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| Form <b>990</b><br><br>Department of the Treasury<br>Internal Revenue Service | <b>Return of Organization Exempt From Income Tax</b><br><br><b>Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)</b> | OMB No 1545-0047<br><div> <div>2011</div> <div>Open to Public Inspection</div> </div> |
|  | The organization may have to use a copy of this return to satisfy state reporting requirements   |   |






|  |  |  |                                     |
|--|--|--|-------------------------------------|
| <b>A</b> For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011  |  | <b>D</b> Employer identification number  |                                     |
| <b>B</b> Check if applicable<br><input type="checkbox"/> Address change<br><input type="checkbox"/> Name change<br><input type="checkbox"/> Initial return<br><input type="checkbox"/> Terminated<br><input type="checkbox"/> Amended return<br><input type="checkbox"/> Application pending |  | 04-2899862   |                                     |
| <b>C</b> Name of organization<br>COAST GUARD FOUNDATION INC  |  | <b>E</b> Telephone number  |                                     |
| Doing Business As  |  | (860) 535-0786   |                                     |
| Number and street (or P O box if mail is not delivered to street address) Room/suite<br>394 TAUGWONK ROAD  |  | <b>G</b> Gross receipts \$ 7,809,549   |                                     |
| City or town, state or country, and ZIP + 4<br>STONINGTON, CT 063781807  |  |  |                                     |
| <b>F</b> Name and address of principal officer<br>ANNE B BRENGLE<br>394 TAUGWONK ROAD<br>STONINGTON, CT 063781807  |  | <b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                         |                                     |
| <b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (Insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527  |  | <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If "No," attach a list (see instructions) |                                     |
| <b>J</b> Website: WWW.COASTGUARDFOUNDATION.ORG   |  | <b>H(c)</b> Group exemption number   |                                     |
| <b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other   |  | <b>L</b> Year of formation 1986  | <b>M</b> State of legal domicile MA |

| Part I | Summary |
|--------|---------|
|--------|---------|

|  |  |                                  |                     |
|--|--|----------------------------------|---------------------|
| Activities & Governance  | <b>1</b> Briefly describe the organization's mission or most significant activities<br>THE COAST GUARD FOUNDATION STRIVES TO HELP COAST GUARD MEN AND WOMEN STRENGTHEN THEIR SERVICE TO OUR NATION BY ENCOURAGING THEM TO EXCEL, ON DUTY AND OFF THE FOUNDATION SUPPORTS NUMEROUS PROGRAMS AND PROJECTS THROUGH DONATIONS FROM INDIVIDUALS, CORPORATIONS AND THROUGH GRANTS AND SPECIAL FUNDRAISING EVENTS THE FOUNDATION SUPPORTS ACADEMIC, ATHLETIC, AND LEADERSHIP EXCELLENCE FOR CADETS AT THE ACADEMY, OFFERS FINANCIAL RELIEF TO COAST GUARD FAMILIES WHO LOSE THEIR POSSESSIONS IN NATURAL DISASTERS OR LOSE A LOVED ONE IN SERVICE TO OUR COUNTRY, PROVIDES COLLEGE SCHOLARSHIPS TO DEPENDENTS OF ENLISTED PERSONNEL, FUNDS RECREATIONAL AND FAMILY-ORIENTED FACILITIES, AND SUPPORTS EDUCATIONAL AND MORALE PROGRAMS AT BASES, AND ON CUTTERS AROUND THE NATION, AS WELL AS HUNDREDS OF SMALLER PROJECTS FOR COAST GUARD MEMBERS AND THEIR FAMILIES, THROUGHOUT THE UNITED STATES |                                  |                     |
|  |  |                                  |                     |
|  |  |                                  |                     |
|  | <b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets  |                                  |                     |
|  | <b>3</b> Number of voting members of the governing body (Part VI, line 1a) . . . . .   | <b>3</b>                         | 30                  |
|  | <b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) . . . . .   | <b>4</b>                         | 30                  |
|  | <b>5</b> Total number of individuals employed in calendar year 2011 (Part V, line 2a) . . . . .  | <b>5</b>                         | 13                  |
|  | <b>6</b> Total number of volunteers (estimate if necessary) . . . . .  | <b>6</b>                         | 100                 |
| <b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 . . . . . | <b>7a</b>  | 5,229                            |                     |
| <b>b</b> Net unrelated business taxable income from Form 990-T, line 34 . . . . .        | <b>7b</b>  | -10,922                          |                     |
| Revenue  | <b>8</b> Contributions and grants (Part VIII, line 1h) . . . . .   | <b>Prior Year</b>                | <b>Current Year</b> |
|  | <b>9</b> Program service revenue (Part VIII, line 2g) . . . . .  | 4,415,944                        | 4,419,012           |
|  | <b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . . . . .   | 0                                | 0                   |
|  | <b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)   | 338,522                          | 142,825             |
|  | <b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .   | 306,246                          | 131,031             |
|  |  | 5,060,712                        | 4,692,868           |
| Expenses   | <b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . . .  | 645,236                          | 2,078,689           |
|  | <b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) . . . . .  | 0                                | 0                   |
|  | <b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)  | 827,197                          | 926,745             |
|  | <b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) . . . . .   | 62,011                           | 22,200              |
|  | <b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <u>954,813</u>  |                                  |                     |
|  | <b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . . .   |                                  |                     |
|  | <b>18</b> Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)   | 2,764,004                        | 1,688,390           |
|  | <b>19</b> Revenue less expenses Subtract line 18 from line 12 . . . . .  | 4,298,448                        | 4,716,024           |
|  |  | 762,264                          | -23,156             |
| Net Assets or Fund Balances  |  | <b>Beginning of Current Year</b> | <b>End of Year</b>  |
|  | <b>20</b> Total assets (Part X, line 16) . . . . .   | 7,554,105                        | 7,168,110           |
|  | <b>21</b> Total liabilities (Part X, line 26) . . . . .  | 468,589                          | 202,409             |
|  | <b>22</b> Net assets or fund balances Subtract line 21 from line 20 . . . . .  | 7,085,516                        | 6,965,701           |

## Part II Signature Block

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

|                                 |   |  |   |  |   |
|---------------------------------|---|--|---|--|---|
| <b>Sign Here</b>                | *****<br>Signature of officer   |  | 2012-07-10<br>Date  |  |   |
|                                 | ANNE B BRENGLE PRESIDENT<br>Type or print name and title  |  |   |  |   |
| <b>Paid Preparer's Use Only</b> | Preparer's signature  TERENCE J MALAGHAN CPA   |  | Date  | Check if self-employed  | Preparer's taxpayer identification number (see instructions)<br>P00171896 |
|                                 | Firm's name (or yours if self-employed), address, and ZIP + 4<br> SANSIVERI KIMBALL & CO LLP<br>107 AIRPORT ROAD<br>WESTERLY, RI 028913420 |  | EIN  05-0255779          |  |   |
|                                 |   |  | Phone no  (401) 596-2000 |  |   |

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

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III ☐ Yes ☒ No

1 Briefly describe the organization’s mission

THE COAST GUARD FOUNDATION'S MISSION IS TO SUPPORT PROJECTS AND PROGRAMS THAT ENHANCE THE LIVES OF ALL COAST GUARD MEMBERS AND THEIR FAMILIES THE COAST GUARD FOUNDATION SERVES AS A GOODWILL AMBASSADOR FOR THE UNITED STATES COAST GUARD

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If “Yes,” describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If “Yes,” describe these changes on Schedule O

4 Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

|  |   |
|--|---|
| 4a   | (Code ) (Expenses \$ 1,414,232 including grants of \$ ) (Revenue \$ ) |
| SUPPORT TO THE UNITED STATES COAST GUARD AT LARGE THE COAST GUARD FOUNDATION CONTRIBUTES TO THE UNITED STATES COAST GUARD BY PROMOTING THE GENERAL WELFARE OF THOSE IN THE SERVICE THE FOUNDATION SUPPORTS EDUCATION, DEVELOPS LEADERSHIP POTENTIAL AND PROVIDES MORALE SUPPORT TO THOSE WHO SERVE THE COAST GUARD FOUNDATION WORKS HAND IN HAND WITH THE COAST GUARD'S EDUCATION GRANT PROGRAM TO SUPPLEMENT THE TUITION ASSISTANCE PROGRAM SO ENLISTED PERSONNEL HAVE ACCESS TO FUNDS FOR BOOKS, FEES AND SUPPLIES THAT MIGHT OTHERWISE BE OUT OF REACH COAST GUARD FOUNDATION FUNDS PROVIDE SUPPORT FOR PROGRAMS INITIATED ON THE UNIT LEVEL THAT ARE INTENDED TO IMPROVE MORALE AND HONOR AND VALUE THE COAST GUARD MEMBERS' SERVICE TO THE COUNTRY THE COAST GUARD FOUNDATION ALSO PROVIDES FUNDS FOR SPECIAL CAPITAL PROJECTS IDENTIFIED BY COAST GUARD HEADQUARTERS, SWIMMING POOLS, RECREATION CENTERS AND MULTI-PURPOSE COURTS, FOR EXAMPLE, PROVIDE SUPPORT TO LARGER COAST GUARD COMMUNITIES, AND IN PARTICULAR OFTEN BENEFIT THOSE SERVING IN REMOTE LOCATIONS THAT LACK LOCAL RESOURCES |   |

|  |   |
|--|---|
| 4b   | (Code ) (Expenses \$ 1,322,690 including grants of \$ ) (Revenue \$ ) |
| SUPPORT TO THE UNITED STATES COAST GUARD ACADEMY THE COAST GUARD FOUNDATION PROVIDES MARGIN OF EXCELLENCE FUNDING THAT PROMOTES ATHLETICS, SAILING, ACADEMICS AND ACTIVITIES AT THE US COAST GUARD ACADEMY TO ENSURE A QUALITY EDUCATIONAL EXPERIENCE FOR ITS CADETS INITIATIVES INCLUDE ACADEMIC ENRICHMENT PROGRAMS THAT BRING WELL-KNOWN GOVERNMENT FIGURES TO THE ACADEMY TO INTERACT WITH CADETS ON AN INDIVIDUAL CLASS-LEVEL AND THE CADET CORPS AS A WHOLE ENRICHMENT PROGRAMS AND EQUIPMENT FOR THE ACADEMIC DISCIPLINES PUT THE ACADEMY PROGRAMS ON A PAR WITH OTHER PRESTIGIOUS COLLEGES, UNIVERSITIES AND SERVICE ACADEMIES THE COAST GUARD FOUNDATION HAS COLLABORATED WITH THE ACADEMY TO DEVELOP LEADERSHIP SKILLS THROUGH A QUALITY WATERFRONT PROGRAM, BY PROVIDING SAIL TRAINING VESSELS AND COACHING STAFF FOR CADETS TO DEVELOP SEAMANSHIP SKILLS THAT ARE SECOND TO NONE |   |

