independent 1b 7 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		<u>x</u>
	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		<u> </u>
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		х
	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
7 a	Did the organization have members or stockholders?	6 7 a		<u>x</u> 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?	7 b		x
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body? Each committee with authority to act on behalf of the governing body?	8 a 8 b	X X	
	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
Sect	tion B. Policies (This Section B requests information about policies not required by the Internal Reve		Yes	<u> </u>
10 a	Did the organization have local chapters, branches, or affiliates?	10 a	res	No X.
	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?	10 ь		
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	18.2.2		
12 a	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a		X
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c		
13	Did the organization have a written whistleblower policy?	13		<u>X</u>
14	Did the organization have a written document retention and destruction policy?	14	X	3
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?			
	The organization's CEO, Executive Director, or top management official	15a		X X
	Other officers or key employees of the organization	15b		
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
	If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16 b		
	tion C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed Florida Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only			
-	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 policy, and financial statements availat the public during the tax year.	able to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
		386) 3		
BAA	TEEA0106 11/13/14	Form	aan ((2014)

Form 990 (2014) Stephen Foster Citizen Supp Part VII Compensation of Officers, Director								es. Highest C	59-313574 ompensated Err	
Independent Contractors	e ,		-, -				· , -			ריין, ריי
Check if Schedule O contains a response or no										<u> </u>
Section A. Officers, Directors, Trustees, Key	/ Empl	oye	es,	an	d H	light	est	Compensate	d Employees	
 1 a Complete this table for all persons required to be listed. organization's tax year. List all of the organization's current officers, directors 	•	·								
compensation. Enter -0- in columns (D), (E), and (F) if no co	-									
 List all of the organization's current key employees, it List the organization's five current highest compensation who received reportable compensation (Box 5 of Form W-2 organization and any related organizations. 	ted empl	loyee	s (o	ther	thai	n an c	offic	er, director, trustee	e, or key employee)	
 List all of the organization's former officers, key empl of reportable compensation from the organization and any r 					ompe	ensat	ed e	employees who rea	ceived more than \$10	0,000
 List all of the organization's former directors or trus organization, more than \$10,000 of reportable compensatio 	tees that	trece	eiveo	l, in	the on ai	capao nd an	city v re	as a former directo	or or trustee of the s.	
List persons in the following order: individual trustees or dire employees; and former such persons.										d
X Check this box if neither the organization nor any relate	d organi	zatio	n co			ted a	ny c	urrent officer, dire	ctor, or trustee.	
				(C)						
(A) Name and Title	(B) Average hours per	than is	one both dir	box, u an of ector/	inless ficer i truste		n	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	week (list any	individual trustee or director	nstitutional trustee	Officer	Key e	Highest compensated employee	-om	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	hours for related prganiza-	dividual 1 director	lion	ę,	employee	oyee	ler			and related organizations
	tions	12	altr		oyee	odutic				
	dotted line)	lee	Istee			insat				
						g				
_(1) Carol Stob	6.00	x								
President	2.00									······································
(2) Jerry Lawrence Bullard	2.00	x								
(3) Dianne Simmons	2.00	1			<u> </u>					
Secretary	-	X	1							
(4) Scott Gay	4.00									
Treasurer		X								
(5) Tom Moore	1.00									
Member		X	ļ	ļ	ļ	ļ	ļ			
(6) Khyrs Kantarze	1.00									
Member	1 00	X		ļ						•=••••••••••••••••••••••••••••••••••••
(7) Julie Batusic	1.00	x								
					-	-		·····		
	-		1		1					
(9)	-									
(10)	-					1				
(11)	_									
(12)	-		+			1				·
(13)			1		1	1				
(14)	-	+			+					
ВАА	TEEA)107	02/23	7/14	<u>.</u>		•	1	<u> </u>	Form 990 (2014)

Form 990 (2014) Stephen Foster Citizen Support Organization, Inc. 59-3135743 Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organiza - tions below dotted line)	box	, unles cer an	ss pe	tion more rson is	than or a both s both s both employee	ne an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(15)							-			
(16)										
(17)										
(18)										
(19)										
(20)		-								
(21)										
(22)	+									
(23)				-						
(24)										
(25)										10
 1 b Sub-total c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited from the organization ► 	nA	•••	· · ·	•••	•••	••	► ►	d more than \$100,	000 of reportable co	
3 Did the organization list any former officer, director, on line 1a? If 'Yes,' complete Schedule J for such in-	or truste dividual	e, ke	y em	nploy	/ee, •••	or hig	jhes · ·	st compensated er	nployee	Yes No 3 X
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th such individual	ortable c nan \$150	ompe ,0007	ensa ? <i>If '</i> \ • • • •	tion Yes'	and com	othei plete	r coi Scl	mpensation from hedule J for		4 X
5 Did any person listed on line 1a receive or accrue co for services rendered to the organization? If 'Yes,' co	ompensa o <i>mplete</i> 3	tion f Sche	rom dule	any <i>J fo</i>	unre r suc	elated ch pei	l org	ganization or indivi	dual 	5 X
Section B. Independent Contractors 1 Complete this table for your five highest compensation compensation. Report compensation.	ed independent	ender or the	nt co cale	ntra	ctor	s that ar en	rec	eived more than \$ 1 with or within the	100,000 of organization's tax y	ear.
(A) Name and business addre								(B Description	3)	(C) Compensation
 2 Total number of independent contractors (including \$100,000 of compensation from the organization 	but not li ►	mitec	i to t	hos	e list	ed ab	ove) who received m	ore than	

Form 990 (2014) Stephen Foster Citizen Support Organization, Inc. 59-3135743 Part VIII Statement of Revenue

		an an Arrange an Arrange an Arrange Arrange an Arrange an A			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts s	1 a	Federated campaigns .	18					
ran un	b	Membership dues	11		and a second state	Sector and	ية. مريد بويد بويديني مريد	an a
Q E		Fundraising events		;			A. H. Martin	
it's		Related organizations .			A CONTRACT			
D iel		Government grants (contributio		-			na na kana merena Na na kana sera	
Contributions, Gifts, Grants and Other Similar Amounts		-						
E E	т	All other contributions, gifts, gra similar amounts not included al		27,408.	Esterny (chr.)s			
불히	a	Noncash contributions included	in lines 1a-1f:					
10 PE	_	Total. Add lines 1a-1f		·	27,408.	111、111112日		
<u> </u>				Business Code				
Ē	2 a	Admissions/regi	stration	900099	92,666.	92,666.	0.	0.
Program Service Revenue		Commissions		900099	12,738.	12,738.	0.	0.
<u>ice</u>		Vending machine	sales	900099	899.	899.	0.	0.
er (d			900099	3,279.	3,279.	0.	0.
E	e	Vendor fees		900099	348.	348.	0.	0.
gra		All other program service	revenue		102.	102.	0.	0.
Pro	c	Total. Add lines 2a-2f					A Section Sec	
	3	Investment income (inclu						
	Ū	other similar amounts) .	•••••	•••••••••••••	3,103.	3,103.	0.	0.
	4	Income from investment	of tax-exempt	bond proceeds 👝 🕈				
	5	Royalties						
			(i) Real	(ii) Personal		and the second		
	6 8	a Gross rents						
	ł	D Less: rental expenses						
	0	Rental income or (loss)			<u>ledel de an</u>	<u> 25/2/2 2/3/19</u>	M. Mary Same	<u>A an </u>
		d Net rental income or (los						Contraction and the management
	7	a Gross amount from sales of	(i) Securities	(ii) Other				
		assels other than inventory						
	1	b Less: cost or other basis				PERSONAL PROPERTY AND INC.	医生物 化油洗法	1833年18月1日 1947年1月1日
		and sales expenses • • •						la serie de la
		c Gain or (loss)				10.000 200 21	<u>, x , t t , t , t , t , t , t , t , t , </u>	
	1	d Net gain or (loss)	• • • • • • •	· · · · · · · · · · · · · · · · · · ·	·		Several second second second	
ne	8	a Gross income from fund	aising events			and Provide the second	1 < r < 1 < r < 1	
Ę		(not including \$		- 1	1.1277月1月1日月			
ě	1	of contributions reported						6
<u>ب</u> بر		See Part IV, line 18						
Other Reven		b Less: direct expenses		b	Reference a carrier			
Ò		c Net income or (loss) from				Charles Charles and Charles		NEW WARD AND AND AND AND AND AND AND AND AND AN
	9	a Gross income from gami See Part IV, line 19	ing activities.	a				
		b Less: direct expenses .		Ь		A MARINE STATE		
	1	c Net income or (loss) fror						n seran nance neuroineerij
					RSR MARK	Contraction of the second	Contraction and the Contract	
	10	a Gross sales of inventory and allowances		a 67,453.	mosquinaparas			
		b Less: cost of goods sold		b 41,336	14.00.7377.00.450.540.0544.0048.0018.00184			
		c Net income or (loss) from				26,117.	0.	
		Miscellaneous Reven		Business Code	ICS JOST VIST		MCR. L.VI SANCIVALS	
	11	а	<u> </u>					
		b						
		c						
		d All other revenue						
		e Total. Add lines 11a-11	d		►	18.27.37.37.27.29.29		1. A. 12. 3.
	12	Total revenue. See inst	tructions	· · · · · · · · · · · · · · ·	166,660	139,252	. 0	. 0.
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Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).
Check if Schedule O contains a response or note to any line in this Part IX.....

	Check if Schedule O contains a res not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and	(D) Fundraising
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	31,340.	31,340.	i de la comuna de la La comuna de la comun	
2	Grants and other assistance to domestic individuals. See Part IV, line 22 · · · · · ·				
3	Grants and other assistance to foreign organizations, foreign governments, and for- eign individuals. See Part IV, lines 15 and 16 .				nga na kasal ni ka ka kan Kana na na na
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				· · · · · · · · · · · · · · · · · · ·
10	Payroll taxes				
11	Fees for services (non-employees):				
a	Management				
E	Legal				
c	: Accounting			l	
c	Lobbying				
e	Professional fundraising services. See Part IV, line 17 🔒			an Mar Merry	
f	Investment management fees				
-	Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).				
	Advertising and promotion	24,507.	24,507.	0.	0.
13	Office expenses				
14	Information technology		*****************		
15	Royalties				
16					
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	······································			
22	Depreciation, depletion, and amortization	15.	0.	15.	0.
23 24	Insurance	аларана 1971 — Принска 1971 — Принс			
i	Bank_fees	10.	0.	10.	0.
	• <u>Credit card fees</u>	3,280.	2,681.	599.	0.
	^c <u>Dues_and_subscriptions</u>	745.	150.	595.	0.
1	d Instructors/performers fees	2,538.	2,538.	0.	ļ <u>.</u>
**	e All other expenses	110,952.	105,138.	5,814.	0.
25	Total functional expenses. Add lines 1 through 24e.	173,387.	166,354.	7,033.	0.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► if following SOP 98-2 (ASC 958-720)				
BA		TEEA0110 05			Form 990 (2014)

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		Check if Schedule O contains a response or note to any line in this Part X		
			(A) Beginning of year	(B) End of year
T	1	Cash – non-interest-bearing	101,231.	1 137,636.
	2	Savings and temporary cash investments	341,545.	2 344,641.
	3	Pledges and grants receivable, net		3
	4	Accounts receivable, net	0.	4
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6
\$	7	Notes and loans receivable, net		7
Assets	8	Inventories for sale or use	36,883.	8 53,872.
¥٩	9	Prepaid expenses and deferred charges		9
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		
	L		200	0c 305.
		Less: accumulated depreciation	320. 1	
	11	Investments – publicly traded securities		·····
	12	Investments – program-related. See Part IV, line 11		2 3
•	13			4
	14	Other assets. See Part IV, line 11		
	15			5
	16	Total assets. Add lines 1 through 15 (must equal line 34)		6 <u>536,454</u> . 7 76,338.
	17 18	Grants payable		7 76,338. 8
	10 19	Deferred revenue		9
	20	Tax-exempt bond liabilities	······	20
s	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		TE Standard Charles
ia.			2	2
	23	Secured mortgages and notes payable to unrelated third parties	2	23
	24	Unsecured notes and loans payable to unrelated third parties		24
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	2	!5
	26	Total liabilities. Add lines 17 through 25	13,136. 2	26 76,338.
es		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.		