|   |   |
|---|---|
| 4c  | (Code ) (Expenses \$ 313,916 including grants of \$ ) (Revenue \$ ) |
| SUPPORT TO COAST GUARD FAMILIES THE COAST GUARD FOUNDATION PROVIDES VITAL SUPPORT TO COAST GUARD FAMILIES, WITH SCHOLARSHIPS FOR DEPENDENTS OF ENLISTED MEMBERS TO MAKE HIGHER EDUCATION ATTAINABLE AND AFFORDABLE THE DISASTER RELIEF FUND, ESTABLISHED IN THE WAKE OF HURRICANE KATRINA, PROVIDES ASSISTANCE TO COAST GUARD MEMBERS AND FAMILIES WHO HAVE LOST PROPERTY AND POSSESSIONS BECAUSE OF A NATURAL DISASTER THROUGH THE FAMILY DISASTER RELIEF FUND, THE FOUNDATION ASSISTS FAMILIES WHO HAVE SUFFERED THE ULTIMATE HARDSHIP, LOSING A LOVED ONE IN THE LINE OF DUTY WHILE SERVING OUR COUNTRY FINANCIAL ASSISTANCE AND RESOURCES ARE MADE AVAILABLE TO THE FAMILIES THE FALLEN HEROES SCHOLARSHIP FUND PROVIDES FOR THE HIGHER EDUCATIONAL NEEDS OF THE COAST GUARD FAMILY MEMBERS WHOSE PARENT HAS PERISHED IN THE LINE OF DUTY |   |



















|   |   |
|---|---|
|   | (Code ) (Expenses \$ 211,702 including grants of \$ ) (Revenue \$ ) |
| PUBLIC AWARENESS THE COAST GUARD FOUNDATION SERVES AS A GOODWILL AMBASSADOR FOR THE UNITED STATES COAST GUARD THROUGH A PUBLIC SERVICE ANNOUNCEMENT CAMPAIGN ONLINE AND ON TELEVISION, THE COAST GUARD FOUNDATION RAISED AWARENESS FOR THE DEDICATION AND BRAVERY OF THE UNITED STATES COAST GUARD MEMBERS SERVING OUR COUNTRY RECEPTIONS HELD ON BOARD THE COAST GUARD BARQUE EAGLE ALLOWED THE FOUNDATION TO PROMOTE THE RICH HERITAGE OF THE HISTORIC SHIP AND THE COAST GUARD'S ROLE IN TRAINING COAST GUARD CADETS AND OFFICER CANDIDATES IN SAILING AND SEAMANSHIP IN HONORING COAST GUARD MEMBERS AT EVENTS AROUND THE COUNTRY, THE FOUNDATION SHOWCASED THE EVERYDAY HEROICS OF THESE DEVOTED MEMBERS OF THE SERVICE COMMUNICATION, IN THE FORM OF NEWSLETTERS, EMAIL MESSAGES AND THE WEB, INFORM COAST GUARD FOUNDATION SUPPORTERS OF THE FOUNDATION'S PROGRAMS AND THE ROLE OF THE UNITED STATES COAST GUARD IN OUR NATIONAL STORY |   |

|    |   |
|----|---|
| 4d | Other program services (Describe in Schedule O )            |
|    | (Expenses \$ 211,702 including grants of \$ ) (Revenue \$ ) |

|    |   |
|----|---|
| 4e | Total program service expenses \$ 3,262,540 |
|----|---|

Part IV

Checklist of Required Schedules

|     |  | Yes | No  |
|-----|--|-----|-----|
| 1   | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A.    | 1   | Yes |
| 2   | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?   | 2   | Yes |
| 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   | No  |
| 4   | <b>Section 501(c)(3) organizations.</b> 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   | No  |
| 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   | No  |
| 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   | No  |
| 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   | No  |
| 8   | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III   | 8   | No  |
| 9   | Did the organization report an amount in Part X, line 21, 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   | No  |
| 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  | Yes |
| 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.    | 11a | Yes |
| b   | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.   | 11b | Yes |
| c   | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.   | 11c | No  |
| d   | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.   | 11d | No  |
| e   | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.    | 11e | No  |
| 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 | No  |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII   | 12a | Yes |
| 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, XII, and XIII is optional                 | 12b | No  |
| 13  | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  | 13  | No  |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? . . . . .  | 14a | No  |
| 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, Part I . . . . .                              | 14b | No  |
| 15  | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II and IV . . . . .  | 15  | No  |
| 16  | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV . . . . .  | 16  | No  |
| 17  | Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I   | 17  | Yes |
| 18  | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II . . . . .    | 18  | Yes |
| 19  | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III . . . . .    | 19  | No  |
| 20a | Did the organization operate one or more hospitals? If "Yes," complete Schedule H . . . . .  | 20a | No  |
| b   | If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements . . . . .  | 20b |     |

Part IV

Checklist of Required Schedules (continued)

|     |  |     |     |    |
|-----|--|-----|-----|----|
| 21  | Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .  | 21  | Yes |    |
| 22  | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .   | 22  | Yes |    |
| 23  | Did the organization answer "Yes" to Part VII, Section A, questions 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  | Yes |    |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25</i> . . . . . | 24a |     | No |
| 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 to defease any tax-exempt bonds? . . . . .   | 24c |     |    |
| d   | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .  | 24d |     |    |
| 25a | <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .  | 25a |     | No |
| b   | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> . . . . .       | 25b |     | No |
| 26  | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> . . . . .                                    | 26  |     | No |
| 27  | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i> . . . . .            | 27  |     | No |
| 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? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .   | 28a |     | No |
| b   | A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .  | 28b |     | No |
| 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 owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .   | 28c |     | No |
| 29  | Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .  | 29  | Yes |    |
| 30  | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .  | 30  |     | No |
| 31  | Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .  | 31  |     | No |
| 32  | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .  | 32  |     | No |
| 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? <i>If "Yes," complete Schedule R, Part I</i> . . . . .  | 33  |     | No |
| 34  | Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . .   | 34  | Yes |    |
| 35a | Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?   | 35a |     | No |
| b   | Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .   | 35b |     | No |
| 36  | <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .   | 36  |     | No |
| 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? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .   | 37  |     | No |
| 38  | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .   | 38  | Yes |    |

|   |   |      |     |
|---|---|------|-----|
| <div>Part V</div> <div>Statements Regarding Other IRS Filings and Tax Compliance</div>          |   |      |     |
| Check if Schedule O contains a response to any question in this Part V <input type="checkbox"/> |   |      |     |
|   |   | Yes  | No  |
| 1a  | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.<br>.  | 1a20 |     |
| b   | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.  | 1b0  |     |
| c   | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  | 1c   | Yes |
| 2a  | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return.<br>.  | 2a13 |     |
| b   | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?<br><br>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).  | 2b   | Yes |
| 3a  | Did the organization have unrelated business gross income of \$1,000 or more during the year?   | 3a   | Yes |
| b   | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.   | 3b   | Yes |
| 4a  | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?  | 4a   | No  |
| b   | If "Yes," enter the name of the foreign country: _____<br>See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  |      |     |
| 5a  | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?   | 5a   | No  |
| b   | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  | 5b   | No  |
| c   | If "Yes" to line 5a or 5b, did the organization file Form 8886-T?   | 5c   |     |
| 6a  | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?   | 6a   | No  |
| b   | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?   | 6b   |     |
| 7   | Organizations that may receive deductible contributions under section 170(c).   |      |     |
| a   | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?   | 7a   | Yes |
| b   | If "Yes," did the organization notify the donor of the value of the goods or services provided?   | 7b   | Yes |
| c   | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  | 7c   | No  |
| d   | If "Yes," indicate the number of Forms 8282 filed during the year.  | 7d   |     |
| e   | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?   | 7e   | No  |
| f   | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  | 7f   | No  |
| g   | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  | 7g   |     |
| h   | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  | 7h   | Yes |
| 8   | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?   | 8    |     |
| 9   | Sponsoring organizations maintaining donor advised funds.   |      |     |
| a   | Did the organization make any taxable distributions under section 4966?   | 9a   |     |
| b   | Did the organization make a distribution to a donor, donor advisor, or related person?  | 9b   |     |
| 10  | Section 501(c)(7) organizations. Enter  |      |     |
| a   | Initiation fees and capital contributions included on Part VIII, line 12.   | 10a  |     |
| b   | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.  | 10b  |     |
| 11  | Section 501(c)(12) organizations. Enter   |      |     |
| a   | Gross income from members or shareholders.  | 11a  |     |
| b   | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).  | 11b  |     |
| 12a   | 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  |     |
| 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?<br>Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state. | 13a  |     |
| b   | Enter the aggregate 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 aggregate amount of reserves on hand.   | 13c  |     |
| 14a   | Did the organization receive any payments for indoor tanning services during the tax year?  | 14a  | No  |
| b   | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.  | 14b  |     |

Part VI

**Governance, Management, and Disclosure** For each “Yes” response to lines 2 through 7b below, and for a “No” response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.  
Check if Schedule O contains a response to any question in this Part VI ☒

| Section A. Governing Body and Management |   |    | Yes | No |
|--|---|----|-----|----|
| 1a                                       | Enter the number of voting members of the governing body at the end of the tax year . . . . .   | 1a | 30  |    |
|  | 1b  | 30 |     |    |
| 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  |     | No |
| 3  | 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  |     | No |
| 4  | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .  | 4  |     | No |
| 5  | Did the organization become aware during the year of a significant diversion of the organization’s assets? . . . . .  | 5  |     | No |
| 6  | Did the organization have members or stockholders? . . . . .  | 6  |     | No |
| 7a                                       | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . . .  | 7a |     | No |
| b  | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .   | 7b |     | No |
| 8  | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following . . . . .  |    |     |    |
| a  | The governing body? . . . . .   | 8a | Yes |    |
| b  | Each committee with authority to act on behalf of the governing body? . . . . .   | 8b | Yes |    |
| 9  | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization’s mailing address? If “Yes,” provide the names and addresses in Schedule O . . . . .        | 9  |     | No |

| Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) |  |     | Yes | No |
|---|--|-----|-----|----|
| 10a   | Did the organization have local chapters, branches, or affiliates? . . . . .   | 10a |     | No |
| b   | If “Yes,” did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization’s exempt purposes? . . . . .   | 10b |     |    |
| 11a   | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . .  | 11a | Yes |    |
| b   | Describe in Schedule O the process, if any, used by the organization to review the Form 990 . . . . .  |     |     |    |
| 12a   | Did the organization have a written conflict of interest policy? <i>If “No,” go to line 13</i> . . . . .   | 12a | Yes |    |
| b   | Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .   | 12b | Yes |    |
| c   | Did the organization regularly and consistently monitor and enforce compliance with the policy? If “Yes,” describe in Schedule O how this was done . . . . .   | 12c | Yes |    |
| 13  | Did the organization have a written whistleblower policy? . . . . .  | 13  | Yes |    |
| 14  | Did the organization have a written document retention and destruction policy? . . . . .   | 14  | Yes |    |
| 15  | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? . . . . .   |     |     |    |
| a   | The organization’s CEO, Executive Director, or top management official . . . . .   | 15a | Yes |    |
| b   | Other officers or key employees of the organization . . . . .  | 15b | Yes |    |
|   | If “Yes,” to line 15a or 15b, describe the process in Schedule O (see instructions) . . . . .  |     |     |    |
| 16a   | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .  | 16a |     | No |
| 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? . . . . . | 16b |     |    |

| Section C. Disclosure |  |
|-----------------------|--|
| 17                    | List the States with which a copy of this Form 990 is required to be filed: MA , NY , MD , FL , CA , RI , AL , WA , AZ , AK , MI , NJ , AR , GA , IL , KS , KY , LA , ME , MN , MS , NC , ND , NH , NM , OH , OK , OR , PA , SC , TN , UT , VA , WI , WV , CT , MO , HI , DC   |
| 18                    | Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.<br><input checked="" type="checkbox"/> Own website <input checked="" type="checkbox"/> Another’s website <input checked="" type="checkbox"/> Upon request |
| 19                    | Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.  |
| 20                    | State the name, physical address, and telephone number of the person who possesses the books and records of the organization: SUZAN SPRINGER<br>394 TAUGWONK ROAD<br>STONINGTON, CT 06378<br>(860) 535-0786  |

Check if Schedule O contains a response to any question in this Part VII . . . . .

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

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

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

[illegible]



## Part VII

|           |  |          |         |   |       |
|-----------|--|----------|---------|---|-------|
| <b>1b</b> | <b>Sub-Total . . . . .</b>   | <b>▼</b> |         |   |       |
| <b>c</b>  | <b>Total from continuation sheets to Part VII, Section A . . . . .</b> | <b>▼</b> |         |   |       |
| <b>d</b>  | <b>Total (add lines 1b and 1c) . . . . .</b>                           | <b>▼</b> | 193,500 | 0 | 8,978 |

**2** Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. 1

|   |   | Yes | No |
|---|---|-----|----|
| 3 | Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .  |     | No |
| 4 | For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> . . . . . | Yes |    |
| 5 | Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .                       |     | No |

## **Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A)<br>Name and business address | (B)<br>Description of services | (C)<br>Compensation |
|----------------------------------|--------------------------------|---------------------|
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►0

Part VIII

Statement of Revenue

|   |  |   |  | (A)<br>Total revenue | (B)<br>Related or<br>exempt<br>function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from<br>tax under<br>sections<br>512, 513, or<br>514 |
|---|--|---|--|----------------------|--|---|---|
| Contributions, gifts, grants<br>and other similar amounts | 1a   | Federated campaigns . . .   | 1a   |                      |  |   |   |
|   | b  | Membership dues . . . . .   | 1b   |                      |  |   |   |
|   | c  | Fundraising events . . . . .  | 1c   | 2,298,478            |  |   |   |
|   | d  | Related organizations . . . .   | 1d   |                      |  |   |   |
|   | e  | Government grants (contributions)   | 1e   |                      |  |   |   |
|   | f  | All other contributions, gifts, grants, and<br>similar amounts not included above   | 1f   | 2,120,534            |  |   |   |
|   | g  | Noncash contributions included in<br>lines 1a-1f \$ 328,875   |  |                      |  |   |   |
|   | h  | Total. Add lines 1a-1f . . . . .  |  | 4,419,012            |  |   |   |
| Program Service Revenue                                   | 2a   |   | Business Code  |                      |  |   |   |
|   | b  |   |  |                      |  |   |   |
|   | c  |   |  |                      |  |   |   |
|   | d  |   |  |                      |  |   |   |
|   | e  |   |  |                      |  |   |   |
|   | f  | All other program service revenue   |  |                      |  |   |   |
|   | g  | Total. Add lines 2a-2f . . . . .  |  |                      |  |   |   |
|   | Other Revenue                                    | 3   | Investment income (including dividends, interest<br>and other similar amounts) . . . . . |                      | 69,052   |   |   |
| 4   |  | Income from investment of tax-exempt bond proceeds . .  |  |                      |  |   |   |
| 5   |  | Royalties . . . . .   |  |                      |  |   |   |
| 6a  |  | Gross rents   | (i) Real<br>89,880   | (ii) Personal        |  |   |   |
| b   |  | Less rental<br>expenses   |  |                      |  |   |   |
| c   |  | Rental income<br>or (loss)  | 89,880   |                      |  |   |   |
| d   |  | Net rental income or (loss) . . . . .   |  |                      | 89,880   |   | 89,880  |
| 7a  |  | Gross amount<br>from sales of<br>assets other<br>than inventory   | (i) Securities<br>2,290,402  | (ii) Other<br>1,132  |  |   |   |
| b   |  | Less cost or<br>other basis and<br>sales expenses   | 2,216,121  | 1,640                |  |   |   |
| c   |  | Gain or (loss)  | 74,281   | -508                 |  |   |   |
| d   |  | Net gain or (loss) . . . . .  |  |                      | 73,773   | 73,773                                  |   |
| 8a  |  | Gross income from fundraising<br>events (not including<br>\$ 2,298,478<br>of contributions reported on line 1c)<br>See Part IV, line 18 . . . . . |  |                      |  |   |   |
| a   |  |   | 893,125  |                      |  |   |   |
| b   |  | Less direct expenses . . . . .  |  | 898,920              |  |   |   |
| c   |  | Net income or (loss) from fundraising events . .  |  |                      | -5,795   |   | -5,795  |
| 9a  |  | Gross income from gaming activities<br>See Part IV, line 19 . . . . .   |  |                      |  |   |   |
| a   |  |   |  |                      |  |   |   |
| b   |  | Less direct expenses . . . . .  |  |                      |  |   |   |
| c   |  | Net income or (loss) from gaming activities . .   |  |                      |  |   |   |
| 10a   |  | Gross sales of inventory, less<br>returns and allowances . . . . .  |  |                      |  |   |   |
| a   |  |   |  |                      |  |   |   |
| b   | Less cost of goods sold . . . . .                |   |  |                      |  |   |   |
| c   | Net income or (loss) from sales of inventory . . |   |  |                      |  |   |   |
| Miscellaneous Revenue                                     |  | Business Code   |  |                      |  |   |   |
| 11a   | TRUSTEE DUES                                     | 900099  | 41,000   | 41,000               |  |   |   |
| b   | SALE OF PROMOTIONAL IT                           | 453220  | 5,229  |                      | 5,229  |   |   |
| c   | MISCELLANEOUS INCOME                             | 900099  | 717  | 717                  |  |   |   |
| d   | All other revenue . . . . .                      |   |  |                      |  |   |   |
| e   | Total. Add lines 11a-11d . . . . .               |   | 46,946   |                      |  |   |   |
| 12  | Total revenue. See Instructions . . . . .        |   | 4,692,868  | 115,490              | 5,229  | 153,137                                 |   |

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

Check if Schedule O contains a response to any question in this Part IX

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. |  | (A)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>Fundraising expenses |
|--|--|-----------------------|---------------------------------|--|-----------------------------|
| 1  | Grants and other assistance to governments and organizations in the United States See Part IV, line 21   | 1,836,578             | 1,836,578                       |  |                             |
| 2  | Grants and other assistance to individuals in the United States See Part IV, line 22   | 242,111               | 242,111                         |  |                             |
| 3  | Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16  |                       |                                 |  |                             |
| 4  | Benefits paid to or for members  |                       |                                 |  |                             |
| 5  | Compensation of current officers, directors, trustees, and key employees . . . . .   | 221,856               | 31,060                          | 79,868                                 | 110,928                     |
| 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   | 579,346               | 188,415                         | 157,864                                | 233,067                     |
| 8  | Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .  | 23,804                | 5,440                           | 4,325                                  | 14,039                      |
| 9  | Other employee benefits . . . . .  | 36,620                | 1,592                           | 8,762                                  | 26,266                      |
| 10   | Payroll taxes . . . . .  | 65,119                | 14,084                          | 13,999                                 | 37,036                      |
| 11   | Fees for services (non-employees)  |                       |                                 |  |                             |
| a  | Management . . . . .   |                       |                                 |  |                             |
| b  | Legal . . . . .  | 14,259                |                                 | 14,259                                 |                             |
| c  | Accounting . . . . .   | 30,820                |                                 | 30,820                                 |                             |
| d  | Lobbying . . . . .   |                       |                                 |  |                             |
| e  | Professional fundraising See Part IV, line 17 . . . . .  | 22,200                |                                 |  | 22,200                      |
| f  | Investment management fees . . . . .   | 34,762                |                                 | 34,762                                 |                             |
| g  | Other . . . . .  | 135,772               | 66,182                          | 15,092                                 | 54,498                      |
| 12   | Advertising and promotion . . . . .  | 47,313                | 16,774                          | 3,640                                  | 26,899                      |
| 13   | Office expenses . . . . .  | 52,258                | 21,284                          | 16,629                                 | 14,345                      |
| 14   | Information technology . . . . .   | 26,575                | 6,911                           | 5,851                                  | 13,813                      |
| 15   | Royalties . . . . .  |                       |                                 |  |                             |
| 16   | Occupancy . . . . .  | 45,732                | 28,258                          | 8,689                                  | 8,785                       |
| 17   | Travel . . . . .   | 99,397                | 14,932                          | 12,978                                 | 71,487                      |
| 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 . . . . .  | 59,099                | 29,459                          | 12,212                                 | 17,428                      |
| 23   | Insurance . . . . .  | 5,366                 | 300                             | 5,066                                  |                             |
| 24   | Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O )  |                       |                                 |  |                             |
| a  | EVENT ATTENDANCE   | 543,064               | 543,064                         |  |                             |
| b  | DIRECT MAIL SOLICITATIO  | 238,011               |                                 |  | 238,011                     |
| c  | BOATS DONATED TO THE CO  | 171,885               | 171,885                         |  |                             |
| d  | MISCELLANEOUS  | 47,952                | 2,231                           | 35,157                                 | 10,564                      |
| e  |  |                       |                                 |  |                             |
| f  | All other expenses   | 136,125               | 41,980                          | 38,698                                 | 55,447                      |
| 25   | Total functional expenses. Add lines 1 through 24f   | 4,716,024             | 3,262,540                       | 498,671                                | 954,813                     |
| 26   | Joint costs. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation | 527,879               | 272,255                         | 9,444                                  | 246,180                     |