- N	27	Unrestricted net assets	466,843.	460,116.
Sala	28	Temporarily restricted net assets		28
d E	29	Permanently restricted net assets		29
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.		
ō	30	Capital stock or trust principal, or current funds	an ann a sao an	ang
ěţ	31	Paid-in or capital surplus, or land, building, or equipment fund		31
A SS	32	Retained earnings, endowment, accumulated income, or other funds		32
et	33	Total net assets or fund balances.		33 460,116,
Ť	55	Total liabilities and net assets/fund balances		34 536,454

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Form 990 (2014)

Form	n 990 (2014) Stephen Foster Citizen Support Organization, Inc. 59-	3135743	Page 12
Par	t XI Reconciliation of Net Assets		_
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1	166,660.
2	Total expenses (must equal Part IX, column (A), line 25)	2	173,387.
3	Revenue less expenses. Subtract line 2 from line 1	3	-6,727.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4	466,843.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	10	460 116
-	column (B))	10	460,116.
Pa	rt XII Financial Statements and Reporting		L1
	Check if Schedule O contains a response or note to any line in this Part XII	• • • • • •	<u>···//</u>
			Yes No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain		
	in Schedule O.		
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a		
	separate basis, consolidated basis, or both:		End MARKED
			2 b X
	b Were the organization's financial statements audited by an independent accountant?		2 b X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:		
	X Separate basis Consolidated basis Both consolidated and separate basis		
	c If Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aud	it	in an
	review, or compilation of its financial statements and selection of an independent accountant?		2 c X
	If the organization changed either its oversight process or selection process during the tax year, explain		
	in Schedule O.		
	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a X
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required a	udit	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 b
BA.	Α		Form 990 (2014)

		Public Charit	y Status and Pเ	ublic	Supp	ort	OMB No. 1545-0047
SCHEDULE A (Form 990 or 990-EZ)	Comp		on is a section 501(c)(3 (1) nonexempt charitab	or a section	2014		
		► Attac	h to Form 990 or Form	990-EZ			2. mar 19/2 -
Department of the Treasury Internal Revenue Service	► Info		ule A (Form 990 or 990 t www.irs.gov/form990		d its ins	tructions is	Open to Public Inspection
Name of the organization						Employer identifical	ion number
Stephen Foster	Citizen S	upport Organi:	zation, Inc.			59-3135743	}
Part I Reason fo				mplete	this pa	art.) See instruction	s.
The organization is not a	a private foundatio	on because it is: (For li	nes 1 through 11, check	only one	e box.)		
1 A church, con	vention of church	es, or association of cl	nurches described in sec	tion 17	D(b)(1)(A	A)(i).	
2 A school desc	ribed in section '	170(b)(1)(A)(ii). (Attac	h Schedule E.)				
			on described in section	170(b)(⁻	I)(A)(iii)	•	
	•	•	ion with a hospital descri	• • •			e hospital's
name, city, an	-	,,					•
5 An organizatio		e benefit of a college c art II.)	r university owned or op	erated b	y a gove	ernmental unit described	in section
			unit described in sectio	n 170(b)	(1)(A)(v	·).	
7 An organization	on that normally re 0(b)(1)(A)(vi). (C	eceives a substantial p complete Part II.)	art of its support from a	governm	iental un	it or from the general pu	blic described
8 A community	trust described in	section 170(b)(1)(A)(vi). (Complete Part II.)				
from activities investment in	related to its exe come and unrelat	mpt functions - suble	33-1/3% of its support fr ct to certain exceptions, i come (less section 511 t	and (2) r	no more	than 33-1/3% of its supp	ort from gross
			o test for public safety. S	ee secti	ion 509(a)(4).	
	-		or the benefit of, to perfo				irposes of one
or more public	clv supported ora	anizations described in	erting organization and o	ction 50)9(a)(2).	See section 509(a)(3).	Check the box in
organization(s	porting organizati s) the power to re rt IV, Sections A	gularly appoint or elect	ed, or controlled by its su a majority of the directo	pported	organiza stees of	ation(s), typically by givir the supporting organizat	ng the supported ion. You must
b Type II. A sup management	porting organizat	tion supervised or cont organization vested in	rolled in connection with the same persons that o	its supp control o	orted or r manag	ganization(s), by having e the supported organiz	control or ation(s). You
c Type III func	tionally integrate s) (see instruction	ed. A supporting organ is). You must comple	ization operated in conn te Part IV, Sections A, I	ection w D, and E	ith, and :	functionally integrated w	ith, its supported
d Type III non- functionally in instructions).	functionally intentented intentented in the second se	grated. A supporting c panization generally mu lete Part IV, Sections	organization operated in o ust satisfy a distribution r A and D, and Part V.	connecti equirem	on with i ent and	ts supported organizatio an attentiveness require	n(s) that is not ment (see
e Check this bo	ox if the organizati		letermination from the IF				
f Enter the numbe	r of supported org	ganizations					
g Provide the follow	wing information a	about the supported or	ganization(s).				
(i) Name o orga	of supported nization	(II) EIN	 (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) 	(iv) Is organizatio in your go docun	on listed	(v) Amount of monetary support (see instructions)	(VI) Amount of other support (see instructions)
				Yes	No		
<u> </u>		· · · · · · · · · · · · · · · · · · ·		143		1	
(A)							
<u>(n)</u>			· · · · · · · · · · · · · · · · · · ·				······································
<u>(B)</u>							
<u>(C)</u>						1	
<u>(D)</u>							
(E)							
Total							
BAA For Paperwork	Reduction Act N		tions for Form 990 or 9	90-EZ.		Schedule A (For	n 990 or 990-EZ) 2014

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

Sect	tion A. Public Support					······································	
Caler begir	ndar year (or fiscal year nning in) ►	(a) 2010	(b) 2011	. (c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
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						
4	Total. Add lines 1 through 3						
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						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year nning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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 (Explain in Part VI.)						
11	Total support. Add lines 7 through 10					inn - Maine	
12	Gross receipts from related activit	ties, etc (see instru	ctions)			12	
13	First five years. If the Form 990 organization, check this box and	is for the organizati stop here	ion's first, second,	third, fourth, or fifth	n tax year as a sec	tion 501(c)(3)	
	tion C. Computation of Pu						
14	Public support percentage for 20	14 (line 6, column (f) divided by line 1	1, column (f)) • •	•••••	14	%
15	Public support percentage from 2	013 Schedule A, P	art II, line 14		••••••	15	%
16	a 33-1/3% support test – 2014. If and stop here. The organization	f the organization d qualifies as a publi	id not check the bo cly supported orga	ox on line 13, and I inization	he line 14 is 33-1/3	3% or more, check t	his box · · · · · · · ►
1	b 33-1/3% support test – 2013. If and stop here. The organization	the organization di qualifies as a publ	d not check a box icly supported orga	on line 13 or 16a, anization	and line 15 is 33-1/	3% or more, check	this box · · · · · · ►
17	a 10%-facts-and-circumstances to or more, and if the organization n the organization meets the 'facts-	neets the 'facts-and	i-circumstances' te	st. check this box	and stop here. Ex	olain in Part VI how	
	b 10%-facts-and-circumstances for more, and if the organization n organization meets the 'facts-and	neets the 'facts-and I-circumstances' te	l-circumstances' te st. The organizatio	est, check this box n qualifies as a pu	and stop here. Ex blicly supported or	plain in Part VI how ganization	the ►
18	Private foundation. If the organi	ization did not chec	k a box on line 13,	, 16a, 16b, 17a, or	17b, check this bo	x and see instructio	ns ►

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support			<u></u>			
~~~~~	dar year (or fiscal yr beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants.')	60,782.	64,899.	146,881.	74,687.	27,423.	374,672.
2	Gross receipts from admis- sions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's	00,782.	04,099.	140,001.			
3	tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 .	274,452.	185,013.	184,605.	229,570.	138,219.	1,011,859.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
	Total. Add lines 1 through 5	335,234.	249,912.	331,486.	304,257.	165,642.	1,386,531.
	2, and 3 received from disqualified persons						······································
t	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						
c	Add lines 7a and 7b						
8	Public support         (Subtract line           7c from line 6.)         .						1,386,531.
Sec	tion B. Total Support						
Caler	ndar year (or fiscal yr beginning in) 🕨	<b>(a)</b> 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6	335,234.	249,912.	331,486.	304,257.	165,642.	1,386,531.
	a Gross income from interest, dividends, payments received on securities loans, rents, royaliles and income from similar sources D'Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	7,799.	8,453.	7,262.	6,144.	3,103.	32,761.
(	Add lines 10a and 10b	7,799.	8,453.	7,262.	6,144.	3,103.	32,761.
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 VI.)						
	<b>Total support.</b> (Add lines 9, 10c, 11 and 12.)	343,033.					1,419,292.
14	First five years. If the Form 990 is organization, check this box and s	s for the organizati	on's first, second, f	third, tourth, or fifth	1 tax year as a sect	uon 501(c)(3)	
Sec	ction C. Computation of Pu						
15				3, column (f)) • •		15	97.69 %
16	Public support percentage from 20						97.00 %
Sec	ction D. Computation of Inv	vestment Inco	me Percentag	e		•	
17	Investment income percentage for	2014 (line 10c, cc	lumn (f) divided by	y line 13, column (f			2.31 %
18	Investment income percentage fro						3.00 %
	a 33-1/3% support tests – 2014. If is not more than 33-1/3%, check the	his box and stop h	ere. The organiza	tion qualifies as a	publicly supported	organization	► X
	b 33-1/3% support tests – 2013. If line 18 is not more than 33-1/3%, Private foundation. If the organiz	check this box and	l stop here. The o	rganization qualifie	es as a publicly sup	ported organizatio	on ► 📋
ZU RA/		adun diu not checi	TEEA0403				90 or 990-EZ) 2014

Part IV Supporting Organizations (Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

### Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1 1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
3 :	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a	A LOAD AND	
I	b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If 'Yes,' describe in Part VI when and how the organization made the determination</i>	3b		
(	c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in <b>Part VI</b> what controls the organization put in place to ensure such use	3c		
4 :	a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
1	b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
	c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5	a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)			
	<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	<u>) (1</u> 5b		
	c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		terrette opened
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990)			
9	a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in <b>Part VI</b>	9a	1993 1993 1994 1994	
	b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in <b>Part VI</b>	<u>3333</u> 91		6953
	c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in <b>Part VI</b>	90		
10	a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If 'Yes</i> ,' <i>answer (b) below</i>	10a		
	b Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.).	10k	1	

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014	Stephen Fost	er Citizen	Support	Organization,	Inc.	59-3135743	Page 5
Part IV Supporting Organizat	ions (continue	d)					

		Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?			5
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	in Stan St	لشنف	المتخلطة
governing body of a supported organization?	11a		
b A family member of a person described in (a) above?	11b		
c A 35% controlled entity of a person described in (a) or (b) above? If Yes' to a, b, or c, provide detail in Part VI	11c		

### Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year			
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supported organization(s) that operated, supervised, or controlled the supported organization(s) that operated, supervised, or controlled the	2		

supporting organization . . . .