Part X

Balance Sheet

|                             |   |  |     |           | (A)               |     | (B)         |
|-----------------------------|---|--|-----|-----------|-------------------|-----|-------------|
|                             |   |  |     |           | Beginning of year |     | End of year |
| Assets                      | 1   | Cash—non-interest-bearing . . . . .  |     |           | 324,526           | 1   | 326,682     |
|                             | 2   | Savings and temporary cash investments . . . . .   |     |           | 1,439,130         | 2   | 875,998     |
|                             | 3   | Pledges and grants receivable, net . . . . .   |     |           | 432,790           | 3   | 477,002     |
|                             | 4   | Accounts receivable, net . . . . .   |     |           | 4,819             | 4   | 3,502       |
|                             | 5   | Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .                   |     |           |                   | 5   |             |
|                             | 6   | Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L . . . . .      |     |           |                   | 6   |             |
|                             | 7   | Notes and loans receivable, net . . . . .  |     |           |                   | 7   |             |
|                             | 8   | Inventories for sale or use . . . . .  |     |           | 35,095            | 8   | 33,936      |
|                             | 9   | Prepaid expenses and deferred charges . . . . .  |     |           | 118,433           | 9   | 72,360      |
|                             | 10a   | Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  | 10a | 1,670,369 |                   |     |             |
|                             | b   | Less accumulated depreciation . . . . .  | 10b | 607,741   | 1,033,467         | 10c | 1,062,628   |
|                             | 11  | Investments—publicly traded securities . . . . .   |     |           | 2,878,192         | 11  | 3,133,169   |
|                             | 12  | Investments—other securities See Part IV, line 11 . . . . .  |     |           | 1,287,653         | 12  | 1,147,155   |
|                             | 13  | Investments—program-related See Part IV, line 11 . . . . .   |     |           |                   | 13  |             |
|                             | 14  | Intangible assets . . . . .  |     |           |                   | 14  |             |
|                             | 15  | Other assets See Part IV, line 11 . . . . .  |     |           | 0                 | 15  | 35,678      |
|                             | 16  | Total assets. Add lines 1 through 15 (must equal line 34) . . . . .  |     |           | 7,554,105         | 16  | 7,168,110   |
| Liabilities                 | 17  | Accounts payable and accrued expenses . . . . .  |     |           | 426,725           | 17  | 155,909     |
|                             | 18  | Grants payable . . . . .   |     |           |                   | 18  |             |
|                             | 19  | Deferred revenue . . . . .   |     |           | 36,500            | 19  | 46,500      |
|                             | 20  | Tax-exempt bond liabilities . . . . .  |     |           |                   | 20  |             |
|                             | 21  | Escrow or custodial account liability Complete Part IV of Schedule D . . . . .   |     |           |                   | 21  |             |
|                             | 22  | 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 . . . . . |     |           | 5,364             | 25  | 0           |
|                             | 26  | Total liabilities. Add lines 17 through 25 . . . . .   |     |           | 468,589           | 26  | 202,409     |
| Net Assets or Fund Balances | Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. |  |     |           |                   |     |             |
|                             | 27  | Unrestricted net assets . . . . .  |     |           | 2,726,902         | 27  | 2,829,490   |
|                             | 28  | Temporarily restricted net assets . . . . .  |     |           | 1,808,464         | 28  | 1,403,902   |
|                             | 29  | Permanently restricted net assets . . . . .  |     |           | 2,550,150         | 29  | 2,732,309   |
|                             | Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.                          |  |     |           |                   |     |             |
|                             | 30  | Capital stock or trust principal, or current funds . . . . .   |     |           |                   | 30  |             |
|                             | 31  | Paid-in or capital surplus, or land, building or equipment fund . . . . .  |     |           |                   | 31  |             |
|                             | 32  | Retained earnings, endowment, accumulated income, or other funds . . . . .   |     |           |                   | 32  |             |
|                             | 33  | Total net assets or fund balances . . . . .  |     |           | 7,085,516         | 33  | 6,965,701   |
|                             | 34  | Total liabilities and net assets/fund balances . . . . .   |     |           | 7,554,105         | 34  | 7,168,110   |

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

|   |   |   |           |
|---|---|---|-----------|
| 1 | Total revenue (must equal Part VIII, column (A), line 12)   | 1 | 4,692,868 |
| 2 | Total expenses (must equal Part IX, column (A), line 25)  | 2 | 4,716,024 |
| 3 | Revenue less expenses Subtract line 2 from line 1   | 3 | -23,156   |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))                     | 4 | 7,085,516 |
| 5 | Other changes in net assets or fund balances (explain in Schedule O)  | 5 | -96,659   |
| 6 | Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) | 6 | 6,965,701 |

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

|    |  | Yes | No |
|----|--|-----|----|
| 1  | Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other<br>If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O  |     |    |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant?  |     | No |
| b  | Were the organization's financial statements audited by an independent accountant?   | Yes |    |
| c  | If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?<br>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O | Yes |    |
| d  | If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both<br><input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis             |     |    |
| 3a | 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?   |     | No |
| b  | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits   |     |    |

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury  
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public  
Inspection

|  |  |
|--|--|
| Name of the organization<br>COAST GUARD FOUNDATION INC | Employer identification number<br>04-2899862 |
|--|--|

Part I Reason for Public Charity Status

(All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box )

- 1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E )
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's 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, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )
- 10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**
- 11

☒

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☒

Type III - Other
- e

☒

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?
- h

☐

Provide the following information about the supported organization(s)

|          | Yes | No |
|----------|-----|----|
| 11g(i)   |     | No |
| 11g(ii)  |     | No |
| 11g(iii) |     | No |






| (i)<br>Name of supported organization | (ii)<br>EIN | (iii)<br>Type of organization (described on lines 1- 9 above or IRC section (see instructions)) | (iv)<br>Is the organization in col (i) listed in your governing document? |    | (v)<br>Did you notify the organization in col (i) of your support? |    | (vi)<br>Is the organization in col (i) organized in the U S ? |    | (vii)<br>Amount of support? |
|---------------------------------------|-------------|---|---|----|--|----|---|----|-----------------------------|
|                                       |             |   | Yes   | No | Yes  | No | Yes   | No |                             |
| (A) US COAST GUARD                    | 546010204   | 6   | Yes   |    | Yes  |    | Yes   |    | 1,414,231                   |
| (B) USCG ACADEMY                      | 546010204   | 6   | Yes   |    | Yes  |    | Yes   |    | 1,322,689                   |
|                                       |             |   |   |    |  |    |   |    |                             |
|                                       |             |   |   |    |  |    |   |    |                             |
|                                       |             |   |   |    |  |    |   |    |                             |
| Total                                 |             |   |   |    |  |    |   |    | 2,736,920                   |

Part II

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

| Section A. Public Support   |          |          |          |          |          |           |
|---|----------|----------|----------|----------|----------|-----------|
| Calendar year (or fiscal year beginning in)   | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (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   |          |          |          |          |          |           |

| Section B. Total Support                    |  |          |          |          |          |          |           |
|---|--|----------|----------|----------|----------|----------|-----------|
| Calendar year (or fiscal year beginning in) |  | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (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 (Explain in Part IV ) Do not include gain or loss from the sale of capital assets   |          |          |          |          |          |           |
| 11  | Total support (Add lines 7 through 10)   |          |          |          |          |          |           |
| 12  | Gross receipts from related activities, etc (See instructions )  |          |          |          |          | 12       |           |
| 13  | First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here |          |          |          |          |          |           |

| Section C. Computation of Public Support Percentage |  |    |  |
|---|--|----|--|
| 14  | Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))   | 14 |  |
| 15  | Public Support Percentage for 2010 Schedule A, Part II, line 14  | 15 |  |
| 16a   | <b>33 1/3% support test—2011.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization    |    |  |
| b   | <b>33 1/3% support test—2010.</b> If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization   |    |  |
| 17a   | <b>10%-facts-and-circumstances test—2011.</b> If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization       |    |  |
| b   | <b>10%-facts-and-circumstances test—2010.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization  |    |  |
| 18  | <b>Private Foundation</b> If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions   |    |  |

Part III

Support Schedule for Organizations Described in IRC 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.)

| Section A. Public Support  |          |          |          |          |          |           |
|--|----------|----------|----------|----------|----------|-----------|
| Calendar year (or fiscal year beginning in)  | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")  |          |          |          |          |          |           |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose |          |          |          |          |          |           |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513   |          |          |          |          |          |           |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  |          |          |          |          |          |           |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge  |          |          |          |          |          |           |
| 6 Total. Add lines 1 through 5   |          |          |          |          |          |           |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons  |          |          |          |          |          |           |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year           |          |          |          |          |          |           |
| c Add lines 7a and 7b  |          |          |          |          |          |           |
| 8 Public Support (Subtract line 7c from line 6 )   |          |          |          |          |          |           |

| Section B. Total Support  |          |          |          |          |          |           |
|---|----------|----------|----------|----------|----------|-----------|
| Calendar year (or fiscal year beginning in)   | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| 9 Amounts from line 6   |          |          |          |          |          |           |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources                                      |          |          |          |          |          |           |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975   |          |          |          |          |          |           |
| c Add lines 10a and 10b   |          |          |          |          |          |           |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  |          |          |          |          |          |           |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  |          |          |          |          |          |           |
| 13 Total support (Add lines 9, 10c, 11 and 12.)   |          |          |          |          |          |           |
| 14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here |          |          |          |          |          |           |

| Section C. Computation of Public Support Percentage                                     |    |  |
|---|----|--|
| 15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) | 15 |  |
| 16 Public support percentage from 2010 Schedule A, Part III, line 15                    | 16 |  |

| Section D. Computation of Investment Income Percentage   |    |  |
|--|----|--|
| 17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))   | 17 |  |
| 18 Investment income percentage from 2010 Schedule A, Part III, line 17  | 18 |  |
| 19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization         |    |  |
| b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization |    |  |
| 20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions  |    |  |



**Part IV** **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

|                              |
|------------------------------|
| Facts And Circumstances Test |
|                              |

|             |
|-------------|
| Explanation |
|             |
|             |
|             |
|             |

SCHEDULE D  
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b  
Attach to Form 990. See separate instructions.

Name of the organization  
COAST GUARD FOUNDATION INC

Employer identification number  
04-2899862

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

|   |  |                              |
|---|--|------------------------------|
|   | (a) Donor advised funds  | (b) Funds and other accounts |
| 1 | Total number at end of year  |                              |
| 2 | Aggregate contributions to (during year)   |                              |
| 3 | Aggregate 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?   |                              |
|   | <input type="checkbox"/> Yes <input type="checkbox"/> No   |                              |
| 6 | Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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 |                              |
|   | <input type="checkbox"/> Yes <input type="checkbox"/> No   |                              |

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)  
☐ Preservation of land for public use (e g , recreation or pleasure) ☐ Preservation of an historically importantly land area  
☐ Protection of natural habitat ☐ Preservation of a certified historic structure  
☐ Preservation of open space

2 Complete lines 2a–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 Year  |
| 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) |
| d | Number of conservation easements included in (c) acquired after 8/17/06            |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, 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 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, 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" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, 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) Revenues included in 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 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

|    |        |
|----|--------|
|    | Amount |
| 1c |        |
| 1d |        |
| 1e |        |
| 1f |        |

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

|    |  |               |                   |                     |                    |
|----|--|---------------|-------------------|---------------------|--------------------|
|    | (a)Current Year  | (b)Prior Year | (c)Two Years Back | (d)Three Years Back | (e)Four Years Back |
| 1a | Beginning of year balance . . . . .                      | 4,157,343     | 3,717,157         | 3,775,113           | 4,856,711          |
| b  | Contributions . . . . .                                  | 279,559       | 252,340           | 225,290             | 285,489            |
| c  | Investment earnings or losses . . . . .                  | 8,044         | 439,192           | -7,025              | -1,184,850         |
| d  | Grants or scholarships . . . . .                         |               |                   |                     |                    |
| e  | Other expenditures for facilities and programs . . . . . | 164,622       | 251,346           | 276,221             | 182,237            |
| f  | Administrative expenses . . . . .                        |               |                   |                     |                    |
| g  | End of year balance . . . . .                            | 4,280,324     | 4,157,343         | 3,717,157           | 3,775,113          |

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 20 250 %

b

Permanent endowment ▶ 63 140 %

c

Term endowment ▶ 16 610 %

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations . . . . .

3a(i)

☐ Yes

☐ No

(ii)

related organizations . . . . .