### Section C. Type II Supporting Organizations

1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees		
	of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the	ا ملك فيه ا	4
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1	

### Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization</i> (s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		

### Section E. Type III Functionally-Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):
  - The organization satisfied the Activities Test. Complete line 2 below. а

b	The organization is the	parent of each of its supp	orted organizations.	Complete line 3 below
---	-------------------------	----------------------------	----------------------	-----------------------

- The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). С
- Activities Test Answer (a) and (h) below

2	Activities Test. Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	<ul> <li>Parent of Supported Organizations. Answer (a) and (b) below.</li> <li>a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of</li> </ul>			
	each of the supported organizations? Provide details in Part VI.	3a	1217.459	10-2-12-F
	<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in <b>Part VI</b> the role played by the organization in this regard	3b		<u>619</u>

Yes No

Schedule A (Form 990 or 990-EZ) 2014 Stephen Foster Citizen Support Organization, Inc. 59-3135743

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

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on November 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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

7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

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Schedule A (Form 990 or 990-EZ) 2014

Page 6

_	dule A (Form 990 or 990-EZ) 2014	pporting Organiza	tions (continued)	Page 7
	tion D – Distributions	· · · · · · · · · · · · · · · · · · ·		Current Year
1	Amounts paid to supported organizations to accomplish exempt purpose	95		
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	is,		
3	Administrative expenses paid to accomplish exempt purposes of support			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions	······································		
7	Total annual distributions. Add lines 1 through 6			······································
8	Distributions to attentive supported organizations to which the organization Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required — see instructions)			
3	Excess distributions carryover, if any, to 2014:		A Later and the second second	Carl Carl Carl
а				
b			AND ALL AND	Service and the service of the servi
C			Care and a straw and	
Ċ			State Spectrum 1	
e	From 2013			C. A. S. A.
1	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount		A STATE CANADA STATE	
 	Carryover from 2009 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section D, line 7: \$		C	
e	Applied to underdistributions of prior years	a starte de la companya		( ) and a start of the start of
t	Applied to 2014 distributable amount	THE REAL PROPERTY OF	Martin Contractor	
	Remainder. Subtract lines 4a and 4b from 4		Martin P.	A Lange Star
5	Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			harie Honescharten
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7	Excess distributions carryover to 2015. Add lines 3j and 4c			
8	Breakdown of line 7:	a state at a se		12 130 12 14 14 1
			THE REPORT	07.00 840 ¹ 09.00.00
				NUMBER NOT THE ST
			1999 B.	
(	Excess from 2013	C. C		「「「「「「「」」」
	Excess from 2014	Card States Printer	Contraction of the	-37-3. 1993 344-1994 -
		· · · · · · · · · · · · · · · · · · ·	er som en	<ul> <li>Construction of the construction of the second s Second second s Second second s</li></ul>

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Schedule A (Form 990 or 990-EZ) 2014

**Part VI** Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

BAA

Page 8

or 990-PF)

# Schedule of Contributors

OMB No. 1545-0047

2	0	1	4

Y Attach to Form 990, Form 990-EZ, or Form 990-PF Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number 59 - 3135743

Organization type (check one):	
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
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

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

Stephen Foster Citizen Support Organization, Inc.

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

### General Rule

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

### Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

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).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)	Page	1	of	1	of Part 1
Name of organization	Employer l	dentific	cation numbe	r	
Stephen Foster Citizen Support Organization, Inc.	59-313	3574	13		

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

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1                                    </u>	Florida Department of Environmental Protection 3900 Commonwealth Blvd M.S. 49 Tallahassee FL 32399	\$ <u>31,340</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

0.01			OMB No. 1545-0047					
	1EDULE D rm 990)	► Complet	plemental Financial e if the organization answered	Yes.' to Form 99	90.		201	4
_			6, 7, 8, 9, 10, 11a, 11b, 11c, 11c ► Attach to Form 990	•			Open to P	-
Interna	Iment of the Treasury al Revenue Service	Information about Sche	dule D (Form 990) and its inst	ructions is at ww	w.irs.gov/for		Inspection	
Name	of the organization					Employer I	dentification numb	er
	Stephen H	Foster Citizen Sup	port Organization,	Inc.		59-313	5743	
Par	t   Organiza	tions Maintaining Dong	or Advised Funds or Oth	er Similar Fur			0140	······································
	Complete	if the organization answ	ered 'Yes' to Form 990, P	art IV, line 6.				
			(a) Donor advised f	unds	(b) Fi	unds and o	other accounts	
1 2		nd of year						
2		ants from (during year)				<b></b>		
4		at end of year			· · · · · · · · · · · · · · · · · · ·		······	······································
5	Did the organization	on inform all donors and donor	advisors in writing that the asse ganization's exclusive legal cont	ets held in donor ac	dvised funds	F	]Yes [	No
6	÷		and donor advisors in writing th			i		]100
Ū	for charitable purp	oses and not for the benefit of	the donor or donor advisor, or f	or any other purpo	se conferring	-	]Yes [	<b>1</b>
<b>1</b> 1113			•••••••			· · · ·	fes	No
Par		ation Easements. if the organization answ	ered 'Yes' to Form 990, P	art IV. line 7.				
1		~~~~~	he organization (check all that a					
	Preservation of	of land for public use (e.g., rec	reation or education)	Preservation of	f a historically	important	land area	
	Protection of r	natural habitat		Preservation of	f a certified his	storic struc	cture	
	Preservation (							
2	Complete lines 2a last day of the tax	through 2d if the organization year.	held a qualified conservation co	ontribution in the fo	rm of a conse	rvation ea	sement on the	
					E F	leld at the	End of the Ta	x Year
			••••••••••		Lange and the second se			
		-	ents			ana ci		<del>,</del>
			d historic structure included in (	•				
(	structure listed in	the National Register	(c) acquired after 8/17/06, and n	iot on a historiç	. 2d			
3	Number of conser tax year ►	rvation easements modified, tra	ansferred, released, extinguishe	d, or terminated by	the organiza	tion during	j the	
4	Number of states	where property subject to con	servation easement is located >					
5 6	and enforcement	of the conservation easements	arding the periodic monitoring, in s it holds?				Yes	]No
-	►			··	· · · · · · · · · · · · · · · · · · ·			
7	Amount of expens	ses incurred in monitoring, insp	pecting, and enforcing conservat	lion easements du	ring the year			
8	and section 170(h	ı)(4)(B)(ii)?	line 2(d) above satisfy the requir			••••		No
9	include, if applical conservation ease	ble, the text of the footnote to t ements.	ts conservation easements in its he organization's financial state	ments that describ	es the organiz	ation's ac	counting for	d
Pa	<b>till Organiza</b> Complete	tions Maintaining Colle if the organization answ	ections of Art, Historical vered 'Yes' to Form 990, P	l <b>Treasures, o</b> i Part IV, line 8.	r Other Sin	nilar As	sets.	
1	art, historical trea	sures, or other similar assets h	FAS 116 (ASC 958), not to report held for public exhibition, educat al statements that describes the	ion. or research in	atement and furtherance o	balance sl f public se	neet works of rvice, provide,	
	historical treasure following amounts	es, or other similar assets held s relating to these items:	FAS 116 (ASC 958), to report in for public exhibition, education,	or research in furth	nerance of pu	blic servic	e, provide the	
	(i) Revenue incl	uded in Form 990, Part VIII, lir	ne 1		• • • • • • •	<b>≻</b> \$		
2	If the organization	n received or held works of art,	historical treasures, or other sir	nilar assets for fina				
			16 (ASC 958) relating to these it			►\$	5	
	b Assets included in	n Form 990, Part X				►\$	5	
BA	A For Paperwork I	Reduction Act Notice, see th	e Instructions for Form 990.	TEEA3301	10/28/14	Sche	dule D (Form 99	90) 2014

Schedule D (Form 990) 2014 Stephe				59-3135	
Part III Organizations Mainta	ining Collection	s of Art, Histo	orical Treasures, or	r Other Similar Ass	ets (continued)
3 Using the organization's acquisition items (check all that apply):	n, accession, and othe	er records, check	any of the following that	are a significant use of its	collection
a Public exhibition		d Loan d	or exchange programs		
b Scholarly research		e Other			
c Preservation for future general					
4 Provide a description of the organi: Part XIII.					
5 During the year, did the organization to be sold to raise funds rather that	on solicit or receive do n to be maintained as	phations of art, his part of the organi	torical treasures, or othe zation's collection?	r similar assets	Yes
<b>Part IV</b> Escrow and Custodia line 9, or reported an a	I Arrangements. mount on Form 9	Complete if th 90, Part X, line	e organization answ e 21.	wered 'Yes' to Form	990, Part IV,
1 a Is the organization an agent, truste on Form 990, Part X?	ee, custodian, or other	intermediary for o	contributions or other ass	sets not included	Yes No
b If 'Yes,' explain the arrangement in	Part XIII and comple	te the following ta	ble:		·····
					Amount
c Beginning balance					
d Additions during the year					
e Distributions during the year					
f Ending balance					
2 a Did the organization include an arr				La La	
b If 'Yes,' explain the arrangement in	Part XIII. Check here	if the explanation	has been provided in P	art XIII	[]
Part V Endowment Funds. C	complete if the or	anization ans	wered 'Yes' to Form	990 Part IV line 10	)
	(a) Current year	(b) Prior year			(e) Four years back
1 a Beginning of year balance	(a) carcin jear				
b Contributions					
c Net investment earnings, gains,					-
and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance		1			<u> </u>
2 Provide the estimated percentage	•	• •	g, column (a)) held as:		
a Board designated or quasi-endow		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
b Permanent endowment 🕨	<del>2</del> 8	_			
c Temporarily restricted endowment		00			
The percentages in lines 2a, 2b, a	nd 2c should equal 10	00%.			
3 a Are there endowment funds not in organization by:	the possession of the	e organization that	t are held and administer	ed for the	Yes No
(i) unrelated organizations					. 3a(i)
(ii) related organizations					. 3a(ii)
<b>b</b> If 'Yes' to 3a(ii), are the related org	ganizations listed as re	equired on Sched	ule R?		. 3b
4 Describe in Part XIII the intended	uses of the organizati	on's endowment f	unds.		
Part VI Land, Buildings, and	Equipment.				
Complete if the organi	zation answered '	Yes' to Form 9	990, Part IV, line 11a	a. See Form 990, Pa	rt X, line 10.
Description of property	(a) Co: (i	st or other basis nvestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1 a</b> Land				A CONTRACTOR	
<b>b</b> Buildings					
c Leasehold improvements					
d Equipment			16,631.	16,326.	305.
e Other					
Total. Add lines 1a through 1e. (Column	n (d) must equal Form	990, Part X, colu	mn (B), line 10c.)		305.
BAA	-			Sched	ule D (Form 990) 2014

Part VII Investments – Other Securities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

Complete il the organization answered	<u>res lo roini 990, i</u>	Falliv, line Thu See Form 330,	r alt A, into 12.
(a) Description of security or calegory (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1) Financial derivatives			<u> </u>
(2) Closely-held equity interests			
(3) Other	······································		
(A)			
(B)	•		
	-		
(D)	-		
(E)			
(F)	•		
(G)			
(H)	-		
(I)	-		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)	-		
<b><u>Part VIII</u></b> Investments – Program Related. Complete if the organization answered		Part IV, line 11c. See Form 990,	Part X, line 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)		· ·	
(7) .			
(8)			
(9)			
(10)	-		an a hannan sy'n san s san a baan yn straan de straan de straan de straan de straan de straan de straan st
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.).	<u> </u>		
<b>Part IX</b> Other Assets. Complete if the organization answered	'Yes' to Form 990	Part IV line 11d See Form 990	Part X line 15
	escription		(b) Book value
(1)			
(2)			
(3)			
(4)	AIN		
(5)			
(6)			
(7)			
(8)			
		······································	
Total. (Column (b) must equal Form 990, Part X, column (B)	line 15 )		<b>&gt;</b>
	, 116 10.)		
Part X Other Liabilities. Complete if the organization answered 'Yes' to	Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	25
(a) Description of liability	(b) Book valu		
(1) Federal income taxes			
(2)			ter en de la companya de la company Esta de la companya d
(3)			
(4)			
(5)			
(6)			
(7) (8)			
(9)			
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)			
2 Liability for uncertain tax positions. In Part XIII, provide the text of the for		inancial statements that reports the proparization's	liability for uncortain

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's linancial 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.

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Page 3

	9-3135743	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn.	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	. 1	166,660.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities	-	
c Recoveries of prior year grants	- 300	
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	· 2e	
3 Subtract line 2e from line 1	. 3	166,660.
4 Amounts included on Form 990, Part Vill, line 12, but not on line 1:	226	
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
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.)	. 5	166,660.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	· Return.	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements.	. 1	173,387.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	5.221	
a Donated services and use of facilities		
b Prior year adjustments	- [1997]	
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	. 2e	
3 Subtract line 2e from line 1	. 3	173,387.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	All and a second s	
b Other (Describe in Part XIII.)		
C Add lines 4a and 4b		
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	. 5	173,387.
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 V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

BAA

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Schedule D (Form 990) 2014

SCHEDULE I (Form 990)	Gove	Grants and Oth overnments, ar	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States	o Organization the United St	s, ates		OMB No. 1545-0047 2014
Department of the Treasury	Complet	e if the organizations about Schedule 1 (	Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22.  Attach to Form 990.  Information about Schedule 1 (Form 990) and its instructions is at www.irs.gov/form990.	rrm 990, Part IV, line 2 [.] ). uctions is at <i>www.irs.</i> c	l or 22. jov/form990.		Open to Public Inspection
Internal Kevenue Service Name of the organization						Employer identification number	ation number
Stephen Foster Citizen Supr	Support Organization	ion, Inc.				59-3135743	3
<b>Parking General Information on Grants and Assistance</b>	rants and Assista	nce					
1 Does the organization maintain records to substantiate the amount of the the selection criteria used to award the grants or assistance?	to substantiate the am grants or assistance?	ount of the grants o	grants or assistance, the grantees' eligibility for the grants or assistance, and	s' eligibility for the grants or assistance,	s or assistance, and		X Yes
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	rocedures for monitorin	g the use of grant fu	unds in the United States	•			
<b>Part III</b> Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answer Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	nce to Domestic ( or any recipient the	<b>Organizations</b> and treceived more	and Domestic Gove than \$5,000. Part I	ernments. Comple	Complete if the organization answered 'Yes' to plicated if additional space is needed.	ion answered 'Ye e is needed.	s' to
<ol> <li>(a) Name and address of organization or government</li> </ol>	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	<ul> <li>(g) Description of non-cash assistance</li> </ul>	(h) Purpose of grant or assistance
(1) Elorida_Dept_of_Environme 11016_Lillian_Saunders_Dri White Springs FL 32096	59-6007353			31, 340. Book	Book - cost	equipment and	Improve Stephe
(3)							
<u>(4)</u>		-					
(e)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	and government organ	izations listed in the	line 1 table	•	•		
3 Enter total number of other organizations listed in the line 1 table BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ns listed in the line 1 tal e, see the Instructions	for Form 990.	• • • • • • • • • • • • • • • • • • • •	TEEA3901 06/19/14	06/19/14	Schedu	

Schedule I (Form 990) (2014) Stephen Faste	Stephen Foster Citizen Support Organization, Inc.	port Organizat	ion, Inc.	ß	59-3135743 Page 2
le a	Domestic Individu ce is needed.	uals. Complete if th	ie organization ansv	vered 'Yes' to Form 990	, Part IV, line 22. Part III
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
•					
4 ~~					
4					
Co.					
Q					
~					
Ractive Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	de the information	required in Part I, li	ne 2, Part III, colum	n (b), and any other add	litional information.

TEEA3902 10/28/14

Schedule I (Form 990) (2014)

SCHEDULE O	Supplemental Information to Form 990	) or 990-EZ	OMB No. 1545-0047	
(Form 990 or 990-EZ)	Complete to provide information for responses to specif Form 990 or 990-EZ or to provide any additional in ► Attach to Form 990 or 990-EZ.	ic questions on	2014	
Department of the Treasury Internal Revenue Service	<ul> <li>Attach to Form 990 or 990-EZ.</li> <li>Information about Schedule O (Form 990 or 990-EZ) and at www.irs.gov/form990.</li> </ul>	its instructions is	Open to Rublic Inspection	
Name of the organization		Employer identific	cation number	
Stephen Foster Citizen Support Organization, Inc. 59-3135		59-313574	43	
Pt VI, Line 11	President and treasurer review the Form b meeting prior to filing.	with the Board at	t the Monthly	

Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ	
Form 990, Page 10, Line 24e All Other Expenses (continued)	

Description	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
Insurance	302.	0.	302.	0.
Licenses and permits	1,542.	1,310.	232.	0.
Lodging	2,249.	2,249.	0.	0.
Meals and food	10,945.	10,770.	175.	0.
Equipment/supplies	1,598.	0.	1,598.	0.
Payroll (reimb State of FL)	12,000.	12,000.	0.	0.
Postage	620.	540.	80.	0.
Printing	899.	899.	0.	0.
Professional fees	2,250.	<u> </u>	2,250.	0.
Provider fees	12,160.	12,160.	0.	0.
Recognition	40.	40.	0.	0.
Rental equipment	822.	822.	0.	0.
Repairs and maintenance	1,139.	915.	224.	0.
Supplies - office	1,062.	1,062.	0.	0.
Supplies - other	18,647.	18,647.	0.	0.
Supplies - misc	1,899.	1,235.	664.	0.
<u>Utilities - electric</u>	16,707.	16,707.	0.	0.
Phone	1,680.	1,680.	0.	0.
Misc/other	618.	329.	289.	0.
Park fees	23,773.	23,773.	0.	0.

Client	Status
--------	--------

2015

Name		Employer ID nu				
Stephen Foster Citizen Support Organiza	ation, Inc.	59-313574	3			
Check the appropriate box below to update this client's	statua	<b>.</b>				
Client Status► Extension Accept		Date	05/13/16			
Client Number	olaids	Date	03/13/10			
The last box checked will be the current status.			Date			
X Client information transferred to current year						
Appointment scheduled for (time and date) Received client's tax data	•					
Client's tax return is in process						
Need more information from client (specify below						
	-	-				
Data input completed.						
Draft copy of tax return printed            Extension filed						
X         If filing electronically, extension filed	••••••	••••••	05/13/16			
X         If filing electronically, extension accepted by IRS		· · · · · · · · · · · ·	05/13/16			
Second extension filed						
Sent to reviewer						
Review completed						
Final tax return printed						
Informed client of return completion						
	450	••••••				
Electronic filing signatures needed (Form 8879, 8						
Ready to Efile tax return						
If filing electronically, return accepted by IRS		•••••				
Tax return delivered to client.						
Billed client for tax return. Enter amount billed .		-				
Received payment from client		••••••				
Specify other status	▶					
Billing Amounto for Dries Veens	2012	2013	2014			
Billing Amounts for Prior Years	2012	2013	2014			
Enter the billing amount for each year						
Current Year Comments (See Help):						
	·					
	·····					
		···· ··· ··· ··· ··· ··· ···				
Permanent Comments (See Help):						
Permanent Comments (See Help):						

2015 Exempt Organization Business Tax Return prepared for:

Stephen Foster Citizen Support Organization, Inc. P.O. Box 666 White Springs, FL 32096

> Kenneth M. Daniels, CPA PA 107 2nd Ave SE Jasper, FL 32052

Form **990** 

Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ► Do not enter social security numbers on this form as it may be made public. ► Information about Form 990 and its instructions is at www.irs.gov/form990. OMB No. 1545-0047

Open to Public Inspection

Α	For the	e 2015 calen	dar year, or tax year beginning , 2015, and ending	J		3
в	Check if	applicable:	C Name of organization Stephen Foster Citizen Support Organization	n, Inc. D	Employer id	entification number
	Add	fress change	Doing business as		59-313	35743
	Nan	me change	Number and street (or P.O. box if mail is not delivered to street address) Room/su	uite E	Telephone nu	umber
	Initia	al return	P.O. Box 666		(386)	397-4462
	Final	l return/terminated	City or town, state or province, country, and ZIP or foreign postal code			
	Ame	ended return	White Springs FL 32096	G	Gross receip	ts\$ 444,611.
	Арр	lication pending		I(a) Is this a gro		
			Carol Stob PO Box 782 White Springs FL 32096	H(b) Are all subo If 'No,' attac	ordinates includ	ded? Yes No
I	Tax-e	exempt status	X 501(c)(3) 501(c) ( ) ◄ (insert no.) 4947(a)(1) or 527	ii no, allac	ch a list. (see ir	istructions)
J	Web	site:► ht		H(c) Group exer	mption number	►
κ	Form of	of organization:	X Corporation Trust Association Other ► L Year of formation	n: 1996	M State	of legal domicile: FL
Pa	art I	Summar	ν			
		Briefly describ	be the organization's mission or most significant activities: Support and	benefit S	tephen Fo	ster Cultural Center
e						
anc						
Governance						
<u>S</u>	2 (	Check this bo				1
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	3 1		ting members of the governing body (Part VI, line 1a)			,
Activities &	5		of individuals employed in calendar year 2015 (Part V, line 2a)			1
ivit	6		of volunteers (estimate if necessary)			0
Act	7a 1		d business revenue from Part VIII, column (C), line 12			2
			business taxable income from Form 990-T, line 34			
				Prio	r Year	Current Year
đ	8 (Contributions	and grants (Part VIII, line 1h)		27,408	. 78,609.
ň	9 F	Program serv	ice revenue (Part VIII, line 2g)	1	L10,032	. 186,759.
Revenue			come (Part VIII, column (A), lines 3, 4, and 7d)		3,103	
œ			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		26,117	
			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1	166,660	
			milar amounts paid (Part IX, column (A), lines 1-3)		31,340	. 13,812.
			to or for members (Part IX, column (A), line 4)	-		
ŝ	15 \$		r compensation, employee benefits (Part IX, column (A), lines 5-10)	-		
ŝnse	16a	Professional f	undraising fees (Part IX, column (A), line 11e)			
Expenses	b	Total fundrais	ing expenses (Part IX, column (D), line 25) ►0.			
ш	17 (Other expens	es (Part IX, column (A), lines 11a-11d, 11f-24e)	1	42,047	. 276,372.
	18	Total expense	es. Add lines 13-17 (must equal Part IX, column (A), line 25)	1	L73,387	. 290,184.
		Revenue less	expenses. Subtract line 18 from line 12 \ldots		-6,727	. 43,195.
s or				Beginning o	of Current Ye	ar End of Year
Net Assets o Fund Balance	20		Part X, line 16)	Б.) С	536,454	
t As ∎ B	21	Total liabilities	s (Part X, line 26)		76,338	. 19,695.
s J	22	Net assets or	fund balances. Subtract line 21 from line 20	4	160,116	. 503,311.
Pa	art II	Signatu	e Block			
Unde	er penaltie	es of perjury, I dec	lare that I have examined this return, including accompanying schedules and statements, and to the best er (other than officer) is based on all information of which preparer has any knowledge.	of my knowledg	e and belief, it	is true, correct, and
com	piete. Dec					
~.		Signatu	re of officer	Date	11/16	
Siq	gn			1		
He	e		ol Stob print name and title.	Preside	ent	
		,,	reparer's name Preparer's signature Date		eek V.	PTIN
_					eck X if	
Pa			h M. Daniels, CPA Kenneth M. Daniels, CPA 08/11/	LO Sel	f-employed	P00493519
	epare e Onl			Ein	m's FIN 🏲 🔿	0-8194632
		Y Firm's addre				いーローツサロ うく

		Stephen Foster Ci			inc.		59-313	35743	Page 2
Part		ement of Program S	•						
		if Schedule O contains a		ny line in this Part I	11				
1	•	be the organization's miss							
		and benefit Ste							
2	Did the organ	ization undertake any sigr	ificant program servio	es during the vear	which were r	not listed on the p	rior		
	-	990-EZ?		• •				Yes	X No
	If 'Yes,' desci	ibe these new services on	Schedule O.						