3a(ii)

☐ Yes

☐ No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

☐ Yes

☐ No

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

| Description of property  | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land . . . . .  |                                      | 381,374                         |                              | 381,374        |
| b Buildings . . . . .  |                                      | 871,283                         | 386,372                      | 484,911        |
| c Leasehold improvements . . . . .   |                                      |                                 |                              |                |
| d Equipment . . . . .  |                                      | 316,329                         | 190,721                      | 125,608        |
| e Other . . . . .  |                                      | 101,383                         | 30,648                       | 70,735         |
| Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) . . . . . ▶ |                                      |                                 |                              | 1,062,628      |



Part XI

Reconciliation of Change in Net Assets from Form 990 to Financial Statements

|    |   |    |           |
|----|---|----|-----------|
| 1  | Total revenue (Form 990, Part VIII, column (A), line 12)                        | 1  | 4,692,868 |
| 2  | Total expenses (Form 990, Part IX, column (A), line 25)                         | 2  | 4,716,024 |
| 3  | Excess or (deficit) for the year Subtract line 2 from line 1                    | 3  | -23,156   |
| 4  | Net unrealized gains (losses) on investments                                    | 4  | -96,659   |
| 5  | Donated services and use of facilities  | 5  |           |
| 6  | Investment expenses   | 6  |           |
| 7  | Prior period adjustments  | 7  |           |
| 8  | Other (Describe in Part XIV)  | 8  |           |
| 9  | Total adjustments (net) Add lines 4 - 8   | 9  | -96,659   |
| 10 | Excess or (deficit) for the year per financial statements Combine lines 3 and 9 | 10 | -119,815  |

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

|   |  |    |            |
|---|--|----|------------|
| 1 | Total revenue, gains, and other support per audited financial statements . . . . .         | 1  | 11,579,666 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12                         |    |            |
| a | Net unrealized gains on investments . . . . .  | 2a | -96,659    |
| b | Donated services and use of facilities . . . . .   | 2b | 6,119,299  |
| c | Recoveries of prior year grants . . . . .  | 2c |            |
| d | Other (Describe in Part XIV) . . . . .   | 2d |            |
| e | Add lines 2a through 2d . . . . .  | 2e | 6,022,640  |
| 3 | Subtract line 2e from line 1 . . . . .   | 3  | 5,557,026  |
| 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 | 34,762     |
| b | Other (Describe in Part XIV) . . . . .   | 4b | -898,920   |
| c | Add lines 4a and 4b . . . . .  | 4c | -864,158   |
| 5 | Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12 ) . . . . . | 5  | 4,692,868  |

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

|   |   |    |            |
|---|---|----|------------|
| 1 | Total expenses and losses per audited financial statements . . . . .                        | 1  | 11,699,481 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25                            |    |            |
| a | Donated services and use of facilities . . . . .  | 2a | 6,119,299  |
| b | Prior year adjustments . . . . .  | 2b |            |
| c | Other losses . . . . .  | 2c |            |
| d | Other (Describe in Part XIV) . . . . .  | 2d | 898,920    |
| e | Add lines 2a through 2d . . . . .   | 2e | 7,018,219  |
| 3 | Subtract line 2e from line 1 . . . . .  | 3  | 4,681,262  |
| 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 | 34,762     |
| b | Other (Describe in Part XIV) . . . . .  | 4b |            |
| c | Add lines 4a and 4b . . . . .   | 4c | 34,762     |
| 5 | Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18 ) . . . . . | 5  | 4,716,024  |

Part XIV

Supplemental Information

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

| Identifier                                     | Return Reference | Explanation  |
|--|------------------|--|
| DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS | PART V, LINE 4   | ENDOWMENT FUNDS WERE CREATED TO SUPPORT THE COAST GUARD ACADEMY AND THE VARIOUS COAST GUARD DISTRICTS. SUCH SUPPORT COMES IN MANY FORMS INCLUDING PROJECTS TO BENEFIT DISTRICT MORALE, ACADEMIC AND ATHLETIC PROGRAMS AT THE ACADEMY, AS WELL AS PROGRAMS TO SUPPORT COAST GUARD FAMILIES, INCLUDING SCHOLARSHIPS. |
| PART XII, LINE 4B - OTHER ADJUSTMENTS          |                  | DIRECT EXPENSES OTHER THAN FUNDRAISING - SPECIAL EVENTS -898,920   |
| PART XIII, LINE 2D - OTHER ADJUSTMENTS         |                  | DIRECT EXPENSES OTHER THAN FUNDRAISING - SPECIAL EVENTS 898,920  |

SCHEDULE G  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Supplemental Information Regarding  
Fundraising or Gaming Activities

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

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization  
COAST GUARD FOUNDATION INC

Employer identification number  
04-2899862

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a☒ Mail solicitations

e☒ Solicitation of non-government grants

b☒ Internet and e-mail solicitations

f☐ Solicitation of government grants

c☒ Phone solicitations

g☒ Special fundraising events

d☒ In-person solicitations

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

| (i) Name and address of individual or entity (fundraiser)      | (ii) Activity      | (iii) Did fundraiser have custody or control of contributions? |    | (iv) Gross receipts from activity | (v) Amount paid to (or retained by) fundraiser listed in col (i) | (vi) Amount paid to (or retained by) organization |
|--|--------------------|--|----|-----------------------------------|--|---|
|  |                    | Yes  | No |                                   |  |   |
| LW ROBBINS INC<br>201 SUMMER STREET<br><br>HOLLISTON, MA 01746 | MAIL SOLICITATIONS |  | No | 566,501                           | 22,200   | 544,301   |
|  |                    |  |    |                                   |  |   |
|  |                    |  |    |                                   |  |   |
|  |                    |  |    |                                   |  |   |
|  |                    |  |    |                                   |  |   |
|  |                    |  |    |                                   |  |   |
|  |                    |  |    |                                   |  |   |
|  |                    |  |    |                                   |  |   |
|  |                    |  |    |                                   |  |   |
|  |                    |  |    |                                   |  |   |
| Total . . . . . ▶  |                    |  |    | 566,501                           | 22,200   | 544,301   |

3

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 50083H

Schedule G (Form 990 or 990-EZ) 2011

Part II Fundraising Events.

Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

|                 |    | (a) Event #1   | (b) Event #2              | (c) Other Events     | (d) Total Events                 |
|-----------------|----|--|---------------------------|----------------------|----------------------------------|
|                 |    | NEW YORK DINNER<br>(event type)                                      | DC DINNER<br>(event type) | 10<br>(total number) | (Add col (a) through<br>col (c)) |
| Revenue         | 1  | Gross receipts . . . .   | 570,200                   | 932,225              | 1,689,178                        |
|                 | 2  | Less Charitable contributions . . . .                                | 376,100                   | 680,225              | 1,286,338                        |
|                 | 3  | Gross income (line 1 minus line 2) . . . .                           | 194,100                   | 252,000              | 402,840                          |
| Direct Expenses | 4  | Cash prizes . . . .  |                           |                      |                                  |
|                 | 5  | Non-cash prizes . . . .  |                           | 13,753               | 13,753                           |
|                 | 6  | Rent/facility costs . . . .  | 5,470                     | 115,145              | 131,157                          |
|                 | 7  | Food and beverages . . . .   | 80,140                    | 101,164              | 335,158                          |
|                 | 8  | Entertainment . . . .  | 5,183                     | 14,549               | 9,362                            |
|                 | 9  | Other direct expenses . . . .  |                           | 1,582                | 86,257                           |
|                 | 10 | Direct expense summary Add lines 4 through 9 in column (d) . . . . . |                           |                      | ( 898,920 )                      |
|                 | 11 | Net income summary Combine lines 3 and 10 in column (d). . . . .     |                           |                      | -49,980                          |

Part III Gaming.

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

|                 |   | (a) Bingo   | (b) Pull tabs/Instant<br>bingo/progressive bingo                  | (c) Other gaming  | (d) Total gaming  |
|-----------------|---|---|---|---|---|
|                 |   |   |   |   | (Add col (a) through<br>col (c))                                  |
| Revenue         | 1 | Gross revenue . . . . .   |   |   |   |
|                 | 2 | Cash prizes . . . . .   |   |   |   |
| Direct Expenses | 3 | Non-cash prizes . . . . .   |   |   |   |
|                 | 4 | Rent/facility costs . . . . .   |   |   |   |
|                 | 5 | Other direct expenses . . . . .   |   |   |   |
|                 | 6 | Volunteer labor . . . . .   | <input type="checkbox"/> Yes .....<br><input type="checkbox"/> No | <input type="checkbox"/> Yes .....<br><input type="checkbox"/> No | <input type="checkbox"/> Yes .....<br><input type="checkbox"/> No |
|                 | 7 | Direct expense summary Add lines 2 through 5 in column (d) . . . . .    |   |   | ( )   |
|                 | 8 | Net gaming income summary Combine lines 1 and 7 in column (d) . . . . . |   |   |   |

9 Enter the state(s) in which the organization operates gaming activities \_\_\_\_\_

a Is the organization licensed to operate gaming activities in each of these states? . . . . . ☐ Yes ☐ No

b If "No," Explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . . ☐ Yes ☐ No

b If "Yes," Explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11

Does the organization operate gaming activities with nonmembers?

Yes

No

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

Yes

No

13

Indicate the percentage of gaming activity operated in

a

The organization's facility

13a

b

An outside facility

13b

14

Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name  \_\_\_\_\_

Address  \_\_\_\_\_



15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

Yes

No

b

If "Yes," enter the amount of gaming revenue received by the organization  \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party  \$ \_\_\_\_\_

c

If "Yes," enter name and address

Name  \_\_\_\_\_

Address  \_\_\_\_\_

16 Gaming manager information

Name  \_\_\_\_\_

Gaming manager compensation  \$ \_\_\_\_\_

Description of services provided  \_\_\_\_\_

Director/officer

Employee

Independent contractor

17

Mandatory distributions


a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

Yes

No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  \$ \_\_\_\_\_

**Part IV** Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

| Identifier                          | ReturnReference                         | Explanation   |
|-------------------------------------|---|---|
| EXPLANATION OF FUNDRAISING PAYMENTS | SCHEDULE G, PART I, LINE 2B, COLUMN (V) | THE CONTRACT WITH LW ROBBINS, INC IS FOR CONSULTING WORK RELATED TO DIRECT MAIL SOLICITATIONS IN ADDITION, THE COMPANY PROVIDES MAILING SERVICES UNDER A SEPARATE AGREEMENT FOR WHICH THE FOUNDATION IS BILLED SEPARATELY FOLLOWING EACH MAILING TOTAL FEES PAID TO LW ROBBINS, INC FOR ADDITIONAL SERVICES PROVIDED IN 2011 WERE \$204,519 |



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Schedule I  
(Form 990)

OMB No 1545-0047

2011

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

Grants and Other Assistance to Organizations,  
Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990

Name of the organization  
COAST GUARD FOUNDATION INC

Employer identification number  
04-2899862

Part I

General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .

Yes

No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . . .

| (a) Name and address of organization or government | (b) EIN    | (c) IRC Code 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) UNITED STATES COAST GUARD                      | 54-6010204 |                                    | 220,000                  |                                   |   |  | TO PROVIDE EDUCATIONAL GRANTS TO ENLISTED PERSONNEL                               |
| (2) UNITED STATES COAST GUARD                      | 54-6010204 |                                    | 278,001                  |                                   |   |  | TO ENHANCE EDUCATIONAL OPPORTUNITIES AT THE COAST GUARD ACADEMY                   |
| (3) UNITED STATES COAST GUARD                      | 54-6010204 |                                    | 691,129                  |                                   |   |  | TO SUPPORT THE WATERFRONT PROGRAM AT THE COAST GUARD ACADEMY                      |
| (4) UNITED STATES COAST GUARD                      | 54-6010204 |                                    | 494,348                  |                                   |   |  | TO IMPROVE MORALE AND WELFARE OF COAST GUARDSMEN                                  |
| (5) UNITED STATES COAST GUARD                      | 54-6010204 |                                    | 75,600                   |                                   |   |  | TO ENHANCE THE ATHLETIC PROGRAMS AT THE COAST GUARD ACADEMY                       |
| (6) UNITED STATES COAST GUARD                      | 54-6010204 |                                    | 62,500                   |                                   |   |  | TO SUPPORT PUBLIC OUTREACH OPPORTUNITIES AT THE COAST GUARD ACADEMY AND DISTRICTS |
| (7) UNITED STATES COAST GUARD                      | 54-6010204 |                                    | 15,000                   |                                   |   |  | TO ENHANCE LEADERSHIP DEVELOPMENT PROGRAMS AT THE COAST GUARD ACADEMY             |
|  |            |                                    |                          |                                   |   |  |   |
|  |            |                                    |                          |                                   |   |  |   |
|  |            |                                    |                          |                                   |   |  |   |
|  |            |                                    |                          |                                   |   |  |   |
|  |            |                                    |                          |                                   |   |  |   |

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . .

1

3

Enter total number of other organizations listed in the line 1 table . . . . .

1

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 50055P

Schedule I (Form 990) 2011

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
Use Schedule I-1 (Form 990) if additional space is needed.

| (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) COLLEGE SCHOLARSHIPS TO CHILDREN OF ENLISTED PERSONNEL                              | 56                      | 212,541                 |                                  |  |                                       |
| (2) DISASTER RELIEF ASSISTANCE - REIMBURSEMENT FOR LOSSES INCURRED FROM HURRICANE IRENE | 4                       | 6,370                   |                                  |  |                                       |
| (3) COLLEGE SCHOLARSHIPS TO RESERVISTS AND THEIR DEPENDENTS                             | 6                       | 6,000                   |                                  |  |                                       |
| (4) EDUCATION GRANTS TO SPOUSES OF COAST GURAD ENLISTED PERSONNEL                       | 77                      | 17,200                  |                                  |  |                                       |
|   |                         |                         |                                  |  |                                       |
|   |                         |                         |                                  |  |                                       |
|   |                         |                         |                                  |  |                                       |

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

| Identifier                                 | Return Reference | Explanation  |
|--|------------------|--|
| PROCEDURE FOR MONITORING GRANTS IN THE U S | PART I, LINE 2   | SCHEDULE I, PART I, LINE 2 SCHOLARSHIPS ARE AWARDED BY AN INDEPENDENT SCHOLARSHIP BOARD CONSISTING OF COAST GUARD PERSONNEL AND ONE FOUNDATION MEMBER ONCE AWARDED, THE FOUNDATION MANAGES ALL SCHOLARSHIP PAYMENTS PAYMENTS ARE MADE ONLY UPON VERIFICATION OF ENROLLMENT AND RECEIPT OF A BILL INDICATING THE AMOUNT DUE PAYMENTS ARE MADE DIRECTLY TO THE INSTITUTION OF HIGHER EDUCATION WITH INSTRUCTIONS THAT NO PART OF THE PAYMENT IS TO BE REIMBURSED TO THE STUDENT IF FULL PAYMENT IS NOT NEEDED FOR THAT STUDENT IT IS REFUNDED TO THE FOUNDATION EDUCATION GRANTS FOR SPOUSES ARE AWARDED BASED ON A GRANT APPLICATION AND ARE PAID DIRECTLY TO THE RECIPIENT EDUCATION GRANTS ARE ADMINISTERED BY THE COAST GUARD INSTITUTE WHO ANNOUNCES THE FUNDS AVAILABILITY, CHECKS FOR ELIGIBILITY, AND DISBURSES TO THE INDIVIDUALS SELECTED THE INSTITUTE REPORTS TO TEH FOUNDATION WITH PAYEE, CHECK NUMBER AND AMOUNT RECIPIENTS ALSO HAVE THE ABILITY TO SEND ACKNOWLEDGEMENT EMAILS GRANTS TO THE COAST GUARD ARE DETERMINED BASED ON A NEEDS LIST PRESENTED TO THE GRANTS COMMITTEE WHICH INCLUDES A DESCRIPTION OF HOW THE SUPPORT BENEFITS COAST GUARD PERSONNEL AND HOW MANY ARE BENEFITED IN ADDITION, AVAILABLE FUNDING BY PROGRAM IS CONSIDERED IN GRANTING REQUESTS GRANTS ARE DISBURSED TO THE COAST GUARD GIFT FUND AND THE COAST GUARD REPORTS BACK WITH DOCUMENTATION OF EXPENDITURE |

Schedule J  
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization  
COAST GUARD FOUNDATION INC

Employer identification number  
  
04-2899862

Part I

Questions Regarding Compensation

|    |   |     |    |
|----|---|-----|----|
|    |   | Yes | No |
| 1a | Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items   |     |    |
|    | <div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div></div> <div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div></div> <div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div></div> <div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div> |     |    |
| b  | If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain   | 1b  |    |
| 2  | Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?  | 2   |    |
| 3  | Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply  |     |    |
|    | <div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Written employment contract</div></div> <div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div></div> <div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>   |     |    |
| 4  | During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization  |     |    |
| a  | Receive a severance payment or change-of-control payment?   | 4a  | No |
| b  | Participate in, or receive payment from, a supplemental nonqualified retirement plan?   | 4b  | No |
| c  | Participate in, or receive payment from, an equity-based compensation arrangement?  | 4c  | No |
|    | If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III  |     |    |
|    | Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.  |     |    |
| 5  | For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of   |     |    |
| a  | The organization?   | 5a  | No |
| b  | Any related organization?   | 5b  | No |
|    | If "Yes," to line 5a or 5b, describe in Part III  |     |    |
| 6  | For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of   |     |    |
| a  | The organization?   | 6a  | No |
| b  | Any related organization?   | 6b  | No |
|    | If "Yes," to line 6a or 6b, describe in Part III  |     |    |
| 7  | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III  | 7   | No |
| 8  | Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III  | 8   | No |
| 9  | If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?  | 9   |    |

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

[illegible]

**Part III**   **Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

| Identifier | Return Reference | Explanation |
|------------|------------------|-------------|
|------------|------------------|-------------|

SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

NonCash Contributions

►Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.  
► Attach to Form 990.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization  
COAST GUARD FOUNDATION INC

Employer identification number  
04-2899862

Part I Types of Property

|   | (a)<br>Check<br>if<br>applicable | (b)<br>Number of Contributions<br>or items contributed | (c)<br>Contribution amounts<br>reported on<br>Form 990, Part VIII, line<br>1g | (d)<br>Method of determining<br>contribution amounts |
|---|----------------------------------|--|---|--|
| 1 Art—Works of art . . . . .  |                                  |  |   |  |
| 2 Art—Historical treasures . . . . .  |                                  |  |   |  |
| 3 Art—Fractional interests . . . . .  |                                  |  |   |  |
| 4 Books and publications . . . . .  |                                  |  |   |  |
| 5 Clothing and household goods . . . . .  |                                  |  |   |  |
| 6 Cars and other vehicles . . . . .   |                                  |  |   |  |
| 7 Boats and planes . . . . .  | X                                | 1  | 148,000   | APPRAISAL AND SALES                                  |
| 8 Intellectual property . . . . .   |                                  |  |   |  |
| 9 Securities—Publicly traded . . . . .  | X                                | 3  | 92,947  | QUOTED MARKET PRICES                                 |
| 10 Securities—Closely held stock . . . . .  |                                  |  |   |  |
| 11 Securities—Partnership, LLC, or trust interests . . . . .  |                                  |  |   |  |
| 12 Securities—Miscellaneous . . . . .   |                                  |  |   |  |
| 13 Qualified conservation contribution—Historic structures . . . . .  |                                  |  |   |  |
| 14 Qualified conservation contribution—Other . . . . .  |                                  |  |   |  |
| 15 Real estate—Residential . . . . .  |                                  |  |   |  |
| 16 Real estate—Commercial . . . . .   |                                  |  |   |  |
| 17 Real estate—Other . . . . .  |                                  |  |   |  |
| 18 Collectibles . . . . .   |                                  |  |   |  |
| 19 Food inventory . . . . .   |                                  |  |   |  |
| 20 Drugs and medical supplies . . . . .   |                                  |  |   |  |
| 21 Taxidermy . . . . .  |                                  |  |   |  |
| 22 Historical artifacts . . . . .   |                                  |  |   |  |
| 23 Scientific specimens . . . . .   |                                  |  |   |  |
| 24 Archeological artifacts . . . . .  |                                  |  |   |  |
| 25 Other ► ( SAILING<br>EQUIPMENT ) . . . . .   | X                                | 3  | 41,078  | APPRAISAL  |
| 26 Other ► ( OPTICAL<br>EQUIPMENT ) . . . . .   | X                                | 1  | 20,000  | RETAIL VALUE   |
| 27 Other ► ( GOLF<br>MEMBERSHIPS ) . . . . .  | X                                | 10   | 25,000  | RETAIL VALUE   |
| 28 Other ► ( EVENT<br>SPONSORSHIPS ) . . . . .  | X                                | 2  | 1,000   | RETAIL VALUE   |
| Other ► ( EQUIPMENT ) . . . . .   | X                                | 1  | 850   | RETAIL VALUE   |
| 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .   | 29                               |  |   | 3  |
| 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . . | 30a                              |  |   | No   |
| b If "Yes," describe the arrangement in Part II   |                                  |  |   |  |
| 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . . . . .  | 31                               | Yes  |   |  |
| 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? . . . . .   | 32a                              | Yes  |   |  |
| b If "Yes," describe in Part II   |                                  |  |   |  |
| 33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II  |                                  |  |   |  |

Part III

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

| Identifier      | Return Reference | Explanation   |
|-----------------|------------------|---|
| THIRD PARTY USE | PART I, LINE 32B | THE FOUNDATION USES AN UNRELATED THIRD PARTY TO SOLICIT AND RECEIVE DONATIONS OF BOATS AND OTHER WATERCRAFT FOR USE BY THE ACADEMY OR COAST GUARD DISTRICTS |

**SCHEDULE O**  
(Form 990 or 990-EZ)Department of the Treasury  
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ****Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.**  
▶ **Attach to Form 990 or 990-EZ.**

OMB No 1545-0047

**2011****Open to Public  
Inspection**Name of the organization  
COAST GUARD FOUNDATION INC**Employer identification number**