3	Did the organ	ization cease conducting,	or make significant cl	nanges in how it cor	nducts, any p	orogram services	?	Yes	X No
		ibe these changes on Sch							
	Section 501(organization's program se c)(3) and 501(c)(4) organiz if any, for each program s	ations are required to	s for each of its thre report the amount	ee largest pro of grants and	ogram services, a allocations to ot	as measured hers, the tot	l by expense al expenses	es. 5,
4 a	(Code:) (Expenses \$	225,702. ir	ncluding grants of	\$	<u>13,812.</u>)(R	evenue \$	25	4,770.)
	Promoted	<u>cultural</u> aware	ness at the S	tephen Fost	er Folk	<u>Culture</u> Ce	enter.		
		following_event							
	Dulcimer	Retreat, Festi	val of Lights	<u>, Elderhost</u>	<u>el,</u>				
	Florida	Folk Festival,	<u>Old Time Musi</u>	. <u>c_Camp, Qui</u>	lt_Shows	<u> </u>			
	C · 1	olklife Days, An							
	craft_sh	nows nately_39,917_in							
	Approxiti								
4 b	(Code:) (Expenses \$	ir	ncluding grants of	\$) (R	evenue \$)
4 c	(Code:) (Expenses \$	ir	cluding grants of	\$) (R	evenue \$)
4 d	Other program	m services. (Describe in S	chedule O.)						
	(Expenses	\$	including grants o) (Revenue \$)
	Total program	n service expenses	225,7	02.					000 (05 : -)
BAA				TEEA0102 10/12/15				Form	n 990 (2015)

Form 990 (2015) Stephen Foster Citizen Support Organization, Inc.

Pal		Checklist of Required Schedules			
		-		Yes	No
1	ls the Sche	e organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If 'Yes,' complete dule A</i>	1	х	
2	Is the	e organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3		ne organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates ublic office? If 'Yes,' complete Schedule C, Part I.	3		Х
4	Secti in effe	ion 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election ect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the asses	e organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, ssments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	to pro	ne organization maintain any donor advised funds or any similar funds or accounts for which donors have the right ovide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D,	6		Х
7	Did th enviro	ne organization receive or hold a conservation easement, including easements to preserve open space, the onment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	7		Х
8		ne organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' Dete Schedule D, Part III.	8		Х
9	for ar	ne organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian nounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation ces? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did th perma	ne organization, directly or through a related organization, hold assets in temporarily restricted endowments, anent endowments, or quasi-endowments? <i>If 'Yes,' complete Schedule D, Part V</i>	10		X
11		organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, as applicable.			
ä	a Did th D, Pa	ne organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule art VI.	11 a	Х	
ł	o Did th asset	ne organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total ts reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VII</i>	11 b		Х
(Did th asset	ne organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total ts reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VIII</i>	11 c		Х
(d Did th in Pa	ne organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported rt X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
e	e Did th	ne organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
f	Did the or	The organization's separate or consolidated financial statements for the tax year include a footnote that addresses rganization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part $X \dots \dots$	11 f		Х
		ne organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete dule D, Parts XI, and XII	12a	Х	
ł		the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		Х
13	Is the	e organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14 a	a Did th	ne organization maintain an office, employees, or agents outside of the United States?	14a		Х
ł	busin	ne organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, ness, investment, and program service activities outside the United States, or aggregate foreign investments valued 00,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did th foreig	ne organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any gn organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did th or for	ne organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did th colum	ne organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, nn (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
18		ne organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
19		ne organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' Sete Schedule G. Part III.	19		Х

Form 990 (2015)Stephen Foster Citizen Support Organization, Inc.Part IVChecklist of Required Schedules (continued)

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Page 4

			Yes	No
20a	Did the organization operate one or more hospital facilities? If 'Yes', complete Schedule H	20a		Х
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II</i>	21	х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		х
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? <i>If 'Yes,' complete Schedule J</i> .	23		х
24 a	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? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a</i>	24a		x
k	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
c	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
k	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? <i>If 'Yes,' complete Schedule L, Part I</i>	25b		х
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 disqualified persons? <i>If 'Yes', complete Schedule L, Part II</i>	26		х
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? <i>If 'Yes,' complete Schedule L, Part III</i>	27		Х
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):			
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
k	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28b		х
c	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	20		v
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I.	30 31		X 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, Part II, III, or IV, and Part V, line 1	34		x
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
k	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		х
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		х
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		Х
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	
BAA		Form	990 (2	2015)

Form 990 (2015)

Form	n 990 (2015) Stephen Foster Citizen Support Organization, Inc. 59-313574	3	Ρ	age 5
Par	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1 a	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1 a 23			
k	D Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	-		
·	(gambling) winnings to prize winners?	1 c	Х	
22	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-			
	ments, filed for the calendar year ending with or within the year covered by this return 2a ()		
k	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
k	b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b		
4 =	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
k	D If 'Yes,' enter the name of the foreign country: ►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts. (FBAR)			
5 a	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
k	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
	If Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6.	Description have annual gross respire that are normally groater than \$100,000, and did the ergenization			
00	a 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?	6 a		Х
	o If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were			
	not tax deductible?	6 b		
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?	7 a		Х
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
_		70		
		7e		Х
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			21
ç	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
ł	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
-	Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
	organization have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.			
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		Х
k	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		Х
10				
	a Initiation fees and capital contributions included on Part VIII, line 12			
k	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11				
	a Gross income from members or shareholders			
k	o Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.). 11 b			
12 =	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	120		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	a Is the organization licensed to issue qualified health plans in more than one state?	13 a		
-	Note. See the instructions for additional information the organization must report on Schedule O.			
ł	• 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			
	Enter the amount of reserves on hand			
	a Did the organization receive any payments for indoor tanning services during the tax year?	14 a		Х
	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b		
BAA	TEEA0105 10/12/15	Form	1 990 (2	2015)

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	a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes		d for	
	Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI			. x
Sec	ction A. Governing Body and Management			
			Yes	No
1 a	a Enter the number of voting members of the governing body at the end of the tax year 1 a 7 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.			
k	b Enter the number of voting members included in line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 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 supervision	_		
4	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
-	since the prior Form 990 was filed?	4		х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
	a 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?	7 a		Х
k	b Are any governance decisions of the organization reserved to (or subject to approval by) members,			
-	stockholders, or persons other than the governing body?	7 b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	a The governing body?	8 a	Х	
k	b Each committee with authority to act on behalf of the governing body?	8 b	Х	
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? <i>If 'Yes,' provide the names and addresses in Schedule O</i>	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.,)
			Yes	No
	a Did the organization have local chapters, branches, or affiliates?	10 a		Х
ł	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?	10 b		
11 a	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
k	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12 a	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a		Х
k	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b		
C	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c		
13	Did the organization have a written whistleblower policy?	13		Х
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
-	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15 a		Х
a		15 a 15 b		X X
a	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official		_	
a k	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official			
a k 16 a	 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official	15 b		X
a k 16 a	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	15 b		X
a k 16 a k	 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official	15 b 16 a		X
a k 16 a k	 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official	15 b 16 a 16 b		Х
16 a t t Sec	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization if 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? ction C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► Florida Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a for public inspection. Indicate how you made these available. Check all that apply.	15 b 16 a 16 b		X
16 a 16 a 17	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official	15 b 16 a 16 b availat		X
16 a 16 a 17 18	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official	15 b 16 a 16 b availat		Х

Form 990 (2015) Stephen Foster Citizen Sup	port Or	raan	iza	tio	m	Inc			59-31357	43 Page 7
Part VII Compensation of Officers, Directo								es, Highest C		-0
Independent Contractors	noto to on	. line	. :	hia I	Dort	\ <i>/</i> 11				
Check if Schedule O contains a response or Section A. Officers, Directors, Trustees, Ke										· · · · · · · · · ·
1 a Complete this table for all persons required to be listed	<i>·</i> ·					<u> </u>				
organization's tax year.		Joint	61136	alloi	1101		alei	idal year ending w		
• List all of the organization's current officers, directo						duals	or c	organizations), rega	ardless of amount of	
compensation. Enter -0- in columns (D), (E), and (F) if no								(1)	,	
 List all of the organization's current key employees List the organization's five current highest compension 	•									
who received reportable compensation (Box 5 of Form W- organization and any related organizations.										
• List all of the organization's former officers, key em of reportable compensation from the organization and any	related o	rgani	zatio	ons.						00,000
• List all of the organization's former directors or tru organization, more than \$10,000 of reportable compensat										
List persons in the following order: individual trustees or d employees; and former such persons.	irectors; ir	nstitu	tiona	al tru	istee	es; off	icer	s; key employees;	highest compensate	ed
X Check this box if neither the organization nor any rela	ted organi	zatio	n co	mpe	ensa	ted a	ny c	urrent officer, dire	ctor, or trustee.	
				(C))					
(A) Name and Title	(B) Average hours per	ge is both an officer and a s director/trustee) c				(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other		
	wook	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Carol Stob	6.00									
President		Х								
(2) Khyrs Kantarze	2.00									
Vice President		Х								
(3) Juli Batusic	2.00									
Secretary	ļ	Х								
_(4)_Scott_Gay	<u>4.00</u>									
Treasurer	ļ	Х			ļ					
(5) Tom Moore	1.00									

_ 4.00									
	Х								
1.00									
	Х								
1.00									
	Х								
_1.00									
	Х								
TEEA0	107 1	0/12/1	5						Form 9
		x -1.00 x -1.00 x .1.00 x 	$ \begin{array}{c} -1 \cdot 00 \\ x \\ \\ x \\ x \\ -1 \cdot 00 \\ x \\ $	x <u>1.00</u> x <u>1.00</u> x <u>1.00</u>	x x $1 \cdot 00$ x $1 \cdot 00$ x $1 \cdot 00$ x x x $$ x	x x -1.00 x x	x x $1 \cdot 00$ x $1 \cdot 00$ x $1 \cdot 00$ x x x $-1 \cdot 00$ x $-1 \cdot 000$ x </td <td>$\begin{array}{c ccccccccccccccccccccccccccccccccccc$</td> <td>$\begin{array}{c ccccccccccccccccccccccccccccccccccc$</td>	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$

Form 990 (2015) Stephen Foster Citizen Support Organization, Inc.

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Par	t VII Section A. Officers, Directors, Tru	stees,	Key	En	nplo	oye	es,	ano	d Highest Con	pensated En	nploy	ees	(contii	nued)
		(B)			(0									
	(A) Name and title	Average hours per week	box offi	, unle cer a	ss pe nd a c	more rson i directo	than o s both or/trust	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations		Esti amoun	(F) mated t of othe ensation	
		(list any hours for related organiza - tions below dotted line)	individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	ormer	(W-2/1099-MISC)	(W-2/1099-MISC)		from organ and	n the nization related nizations	
(15)														
(16)														
(17)														
(18)														
(19)														
(20)														
(21)														
(22)														
(23)														
(24)														
(25)														
	Sub-total.			• •	• •	• •	•••							
	Total from continuation sheets to Part VII, Section							•						
	Total (add lines 1b and 1c)							eiveo	l d more than \$100,0	000 of reportable of	comper	nsati	on	
													Yes	No
3	Did the organization list any former officer, director, on line 1a? If 'Yes,' complete Schedule J for such in											3		Х
4	For any individual listed on line 1a, is the sum of rep the organization and related organizations greater the	nan \$150,	000?	lf 'Y	es'	com	plete	Scł	hedule J for					37
5	such individual . Did any person listed on line 1a receive or accrue or for services rendered to the organization? If 'Yes,' or	ompensat	ion fr	om a	any	unre	lated	lorg	anization or individ			4 5		X
Sec	tion B. Independent Contractors		lenca	uic	0 101	340	in per	301		<u></u>		•		
1	Complete this table for your five highest compensation from the organization. Report compensation	ed indepe nsation fo	nden r the	t cor cale	ntrac nda	ctors r yea	that ar end	rece ding	eived more than \$1 with or within the	100,000 of organization's tax	year.			
	(A) Name and business addre	ess							(B) Description o	f services	Cor	(C nper) Isatior	۱
	Total number of independent contractors (including	but not lin	aitad	to th	0000	liete	d ah	0.40) who received me	ro than				
2	\$100,000 of compensation from the organization		meu	io tr	1036	nste	u au	ove						

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ខ្ម 1 a Federated campaigns 1 a				
b Membership dues 1 b				
c Fundraising events 1 c				
d Related organizations 1 d				
e Government grants (contributions) 1e 33,456	<u>.</u>			
1 a Federated campaigns 1 a b Membership dues 1 b c Fundraising events 1 c d Related organizations 1 d e Government grants (contributions) 1 e f All other contributions, gifts, grants, and similar amounts not included above 1 f g Noncash contributions included in lines 1a-1f: \$ h Total. Add lines 1a-1f .	<u>.</u>			
g Noncash contributions included in lines 1a-1f: \$				
h Total. Add lines 1a-1f	▶ 78,609.			
Business Code				
2a Admissions/registration 900099	157,421.	157,421.	0.	0.
b Commissions 900099	21,057.	21,057.	0.	0
• Vending machine sales900099	3,426.	3,426.	0.	0.
d Workshop_income900099	3,442.	3,442.	0.	0.
Business Code 2a Admissions/registration 900099 b Commissions 900099 c Vending machine sales 900099 d Workshop income 900099 e Vendor fees 900099 f All other program service revenue 900099	1,413.	1,413.	0.	0.
g Total. Add lines 2a-2f	▶ 186,759.			
3 Investment income (including dividends, interest and other similar amounts)	570051	5,009.	0.	0.
4 Income from investment of tax-exempt bond proceeds				
5 Royalties	•			
(i) Real (ii) Personal	_			
6 a Gross rents	_			
b Less: rental expenses	_			
c Rental income or (loss)				
d Net rental income or (loss)	<u>۲</u>			
7 a Gross amount from sales of assets other than inventory (i) Securities (ii) Other	_			
b Less: cost or other basis and sales expenses				
c Gain or (loss)				
d Net gain or (loss)	•			
8 a Gross income from fundraising events (not including\$				
See Part IV, line 18				
b Less: direct expenses b	-			
c Net income or (loss) from fundraising events	•			
9 a Gross income from gaming activities. See Part IV, line 19 a				
b Less: direct expenses b	-			
c Net income or (loss) from gaming activities	•			
10 a Gross sales of inventory, less returns and allowances 174,234				
b Less: cost of goods sold b 111,232				
c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code		63,002.	0.	0.
11a				
b				
~				
d All other revenue				
e Total. Add lines 11a-11d			_	_
12 Total revenue. See instructions	► 333,379. EA0109 10/12/15	254,770.	0.	Form 990 (2015

	on 501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a resp	onse or note to any line	in this Part IX		
	ot include amounts reported on lines b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	13,812.	13,812.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
	Grants and other assistance to foreign organizations, foreign governments, and for- eign individuals. See Part IV, lines 15 and 16..				
4	Benefits paid to or for members				
	Compensation of current officers, directors,				
	trustees, and key employees				
U	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				
0	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
0	Payroll taxes				
1	Fees for services (non-employees):				
а	Management				
b	Legal				
с	Accounting				
d	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
-	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)				
	Advertising and promotion	26,770.	26,770.	0.	(
	Office expenses				
	Information technology				
5	Royalties				
6	Occupancy				
7	Travel				
	Payments of travel or entertainment expenses for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
2	Depreciation, depletion, and amortization	30.	0.	30.	
4	Insurance				
	of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
		674.	175.	499.	
	Bank_fees	1,259.	771.	499.	
	Dues_and_subscriptions	1,259.	1,101.	488.	
	Instructors	2,455.	460.	1,995.	
	InsuranceAll other expenses	2,455. 244,083.	460. 182,613.	61,470.	
	Total functional expenses. Add lines 1 through 24e	290,184.	225,702.	64,482.	
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► if following				

Form 990 (2015) Stephen Foster Citizen Support Organization, Inc.

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	137,636.	1	151,810.
	2	Savings and temporary cash investments	344,641.	2	322,617.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
2	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	53,872.	8	48,304.
As	9	Prepaid expenses and deferred charges		9	
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation	305.	10 c	275.
	11	Investments – publicly traded securities	505.	11	275.
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
	14			14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	536,454.	16	523,006.
	17	Accounts payable and accrued expenses	76,338.	17	19,695.
	18	Grants payable	101000	18	197093.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
5	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	76,338.	26	19,695.
ces		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets	460,116.	27	503,311.
Ba	28	Temporarily restricted net assets		28	
p	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
ŝ	30	Capital stock or trust principal, or current funds		30	
ŝ	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
fet	33	Total net assets or fund balances	460,116.	33	503,311.
~	34	Total liabilities and net assets/fund balances	536,454.	34	523,006.
BA/	Α				Form 990 (2015)

Forn	990 (2015) Stephen Foster Citizen Support Organization, Inc. 59-	3135743 Page			Page	12
Pa	rt XI Reconciliation of Net Assets					_
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		333	3,379	Э.
2	Total expenses (must equal Part IX, column (A), line 25)	2		290),184	4.
3	Revenue less expenses. Subtract line 2 from line 1	3		43	3,195	5.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		460),110	5.
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
Des	column (B))	10		503	3,311	<u>L.</u>
Pa	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
				Y	'es N	lo
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		[
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.					
2 8	a Were the organization's financial statements compiled or reviewed by an independent accountant?		· · [2 a	2	Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
I	Were the organization's financial statements audited by an independent accountant?			2 b	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:					
(If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audi review, or compilation of its financial statements and selection of an independent accountant?	t, ••••	[2 c	x	_
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.					
3 8	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?			3 a		Х
I	If Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3 b		
BAA			F	orm 9	90 (201	15)

	DULE A 990 or 990-EZ)	Com	4947(a	ion is a section 501(c)()(1) nonexempt charita ch to Form 990 or Forr	ble trus	t.	or a section	2015				
Departmer Internal Re	nt of the Treasury evenue Service	► Inf	ormation about Sche	dule A (Form 990 or 99 at <i>www.irs.gov/form9</i> 9	0-EZ) ar 0.	nd its in	structions is	Open to Public Inspection				
Name of t	he organization	1					Employer identific	ation number				
Steph	nen Foster	Citizen S	Support Organi	zation, Inc.			59-313574	3				
Part I					omplete	e this p	oart.) See instruction	าร.				
The org	anization is not a	a private foundat	ion because it is: (For	ines 1 through 11, chec	k only or	e box.)						
1	A church, con	vention of churcl	nes, or association of c	hurches described in se	ection 17	′0(b)(1)(A)(i).					
2	A school desc	ribed in section	170(b)(1)(A)(ii). (Attac	h Schedule E (Form 99	0 or 990-	-EZ).)						
3				ion described in section).					
4	A medical res	earch organizatio	on operated in conjunc	tion with a hospital desc	ribed in s	section	, 170(b)(1)(A)(iii). Enter t	he hospital's				
L	name, city, an	id state:	. ,					·				
5	name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)											
6	A federal, stat	e, or local gover	nment or governmenta	I unit described in section	on 170(b)(1)(A)(v).					
7	in section 17	0(b)(1)(A)(vi).(Complete Part II.)		governr	nental u	nit or from the general p	ublic described				
8	A community	trust described ir	n section 170(b)(1)(A)	(vi). (Complete Part II.)								
9]	from activities investment inc	related to its exe come and unrela	empt functións – subje	ct to certain exceptions, acome (less section 511	and (2)	no more	s, membership fees, and than 33-1/3% of its sup sses acquired by the org	port from gross				
10	An organizatio	on organized and	operated exclusively	to test for public safety.	See sec t	tion 509	(a)(4).					
11	or more public	cly supported orc	anizations described in	for the benefit of, to perf n section 509(a)(1) or s porting organization and	ection 5	09(a)(2)	s of, or to carry out the p . See section 509(a)(3) . 1e. 11f. and 11g.	urposes of one . Check the box in				
а	Type I. A sup	porting organizat	ion operated, supervis	ed, or controlled by its s	upportec	lorganiz	ation(s), typically by given the supporting organization	ing the supported tion. You must				
b	management		organization vested ir				rganization(s), by having ge the supported organiz					
c	Type III funct organization(s	tionally integrat s) (see instruction	ed. A supporting orgar ns). You must comple	ization operated in conr te Part IV, Sections A,	nection w D, and I	vith, and	functionally integrated v	vith, its supported				
d	Type III non-f functionally in instructions).	tegrated. The org You must comp	grated. A supporting of ganization generally main and the second	organization operated in ust satisfy a distribution A and D, and Part V.	connect requirem	ion with ient and	its supported organization an attentiveness required	on(s) that is not ement (see				
e	integrated, or	Type III non-fund	ctionally integrated sup	porting organization.			be I, Type II, Type III fun	ctionally				
_			-									
g ⊦		0	about the supported or	ganization(s).	1			1				
	(I) Name o organ	f supported ization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is organizati in your go docur	on listed overning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)				
					Yes	No						
<u>(</u> A)												
(B)												
(C)												
<u>(D)</u>												
<u>(E)</u>												

Public Charity Status and Public Support

SCHEDULE A

Total

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

Schedule **A** (Form 990 or 990-EZ) 2015

OMB No. 1545-0047

Sec	Section A. Public Support								
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015		(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')								
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								
4	Total. Add lines 1 through 3								
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								
Sec	tion B. Total Support								
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015		(f) Total	
7	Amounts from line 4								
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources								
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 (Explain in Part VI.)								
11	Total support. Add lines 7 through 10								
12	Gross receipts from related activiti	es, etc. (see instru	ctions)				12		
13	First five years. If the Form 990 is organization, check this box and s								
Sec	tion C. Computation of Pu	blic Support P	ercentage					F	
14	Public support percentage for 201			, column (f))			14	%	
15	Public support percentage from 20	14 Schedule A, Pa	art II, line 14			[15	%	
16 a	33-1/3% support test – 2015. If and stop here. The organization of								
b	33-1/3% support test – 2014. If t and stop here. The organization of								
17 a	10%-facts-and-circumstances te or more, and if the organization me the organization meets the 'facts-a	eets the 'facts-and-	-circumstances' tes	st, check this box a	ind stop here. Exp	lain in Part V	l how		
	10%-facts-and-circumstances te or more, and if the organization me organization meets the 'facts-and-	eets the 'facts-and- circumstances' tes	-circumstances' tes t. The organization	at, check this box a qualifies as a pub	nd stop here. Exp licly supported org	lain in Part V anization	l how	the ►	
18	Private foundation. If the organiz	ation did not check	a box on line 13,	16a, 16b, 17a, or 1	7b, check this box	and see instr	ructio	ns ►	

Schedule A (Form 990 or 990-EZ) 2015

BAA

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

C.c.	to qualify under the tests list						
-	tion A. Public Support	(a) 2044	(b) 2042	(c) 2013	(d) 2044	(a) 2045	(f) Total
Calen	dar year (or fiscal year beginning in) Gifts, grants, contributions	(a) 2011	(b) 2012	(6) 2013	(d) 2014	(e) 2015	(f) Total
•	and membership fees						
	received. (Do not include any 'unusual grants.')	64,899.	146,881.	74,687.	27,423.	78,609.	392,499.
2	Gross receipts from admis-	01,055.	110,001.	/1,00/.	27,123.	70,005.	552,155.
	sions, merchandise sold or						
	services performed, or facilities furnished in any activity that is						
	related to the organization's						
	tax-exempt purpose	185,013.	184,605.	229,570.	138,219.	249,761.	987,168.