04-2899862

| Identifier                             | Return Reference                       | Explanation   |
|--|--|---|
|  | FORM 990, PART VI, SECTION B, LINE 11  | PRIOR TO FILING A COPY OF THE 990 IS SENT TO THE AUDIT COMMITTEE FOR REVIEW A COPY OF THE FINAL 990 IS DISTRIBUTED TO THE GOVERNING BOARD   |
|  | FORM 990, PART VI, SECTION B, LINE 12C | ALL POTENTIAL CONFLICTS OF INTEREST ARE REVIEWED BY THE FOUNDATION'S PRESIDENT AS WELL AS A MEMBER OF THE BOARD WHO SERVES AS LEGAL COUNSEL   |
|  | FORM 990, PART VI, SECTION B, LINE 15  | THE COMPENSATION OF TOP MANAGEMENT OFFICIALS IS DETERMINED IN CONJUNCTION WITH THE RELATED EMPLOYEE SEARCH FIRM HIRED TO FILL THE POSITION SALARY RECOMMENDATIONS ARE COMPARED TO ON-LINE SALARY SURVEY RANGES AND REVIEWED BY A HUMAN RESOURCES CONSULTANT |
|  | FORM 990, PART VI, SECTION C, LINE 19  | FINANCIAL STATEMENTS ARE INCLUDED IN TEH ANNUAL REPORT AUDITED FINANCIAL STATEMENTS AND TAX RETURNS ARE AVAILABLE ON THE WEBSITE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE A VAILABLE UPON REQUEST  |
| CHANGES IN NET ASSETS OR FUND BALANCES | FORM 990, PART XI, LINE 5              | NET UNREALIZED LOSSES ON INVESTMENTS -96,659  |



SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization  
COAST GUARD FOUNDATION INC

Employer identification number  
04-2899862

Part I

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

| (a)<br>Name, address, and EIN of disregarded entity | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Total income | (e)<br>End-of-year assets | (f)<br>Direct controlling entity |
|---|-------------------------|--|---------------------|---------------------------|----------------------------------|
|   |                         |  |                     |                           |                                  |
|   |                         |  |                     |                           |                                  |
|   |                         |  |                     |                           |                                  |
|   |                         |  |                     |                           |                                  |
|   |                         |  |                     |                           |                                  |
|   |                         |  |                     |                           |                                  |

Part II

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

| (a)<br>Name, address, and EIN of related organization   | (b)<br>Primary activity                  | (c)<br>Legal domicile (state or foreign country) | (d)<br>Exempt Code section | (e)<br>Public charity status (if section 501(c)(3)) | (f)<br>Direct controlling entity | (g)<br>Section 512(b)(13) controlled organization |    |
|---|--|--|----------------------------|---|----------------------------------|---|----|
|   |  |  |                            |   |                                  | Yes   | No |
| (1) UNITED STATES COAST GUARD ACADEMY<br><br>54-6010204 | EDUCATION OF COAST GUARD PERSONNEL       | CT   | 501(C)(1)                  | LINE 6  |                                  |   | No |
| (2) UNITED STATES COAST GUARD<br><br>54-6010204         | PROTECTION OF THE US COAST AND WATERWAYS | DC   | 501(C)(1)                  | LINE 6  |                                  |   | No |
|   |  |  |                            |   |                                  |   |    |
|   |  |  |                            |   |                                  |   |    |
|   |  |  |                            |   |                                  |   |    |
|   |  |  |                            |   |                                  |   |    |
|   |  |  |                            |   |                                  |   |    |

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

| (a)<br>Name, address, and EIN of<br>related organization | (b)<br>Primary activity | (c)<br>Legal<br>domicile<br>(state or<br>foreign<br>country) | (d)<br>Direct controlling<br>entity | (e)<br>Predominant income<br>(related, unrelated,<br>excluded from tax<br>under sections 512-<br>514) | (f)<br>Share of total<br>income | (g)<br>Share of end-of-<br>year<br>assets | (h)<br>Disproportionate<br>allocations? |    | (i)<br>Code V—UBI<br>amount in box 20 of<br>Schedule K-1<br>(Form 1065) | (j)<br>General or<br>managing<br>partner? |    | (k)<br>Percentage<br>ownership |
|--|-------------------------|--|-------------------------------------|---|---------------------------------|---|---|----|---|---|----|--------------------------------|
|  |                         |  |                                     |   |                                 |   | Yes                                     | No |   | Yes                                       | No |                                |
|  |                         |  |                                     |   |                                 |   |   |    |   |   |    |                                |
|  |                         |  |                                     |   |                                 |   |   |    |   |   |    |                                |
|  |                         |  |                                     |   |                                 |   |   |    |   |   |    |                                |
|  |                         |  |                                     |   |                                 |   |   |    |   |   |    |                                |
|  |                         |  |                                     |   |                                 |   |   |    |   |   |    |                                |
|  |                         |  |                                     |   |                                 |   |   |    |   |   |    |                                |
|  |                         |  |                                     |   |                                 |   |   |    |   |   |    |                                |

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

| (a)<br>Name, address, and EIN of related organization | (b)<br>Primary activity | (c)<br>Legal domicile<br>(state or<br>foreign<br>country) | (d)<br>Direct controlling<br>entity | (e)<br>Type of entity<br>(C corp, S corp,<br>or trust) | (f)<br>Share of total<br>income | (g)<br>Share of<br>end-of-year<br>assets | (h)<br>Percentage<br>ownership |
|---|-------------------------|---|-------------------------------------|--|---------------------------------|--|--------------------------------|
|   |                         |   |                                     |  |                                 |  |                                |
|   |                         |   |                                     |  |                                 |  |                                |
|   |                         |   |                                     |  |                                 |  |                                |
|   |                         |   |                                     |  |                                 |  |                                |
|   |                         |   |                                     |  |                                 |  |                                |
|   |                         |   |                                     |  |                                 |  |                                |
|   |                         |   |                                     |  |                                 |  |                                |

Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to related organization(s)

c

Gift, grant, or capital contribution from related organization(s)

d

Loans or loan guarantees to or for related organization(s)

e

Loans or loan guarantees by related organization(s)

f

Sale of assets to related organization(s)

g

Purchase of assets from related organization(s)

h

Exchange of assets with related organization(s)

i

Lease of facilities, equipment, or other assets to related organization(s)

j

Lease of facilities, equipment, or other assets from related organization(s)

k

Performance of services or membership or fundraising solicitations for related organization(s)

l

Performance of services or membership or fundraising solicitations by related organization(s)

m

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

n

Sharing of paid employees with related organization(s)

o

Reimbursement paid to related organization(s) for expenses

p

Reimbursement paid by related organization(s) for expenses

q

Other transfer of cash or property to related organization(s)

r

Other transfer of cash or property from related organization(s)

Yes

No

1a

No

1b

Yes

1c

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

No

1m

No

1n

No

1o

No

1p

No

1q

Yes

1r

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

| (a)<br>Name of other organization | (b)<br>Transaction<br>type(a-r) | (c)<br>Amount involved | (d)<br>Method of determining amount<br>involved |
|-----------------------------------|---------------------------------|------------------------|---|
| (1)                               |                                 |                        |   |
| (2)                               |                                 |                        |   |
| (3)                               |                                 |                        |   |
| (4)                               |                                 |                        |   |
| (5)                               |                                 |                        |   |
| (6)                               |                                 |                        |   |

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

| Identifier | Return Reference | Explanation |  |
|------------|------------------|-------------|--|
|------------|------------------|-------------|--|

Additional Data

Software ID:  
Software Version:  
EIN: 04-2899862  
Name: COAST GUARD FOUNDATION INC

Form 990, Special Condition Description:

|                               |
|-------------------------------|
| Special Condition Description |
|-------------------------------|

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

|   |              |         |                                      |
|---|--------------|---------|--------------------------------------|
| 4d. Other program services  |              |         |                                      |
| (Code   | (Expenses \$ | 211,702 | including grants of \$ (Revenue \$ ) |
| PUBLIC AWARENESS THE COAST GUARD FOUNDATION SERVES AS A GOODWILL AMBASSADOR FOR THE UNITED STATES COAST GUARD THROUGH A PUBLIC SERVICE ANNOUNCEMENT CAMPAIGN ONLINE AND ON TELEVISION, THE COAST GUARD FOUNDATION RAISED AWARENESS FOR THE DEDICATION AND BRAVERY OF THE UNITED STATES COAST GUARD MEMBERS SERVING OUR COUNTRY RECEPTIONS HELD ON BOARD THE COAST GUARD BARQUE EAGLE ALLOWED THE FOUNDATION TO PROMOTE THE RICH HERITAGE OF THE HISTORIC SHIP AND THE COAST GUARD'S ROLE IN TRAINING COAST GUARD CADETS AND OFFICER CANDIDATES IN SAILING AND SEAMANSHIP IN HONORING COAST GUARD MEMBERS AT EVENTS AROUND THE COUNTRY, THE FOUNDATION SHOWCASED THE EVERYDAY HEROICS OF THESE DEVOTED MEMBERS OF THE SERVICE COMMUNICATION, IN THE FORM OF NEWSLETTERS, EMAIL MESSAGES AND THE WEB, INFORM COAST GUARD FOUNDATION SUPPORTERS OF THE FOUNDATION'S PROGRAMS AND THE ROLE OF THE UNITED STATES COAST GUARD IN OUR NATIONAL STORY |              |         |                                      |