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	249,912.	331,486.	304,257.	165,642.	328,370.	1,379,667.
	Amounts included on lines 1,	. ,	,	, <u></u> · ·		-,	
	2, and 3 received from disqualified persons						
L	Amounts included on lines 2						
L	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						
c	Add lines 7a and 7b						
8	Public support. (Subtract line						
	7c from line 6.)						1,379,667.
-	tion B. Total Support						(n
	dar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
a					165 6/2	270 270	1 270 667
	Amounts from line 6	249,912.	331,486.	304,257.	165,642.	328,370.	1,3/9,00/.
	Gross income from interest, dividends,	249,912.	331,486.	304,257.	105,042.	520,570.	1,3/9,00/.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from						1,379,667.
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	249,912. 8,453.	331,486.	6,144.	3,103.	5,009.	29,971.
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from						
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	8,453.	7,262.	6,144.	3,103.	5,009.	29,971.
10 a k	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b						
10 a k	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business	8,453.	7,262.	6,144.	3,103.	5,009.	29,971.
10 a k	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is	8,453.	7,262.	6,144.	3,103.	5,009.	29,971.
10 a k 11	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	8,453.	7,262.	6,144.	3,103.	5,009.	29,971.
10 a k 11	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is	8,453.	7,262.	6,144.	3,103.	5,009.	29,971.
10 a k 11	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in	8,453.	7,262.	6,144.	3,103.	5,009.	29,971.
10 a k 11	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	8,453.	7,262.	6,144.	3,103.	5,009.	29,971.
10 a k 11	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in	8,453.	7,262.	6,144.	3,103.	5,009.	29,971. 29,971.
10 a k 11 12 13	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	8,453. 8,453. 258,365.	7,262. 7,262. 338,748. on's first, second, tt	6,144. 6,144. 310,401. hird, fourth, or fifth	3,103. 3,103. 168,745. tax year as a sect	5,009. 5,009. 333,379. ion 501(c)(3)	29,971. 29,971. 1,409,638.
10 a k 11 12 13 14	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	8,453. 8,453. 258,365. s for the organizatio top here	7,262. 7,262. 338,748. on's first, second, tt	6,144. 6,144. 310,401. hird, fourth, or fifth	3,103. 3,103. 168,745. tax year as a sect	5,009. 5,009. 333,379. ion 501(c)(3)	29,971. 29,971. 1,409,638.
10 a k 11 12 13 14 Sec	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	8,453. 8,453. 258,365. s for the organization top here blic Support P	7,262. 7,262. 338,748. on's first, second, tt	6,144. 6,144. 310,401. hird, fourth, or fifth	3,103. 3,103. 168,745. tax year as a sect	5,009. 5,009. 333,379. ion 501(c)(3)	29,971. 29,971. 1,409,638.
10 a k 11 12 13 14 <u>Sec</u> 15	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	8,453. 8,453. 258,365. for the organization top here blic Support P 5 (line 8, column (f	7,262. 7,262. 338,748. on's first, second, tl Percentage) divided by line 13	6,144. 6,144. 310,401. hird, fourth, or fifth	3,103. 3,103. 168,745. tax year as a sect	5,009. 5,009. 333,379. ion 501(c)(3) 	29,971. 29,971. 1,409,638. ►
10 a k 11 12 13 14 <u>Sec</u> 15 16	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	8,453. 8,453. 8,453. 3 for the organization top here blic Support P 5 (line 8, column (f 14 Schedule A, Pa	7,262. 7,262. 7,262. 338,748. on's first, second, th Percentage) divided by line 13 art III, line 15	6,144. 6,144. 310,401. hird, fourth, or fifth	3,103. 3,103. 168,745. tax year as a sect	5,009. 5,009. 333,379. ion 501(c)(3) 	29,971. 29,971. 1,409,638.
10 a k 11 12 13 14 <u>Sec</u> 15 16 <u>Sec</u>	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	8,453. 8,453. 8,453. 258,365. for the organization top here blic Support P 5 (line 8, column (f 114 Schedule A, Pa estment Incor	7,262. 7,262. 338,748. on's first, second, tt Percentage) divided by line 13 art III, line 15 me Percentage	6,144. 6,144. 310,401. hird, fourth, or fifth	3,103. 3,103. 168,745. tax year as a sect	5,009. 5,009. 333,379. ion 501(c)(3) 15 16	29,971. 29,971. 29,971. 1,409,638.
10 a t 10 a t 10 a t 10 a t 10 a t 11 12 13 14 <u>Sec</u> 15 <u>16</u> <u>Sec</u> 17	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	8,453. 8,453. 258,365. for the organization top here blic Support P 5 (line 8, column (f 114 Schedule A, Pa estment Incor 2015 (line 10c, co	7,262. 7,262. 7,262. 338,748. on's first, second, tt Percentage) divided by line 13 art III, line 15 me Percentage lumn (f) divided by	6 , 144 . 6 , 144 . 310 , 401 . hird, fourth, or fifth 	3,103. 3,103. 168,745. tax year as a sect	5,009. 5,009. 5,009. 333,379. ion 501(c)(3) 15 16 17	29,971. 29,971. 29,971. 1,409,638.
10 a t 10 a t 10 a t 10 a 10 a 10 a 11 12 13 14 <u>Secc</u> 15 16 <u>Secc</u> 17 18	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	8,453. 8,453. 258,365. 5 for the organization top here blic Support P 5 (line 8, column (f 14 Schedule A, Pa estment Incor 2015 (line 10c, co m 2014 Schedule J	7,262. 7,262. 338,748. 01/2010	6 , 144 . 6 , 144 . 310 , 401 . hird, fourth, or fifth 	3,103. 3,103. 168,745. tax year as a sect	5,009. 5,009. 5,009. 333,379. ion 501(c)(3) 15 16 17 18	29,971. 29,971. 1,409,638.
10 a t 10 a t 10 a t 10 a 10 a 11 12 13 14 <u>Secc</u> 15 16 <u>Secc</u> 17 18	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	8,453. 8,453. 258,365. for the organization top here blic Support P 5 (line 8, column (f 14 Schedule A, Pa estment Incor 2015 (line 10c, co m 2014 Schedule A	7,262. 7,262. 7,262. 338,748. on's first, second, tl 	6 , 144 . 6 , 144 . 310 , 401 . hird, fourth, or fifth 	3,103. 3,103. 168,745. tax year as a sect	5,009. 5,009. 5,009. 333,379. ion 501(c)(3) 15 16 17 18 n 33-1/3%, and line	29,971. 29,971. 1,409,638.
10 a t 10 a t 10 a 10 a 10 a 11 12 13 14 14 <u>Secc</u> 17 18 19 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	8,453. 8,453. 258,365. for the organization top here blic Support P 5 (line 8, column (f 14 Schedule A, Pa estment Incor 2015 (line 10c, co m 2014 Schedule A the organization d nis box and stop h	7,262. 7,262. 7,262. 338,748. on's first, second, tl Percentage) divided by line 13 art III, line 15. De Percentage lumn (f) divided by A, Part III, line 17 id not check the bo ere. The organizati	6 , 144 . 6 , 144 . 310 , 401 . ird, fourth, or fifth 	3,103. 3,103. <u>168,745.</u> tax year as a sect 	5,009. 5,009. 5,009. 333,379. ion 501(c)(3) 15 16 17 18 n 33-1/3%, and line organization	29,971. 29,971. 1,409,638.
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10 a t 10 a t 10 a 10 a 10 a 11 12 13 14 12 13 14 <u>Secc</u> 17 18 19 a t	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	8,453. 8,453. 258,365. for the organization top here 5 (line 8, column (f 14 Schedule A, Pa estment Incor 2015 (line 10c, co m 2014 Schedule A the organization d his box and stop h the organization d check this box and	7,262. 7,262. 7,262. 338,748. on's first, second, th Percentage) divided by line 13 art III, line 15. Percentage Jumn (f) divided by A, Part III, line 17 id not check the bo ere. The organizati id not check a box stop here. The organizati	6 , 144 . 6 , 144 . 6 , 144 . 310 , 401 . aird, fourth, or fifth line 13, column (f)) 	3,103. 3,103. <u>168,745.</u> tax year as a sect 	5,009. 5,009. 5,009. 333,379. ion 501(c)(3) 15 16 17 18 n 33-1/3%, and line organization more than 33-1/3%	29,971. 29,971. 29,971. 1,409,638.

 Part IV
 Supporting Organizations

 (Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
3 a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		
t	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use	3c		_
4 a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		_
k	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
c	bid the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5 a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
Ł	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)</i>	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9 a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI	9a		
t	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI	9b		
C	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If 'Yes,' provide detail in Part VI</i>	9c		
10 a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below	10a		
k	Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Schedule A (Form 990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 Stephen Foster Citizen Support Organization, Inc. 59-313	743	P	age 5	
Part IV Supporting Organizations (continued)				
		Yes	No	
11 Has the organization accepted a gift or contribution from any of the following persons?				
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the				
governing body of a supported organization?	. 11a			
b A family member of a person described in (a) above?	. 11b			
c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI	. 11c			

Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		

Section C. Type II Supporting Organizations

		Yes	No
Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		<u> </u>
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played			
	in this regard	3		<u> </u>

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):

а		The organization satisfied the Activities Test. Complete line 2 below.	
---	--	--	--

b		The organization is the parent of each of its supported organizations. Complete line 3 below
---	--	--

c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

2	Activities	Test. Answer	(a) and ((b) below.
---	------------	--------------	----	---------	----	----------

	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted	2a					
	substantially all of its activities	2a					
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the						
3	Parent of Supported Organizations. Answer (a) and (b) below.						
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of	-					
	each of the supported organizations? <i>Provide details in Part VI</i>	3a					
	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its						
	supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard	3b					

Schedule A (Form 990 or 990-EZ) 2015

Yes No

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on November 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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

7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

BAA

Schedule A (Form 990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015	-			-		
Part V Type III Non-Function	ally Integrate	ed 509(a)(3) 🕄	Supportir	ng Organizatior	ıs (cor	ntinued)

Par	t V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiza	ations (continued)	
Sec	tion D – Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purpos	es		
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of suppo			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organization Part VI). See instructions.			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015 (reasonable cause required – see instructions)			
3	Excess distributions carryover, if any, to 2015:			
а				
b				
С				
d	From 2013			
е	From 2014			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2015 distributable amount			
i	Carryover from 2010 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2015 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2015 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6	Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7	Excess distributions carryover to 2016. Add lines 3j and 4c			
8	Breakdown of line 7:			
а				
b				
С	Excess from 2013			
d	Excess from 2014			
е	Excess from 2015			

BAA

Schedule A (Form 990 or 990-EZ) 2015

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b;Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule B (Form 990, 990-EZ, or 990-PE)

Schedule of Contributors

OMB No. 1545-0047

01 330-11)			2015
Department of the Treasury Internal Revenue Service		ttach to Form 990, Form 990-EZ, or Form 990-PF. Ile B (Form 990, 990-EZ, 990-PF) and its instructions is at <i>www.irs.go</i>	
Name of the organization			Employer identification number
Stephen Foster	Citizen Support	Organization, Inc.	59-3135743
Organization type (chec	k one):		
Filers of:	\$	Section:	
Form 990 or 990-EZ	[\underline{X} 501(c)(3) (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a priva	ate foundation
		527 political organization	
Form 990-PF	[501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a private f	oundation
		501(c)(3) taxable private foundation	

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

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

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

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).

BAA 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) (2015)

Name of organization

 Page
 1
 of
 1
 of
 Part I

 Employer identification number

 59-3135743

Stephen Foster Citizen Support Organization, Inc.

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

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	Florida Department of Environmental Protection	\$ <u>33,090</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990) Supplemental Financial Statements 2015 Department of the Treasury Internal Revenue Service > Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Inspection Name of the organization Employer identification number									
Department of the Treasury Internal Revenue Service Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.									
	С								
Stephen Foster Citizen Support Organization, Inc.									
Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' on Form 990, Part IV, line 6.									
(a) Donor advised funds (b) Funds and other accounts									
1 Total number at end of year									
2 Aggregate value of contributions to (during year)									
3 Aggregate value of grants from (during year)									
4 Aggregate value at end of year									
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	þ								
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring									
impermissible private benefit?)								
Part II Conservation Easements.									
Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply).									
Preservation of land for public use (e.g., recreation or education)									
Protection of natural habitat									
Preservation of open space									
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.									
Held at the End of the Tax Ye	ear								
a Total number of conservation easements									
b Total acreage restricted by conservation easements									
c Number of conservation easements on a certified historic structure included in (a) 2 c									
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2 d									
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►									
4 Number of states where property subject to conservation easement is located ►									
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?)								
 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 									
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►\$									
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	0								
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.									
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.									
1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.									
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:									
(i) Revenue included on Form 990, Part VIII, line 1									
(ii) Assets included in Form 990, Part X									
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:									
a Revenue included on Form 990, Part VIII, line 1									
BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. TEEA3301 06/03/15 Schedule D (Form 990) 20	015								

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Sche	edule D (Form 990) 2015 Steph	en Foster	Citizer	n Support O	rgani	zation,	Inc.	59-313	5743	Page 2
Par	t III Organizations Mainta	aining Colle	ections	of Art, Hist	orica	l Treasu	res, or C	Other Similar Ass	ets (contin	ued)
3	Using the organization's acquisition items (check all that apply):	on, accession, a	and other	records, check	any of	f the followi	ng that are	e a significant use of its	collection	
а	Public exhibition			d Loan	or exc	hange prog	rams			
b	Scholarly research			e Other	r					
C										
4	Provide a description of the organ Part XIII.	ization's collec	tions and	explain how th	ey furtl	her the orga	inization's	exempt purpose in		
5	During the year, did the organizat to be sold to raise funds rather that	an to be mainta	ained as p	part of the organ	nizatior	n's collectior	ı?		Yes	No
Par	t IV Escrow and Custodia line 9, or reported an a						n answe	ered 'Yes' on Form	990, Part I	IV,
1 a	Is the organization an agent, trust on Form 990, Part X?								Yes	No
b	If 'Yes,' explain the arrangement i	n Part XIII and	complete	the following ta	able:			. <u></u>		
									Amount	
	Beginning balance							1 c		
	Additions during the year							1 d		
	Distributions during the year							1 e		
	Ending balance							1f		
	Did the organization include an ar								Yes	No
b	If 'Yes,' explain the arrangement i	n Part XIII. Che	eck here i	f the explanatio	n has l	been provid	ed on Par	t XIII • • • • • • • •		
Par	t V Endowment Funds.	Complete if	the orac	nization on	Noro	d 'Voo' or	- Form (00 Dart IV/ line 1	0	
Fai	t v Endowment Funds.		U							vra haak
1 a	Beginning of year balance	(a) Current	year	(b) Prior yea	11	(c) Two ye	als Dack	(d) Three years back	(e) Four yea	IS DACK
									+	
									+	
C	Net investment earnings, gains, and losses									
	Grants or scholarships									
	Other expenditures for facilities and programs									
	Administrative expenses									
-	End of year balance								<u> </u>	
	Provide the estimated percentage		year end	balance (line 1	g, colu	mn (a)) held	d as:			
а	Board designated or quasi-endow			010						
b	Permanent endowment	00	i i							
C	: Temporarily restricted endowmen			- oo						
	The percentages on lines 2a, 2b,	and 2c should	equal 100	0%.						
3 a	Are there endowment funds not ir organization by:	the possessio	n of the c	organization tha	t are h	eld and adn	ninistered	for the	Yes	No
	(i) unrelated organizations								. 3a(i)	
	(ii) related organizations								. 3a(ii)	
b	If 'Yes' on line 3a(ii), are the relate									
4	Describe in Part XIII the intended	uses of the org	anizatior	's endowment	funds.				·	I
-	t VI Land, Buildings, and									
	Complete if the organi			es' on Form	990,	Part IV, li	ne 11a.	See Form 990, Pa	art X, line 1	0.
	Description of property		(a) Cost	or other basis restment)	(b)) Cost or oth basis (other	ner	(c) Accumulated depreciation	(d) Book v	
1 a	Land		· ·		1					
	Buildings									
	Leasehold improvements		-		1					
	Equipment					16	631.	16,356.		275.
	• Other					±0,1		10,000.		<u> </u>
	I. Add lines 1a through 1e. (Colum			90, Part X. colu	imn (B), line 10c.)				275.
BAA				. ,		/			ule D (Form 99	

TEEA3302 10/12/15

Part VII Investments – Other Securities. Complete if the organization answered "	Yes' on Form 990.	Part IV. line 11b. See Form 990.	Part X. line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	
(1) Financial derivatives		(0)	
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G) (H)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)			
Part VIII Investments – Program Related.			
Complete if the organization answered "			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
<u>(1)</u>			
(2)			
(3)			
<u>(4)</u> (5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) ►			
Part IX Other Assets. Complete if the organization answered "	Ves' on Form 990	Part IV line 11d See Form 990	Part X line 15
	scription		(b) Book value
(1)	•		
(2)			
(3)			
<u>(4)</u> (5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) li	ne 15.)	•••••••••••••••••••••••••••••••••••••••	
Part X Other Liabilities. Complete if the organization answered 'Yes' on F	orm 000 Dart IV line 1	10 or 11f Soo Form 000 Dart X line 25	
(a) Description of liability	(b) Book value		
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5) (6)			
(7)			
(8)			
(0)			
(9)			
(9)			
(9) (10)			

Schedule D (Form 990) 2015 Stephen Foster Citizen Support Organization, Inc.	59-3135743	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	333,379.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		•
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	333,379.
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		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b		
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	333,379.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	er Return.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	290,184.
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		
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	· · 2e	
3 Subtract line 2e from line 1		290,184.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	-	200,101.
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b		
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	290,184.
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 V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE I (Form 990)				ner Assistance			ļ	OMB No. 1545-0047
(10111 330)	Governments, and Individuals in the United States Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 or 22.					2015		
Department of the Treasury Internal Revenue Service		-	-	Attach to Form 99 Form 990) and its inst	0.		-	Open to Public Inspection
Name of the organization				. ,		-	Employer identifi	cation number
<u>Stephen Foster</u>							59-313574	13
Part I General In	formation on G	Brants and Assist	ance					
the selection criter	ia used to award the	e grants or assistance?		or assistance, the granter		ts or assistance, and		X Yes No
Part II Grants and Form 990,				and Domestic Gov e than \$5,000. Part				s' on
1 (a) Name and address or gover	ess of organization	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Florida Dept 11016 Lilian White Spring (2)	<u>Saunders Dri</u> s FL 32096				13,812.	Book - cost	equipment and	Improve Stephe
<u>(3)</u>								
<u>(4)</u>								
<u>(5)</u>								
<u>(6)</u>								
<u>(7)</u>								
<u>(8)</u>								
				e line 1 table				

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Schedule I (Form 990) (2015)

Page 2

Schedule I (Form 990) (2015) Stephen Foster Citizen Support Organization, Inc. 59-3135743 Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Stephen Foster Citizen Support Organization, Inc. 59-3135743

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
;					
7					

SCHEDULE O	Supplemental Information	tal Information to Form 990 or 990-EZ vide information for responses to specific questions on or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.		
(Form 990 or 990-EZ)	Complete to provide information for Form 990 or 990-EZ or to provi			
Department of the Treasury Internal Revenue Service	► Information about Schedule O (Form at www.irs.go	990 or 990-EZ) and its instructions	is	Open to Public Inspection
Name of the organization		E	Employer identificat	ion number
Stephen Foster	Citizen Support Organization,	Inc. 5	59-3135743	3

President and treasurer review the Form with the Board at the Monthly Pt VI, Line 11b meeting.

Form 8879-EO	IRS <i>e-file</i> Signature Authorization for an Exempt Organization	OMB No. 1545-1878
Department of the Treasury	For calendar year 2015, or fiscal year beginning, 2015, and ending, 20, 20, Do not send to the IRS. Keep for your records.	2015
Internal Revenue Service Name of exempt organization	Information about Form 8879-EO and its instructions is at www.irs.gov/form8	Employer identification number
Name and title of officer	itizen Support Organization, Inc.	59-3135743
Carol Stob	President	
	Irn and Return Information (Whole Dollars Only)	
check the box on line 1a, 2 leave line 1b, 2b, 3b, 4b, o	n for which you are using this Form 8879-EO and enter the applicable amount, if any, fro a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this for r 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return to not complete more than 1 line in Part I.	m was blank, thén
1 a Form 990 check here	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b 333,379.
2 a Form 990-EZ check h		
3 a Form 1120-POL cheo	k here 🗭 🗌 b Total tax (Form 1120-POL, line 22)	
4 a Form 990-PF check h	nere 🕨 🔲 🖥 Tax based on investment income (Form 990-PF, Part VI, line 5)	
5 a Form 8868 check her	e b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	
Under penalties of perjury, electronic return and accon I further declare that the an intermediate service provid the IRS (a) an acknowledg refund, and (c) the date of funds withdrawal (direct de organization's federal taxes contact the U.S. Treasury F authorize the financial instii answer inquiries and resolv organization's electronic re Officer's PIN: check one I X I authorize Kenne on the organization's ta a state agency(ies) reg the return's disclosure of As an officer of the organizated within this ret	th M Daniels CPA PA ERO firm name to enter my PIN Emi do x year 2015 electronically filed return. If I have indicated within this return that a copy of ulating charities as part of the IRS Fed/State program, I also authorize the aforemention	e true, correct, and complete. turn. I consent to allow my the IRS and to receive from in processing the return or nt to initiate an electronic payment of the voke a payment, I must ettlement) date. I also ial information necessary to as my signature for the <u>35743</u> as my signature the return is being filed with ed ERO to enter my PIN on as minimum and the second
Officer's signature	Date ► 08/11/2016	
Part III Certification		
ERO's EFIN/PIN. Enter you number (EFIN) followed by I certify that the above num	Ir six-digit electronic filing identification your five-digit self-selected PIN	do not enter all zeros
ERO's signature	Date ► <u>08/11/2016</u>	
	ERO Must Retain This Form – See Instructions Do Not Submit This Form To the IRS Unless Requested To Do So	

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Form 8879-EO (2015)

Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ Form 990, Page 10, Line 24e All Other Expenses (continued)

Description	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
Licenses and permits	745.	560.	185.	0.
Lodging	8,489.	8,489.	0.	0.
Meals and food	20,618.	19,820.	798.	0.
Miscellaneous	б.	0.	б.	0.
Equipment/supplies	1,234.	1,234.	0.	0.
Park fees	28,562.	28,562.	0.	0.
Payroll reimb to State	12,000.	12,000.	0.	0.
Postage	1,705.	1,149.	556.	0.
Printing	3,498.	3,498.	0.	0.
Professional fees	15,347.	2,850.	12,497.	0.
Provider fees	83,137.	48,363.	34,774.	0.
Recognition	4,443.	0.	4,443.	0.
<u>Rentals - equipment</u>	1,908.	0.	1,908.	0.
Repairs and maintenance	11,328.	8,772.	2,556.	0.
Supplies - office	4,523.	776.	3,747.	0.
Supplies - other	22,554.	22,554.	0.	0.
Transportation	53.	53.	0.	0.
Travel	42.	42.	0.	0.
<u>Utilities - electric</u>	18,373.	18,373.	0.	0.
<u>Utilities - phone</u>	4,716.	4,716.	0.	0.
Workshop expense	802.	802.	0.	0.

Supporting Statement of:

Schedule I/Smart Wks Noncash Grt Amt-1

1,774.
2,669.
6,109.
3,260.

Total

13,812.