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A)<br>Name and Title            | (B)<br>Average<br>hours<br>per<br>week | (C)<br>Position (check all<br>that apply) |                       |         |              |                                 |        | (D)<br>Reportable<br>compensation<br>from the<br>organization (W-<br>2/1099-MISC) | (E)<br>Reportable<br>compensation<br>from related<br>organizations<br>(W- 2/1099-<br>MISC) | (F)<br>Estimated<br>amount of other<br>compensation<br>from the<br>organization and<br>related<br>organizations |
|----------------------------------|--|---|-----------------------|---------|--------------|---------------------------------|--------|---|--|---|
|                                  |  | Individual trustee<br>or director         | Institutional Trustee | Officer | Key employee | Highest compensated<br>employee | Former |   |  |   |
| AL J BERNARD<br>VICE CHAIRMAN    | 10 00                                  | X   |                       | X       |              |                                 |        | 0   | 0  | 0   |
| DONALD T BOLLINGER<br>DIRECTOR   | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| OTTO CANDIES JR<br>DIRECTOR      | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| R ANGELO CLEFFI<br>DIRECTOR      | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| JAMES J COLEMAN JR<br>DIRECTOR   | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| WILLIAM H COLLIER JR<br>DIRECTOR | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| ROBERT J FLYNN<br>CHAIRMAN       | 20 00                                  | X   |                       | X       |              |                                 |        | 0   | 0  | 0   |
| MONTE FRIEDKIN<br>DIRECTOR       | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| VERNA KAYE GIBSON<br>DIRECTOR    | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| LAWRENCE R GLENN<br>DIRECTOR     | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| RICHARD J GRAHN<br>SECRETARY     | 10 00                                  | X   |                       | X       |              |                                 |        | 0   | 0  | 0   |
| RICHARD D HERR<br>TRUSTEE        | 10 00                                  | X   |                       | X       |              |                                 |        | 0   | 0  | 0   |
| WALTER J HICKEL JR<br>DIRECTOR   | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| R CHRISTIAN JOHNSEN<br>DIRECTOR  | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| JOHN S JOHNSON<br>DIRECTOR       | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| CORRINE X KOSAR<br>DIRECTOR      | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| LEO PAUL KOULOS<br>DIRECTOR      | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| CLAY MAITLAND<br>DIRECTOR        | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| JAMES P MULDOON<br>DIRECTOR      | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| JAMES A O'HARE<br>DIRECTOR       | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| ROSS E ROEDER<br>DIRECTOR        | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| STEVEN T SCALZO<br>DIRECTOR      | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| JOHN F STATTS<br>DIRECTOR        | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| LEROY VANDER PUTTEN<br>DIRECTOR  | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| THOMAS A ALLEGRETTI<br>TRUSTEE   | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A)<br>Name and Title            | (B)<br>Average<br>hours<br>per<br>week | (C)<br>Position (check all<br>that apply) |                       |         |              |                                 |        | (D)<br>Reportable<br>compensation<br>from the<br>organization (W-<br>2/1099-MISC) | (E)<br>Reportable<br>compensation<br>from related<br>organizations<br>(W- 2/1099-<br>MISC) | (F)<br>Estimated<br>amount of other<br>compensation<br>from the<br>organization and<br>related<br>organizations |
|----------------------------------|--|---|-----------------------|---------|--------------|---------------------------------|--------|---|--|---|
|                                  |  | Individual trustee<br>or director         | Institutional Trustee | Officer | Key employee | Highest compensated<br>employee | Former |   |  |   |
| JAMES S ANDRASICK<br>TRUSTEE     | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| WILLIAM A BISSO III<br>TRUSTEE   | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| MORTON S BOUCHARD III<br>TRUSTEE | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| ERIC W CAPLAN<br>TRUSTEE         | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| MICHAEL L CARTHEW<br>TRUSTEE     | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| BLAINE E COLLINS<br>TRUSTEE      | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| LAMARR COOLER<br>TRUSTEE         | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| ANGUS R COOPER II<br>TRUSTEE     | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| TERRY M CROSS<br>TRUSTEE         | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| BROSIUS D'ARCY<br>TRUSTEE        | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| JOHN J D'LUHY<br>TRUSTEE         | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| JOHN A DOUGLAS<br>TRUSTEE        | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| DAVID F DYER<br>TRUSTEE          | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| DOUGLAS B EATON<br>TRUSTEE       | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| CHERYL D FELDER<br>TRUSTEE       | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| JAMES G FERGUSON<br>TRUSTEE      | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| JOHN B FOLEY<br>TRUSTEE          | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| MARSHALL E GILBERT<br>TRUSTEE    | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| F DAVID HOFFMAN<br>TRUSTEE       | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| DOUGLAS E HOLM<br>TRUSTEE        | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| WILLIAM JENKINS<br>TREASURER     | 10 00                                  | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| GARY JOBSON<br>TRUSTEE           | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| MARK K KNOY<br>TRUSTEE           | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| STEIN KRUSE<br>DIRECTOR          | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| ROCH LAMBERT<br>TRUSTEE          | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |



Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A)<br>Name and Title         | (B)<br>Average<br>hours<br>per<br>week | (C)<br>Position (check all<br>that apply) |                       |         |              |                                 |        | (D)<br>Reportable<br>compensation<br>from the<br>organization (W-<br>2/1099-MISC) | (E)<br>Reportable<br>compensation<br>from related<br>organizations<br>(W- 2/1099-<br>MISC) | (F)<br>Estimated<br>amount of other<br>compensation<br>from the<br>organization and<br>related<br>organizations |
|-------------------------------|--|---|-----------------------|---------|--------------|---------------------------------|--------|---|--|---|
|                               |  | Individual trustee<br>or director         | Institutional Trustee | Officer | Key employee | Highest compensated<br>employee | Former |   |  |   |
| H MERRITT LANE III<br>TRUSTEE | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| JAMES M MATHIEU<br>TRUSTEE    | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| BRIAN B MCALLISTER<br>TRUSTEE | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| KEVIN J MCSWEENEY<br>TRUSTEE  | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| JAMES C OLSON<br>TRUSTEE      | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| BO A F PETERSON<br>TRUSTEE    | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| CRAIG E PHILIP<br>TRUSTEE     | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| JEFFREY M PLATT<br>TRUSTEE    | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| JOHN F REINHART<br>TRUSTEE    | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| THOMAS K RICHEY<br>TRUSTEE    | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| LORETTA RIETSEMA<br>TRUSTEE   | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| JUDITH A ROSS<br>TRUSTEE      | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| RICHARD T SHANNON<br>TRUSTEE  | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| HOWARD SLOTNICK<br>TRUSTEE    | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| CURT SPRINGER<br>TRUSTEE      | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| CARY K SWASAND<br>TRUSTEE     | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| EUGENE F SWEENEY<br>TRUSTEE   | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| AL A GONSOULIN<br>TRUSTEE     | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| SIDNEY C MIZELL<br>TRUSTEE    | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| VINCENT W PATTON<br>TRUSTEE   | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| DAN SCHULTZ<br>TRUSTEE        | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| STEVEN SEIGEL<br>TRUSTEE      | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| DUNCAN C SMITH III<br>TRUSTEE | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| JOHN H THOMMEN<br>TRUSTEE     | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| THAD WALLEN<br>DIRECTOR       | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

| (A)<br>Name and Title              | (B)<br>Average<br>hours<br>per<br>week | (C)<br>Position (check all<br>that apply) |                       |         |              |                                 |        | (D)<br>Reportable<br>compensation<br>from the<br>organization (W-<br>2/1099-MISC) | (E)<br>Reportable<br>compensation<br>from related<br>organizations<br>(W- 2/1099-<br>MISC) | (F)<br>Estimated<br>amount of other<br>compensation<br>from the<br>organization and<br>related<br>organizations |
|------------------------------------|--|---|-----------------------|---------|--------------|---------------------------------|--------|---|--|---|
|                                    |  | Individual trustee<br>or director         | Institutional Trustee | Officer | Key employee | Highest compensated<br>employee | Former |   |  |   |
| EDWARD AMEEN<br>DIRECTOR           | 5 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| GERALD W BLAKELEY JR<br>TRUSTEE    | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| CHARLES RICHARD D'AMATO<br>TRUSTEE | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| THOMAS GILMOUR<br>TRUSTEE          | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| GEORGE KAMPSTRA<br>TRUSTEE         | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| LISA KAZOR CHRISTOVICH<br>TRUSTEE  | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| PAT RODEN<br>TRUSTEE               | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| WILLIAM D SULLIVAN<br>TRUSTEE      | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| JAMES C VAN SICE<br>TRUSTEE        | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| THOMAS WETHERLAND<br>TRUSTEE       | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| HUGH A WESTBROOK<br>TRUSTEE        | 2 00                                   | X   |                       |         |              |                                 |        | 0   | 0  | 0   |
| ANNE B BRENGLE<br>PRESIDENT        | 45 00                                  |   |                       |         | X            |                                 |        | 193,500   | 0  | 8,978   |

Form

4562

Depreciation and Amortization  
(Including Information on Listed Property)

OMB No 1545-0172

2011

Attachment  
Sequence No 179

Department of the Treasury  
Internal Revenue Service (99)

See separate instructions. Attach to your tax return.

|   |   |                                      |
|---|---|--------------------------------------|
| Name(s) shown on return<br>COAST GUARD FOUNDATION INC | Business or activity to which this form relates<br><br>FORM 990 PAGE 10 | Identifying number<br><br>04-2899862 |
|---|---|--------------------------------------|

Part I Election to Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

|  |   |           |
|--|---|-----------|
| 1 Maximum amount (see instructions)  | 1 | 500,000   |
| 2 Total cost of section 179 property placed in service (see instructions)  | 2 |           |
| 3 Threshold cost of section 179 property before reduction in limitation (see instructions)   | 3 | 2,000,000 |
| 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-   | 4 |           |
| 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions | 5 |           |

|  |                              |                  |  |
|--|------------------------------|------------------|--|
| 6 (a) Description of property  | (b) Cost (business use only) | (c) Elected cost |  |
|  |                              |                  |  |
|  |                              |                  |  |
| 7 Listed property Enter the amount from line 29  | 7                            |                  |  |
| 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7                                | 8                            |                  |  |
| 9 Tentative deduction Enter the smaller of line 5 or line 8  | 9                            |                  |  |
| 10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562   | 10                           |                  |  |
| 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) | 11                           |                  |  |
| 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11                              | 12                           |                  |  |
| 13 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12  | 13                           |                  |  |

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instructions )

|  |    |        |
|--|----|--------|
| 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) | 14 |        |
| 15 Property subject to section 168(f)(1) election  | 15 |        |
| 16 Other depreciation (including ACRS)   | 16 | 54,297 |

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

|  |    |  |
|--|----|--|
| Section A  |    |  |
| 17 MACRS deductions for assets placed in service in tax years beginning before 2011  | 17 |  |
| 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here |    |  |

Section B—Assets Placed in Service During 2011 Tax Year Using the General Depreciation System

| (a) Classification of property | (b) Month and year placed in service | (c) Basis for depreciation (business/investment use only—see instructions) | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
|--------------------------------|--------------------------------------|--|---------------------|----------------|------------|----------------------------|
| 19a 3-year property            |                                      |  |                     |                |            |                            |
| b 5-year property              |                                      |  |                     |                |            |                            |
| c 7-year property              |                                      |  |                     |                |            |                            |
| d 10-year property             |                                      |  |                     |                |            |                            |
| e 15-year property             |                                      |  |                     |                |            |                            |
| f 20-year property             |                                      |  |                     |                |            |                            |
| g 25-year property             |                                      |  | 25 yrs              |                | S/L        |                            |
| h Residential rental property  |                                      |  | 27 5 yrs            | MM             | S/L        |                            |
|                                |                                      |  | 27 5 yrs            | MM             | S/L        |                            |
| i Nonresidential real property |                                      |  | 39 yrs              | MM             | S/L        |                            |
|                                |                                      |  |                     | MM             | S/L        |                            |

Section C—Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System

|                |  |  |        |    |     |  |
|----------------|--|--|--------|----|-----|--|
| 20a Class life |  |  |        |    | S/L |  |
| b 12-year      |  |  | 12 yrs |    | S/L |  |
| c 40-year      |  |  | 40 yrs | MM | S/L |  |

Part IV Summary (see instructions)

|   |    |        |
|---|----|--------|
| 21 Listed property Enter amount from line 28  | 21 |        |
| 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions | 22 | 54,297 |
| 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs  | 23 |        |

Part V

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)  
**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

|  |                               |  |                            |  |                        |   |                                |                                 |  |
|--|-------------------------------|--|----------------------------|--|------------------------|---|--------------------------------|---------------------------------|--|
| 24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No  |                               |  |                            |  |                        | 24b If "Yes," is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No |                                |                                 |  |
| (a)<br>Type of property (list vehicles first)  | (b)<br>Date placed in service | (c)<br>Business/ investment use percentage | (d)<br>Cost or other basis | (e)<br>Basis for depreciation (business/investment use only) | (f)<br>Recovery period | (g)<br>Method/ Convention   | (h)<br>Depreciation/ deduction | (i)<br>Elected section 179 cost |  |
| 25Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) |                               |  |                            |  |                        |   | 25                             |                                 |  |
| 26 Property used more than 50% in a qualified business use   |                               |  |                            |  |                        |   |                                |                                 |  |
|  |                               | %  |                            |  |                        |   |                                |                                 |  |
|  |                               | %  |                            |  |                        |   |                                |                                 |  |
|  |                               | %  |                            |  |                        |   |                                |                                 |  |
| 27 Property used 50% or less in a qualified business use   |                               |  |                            |  |                        |   |                                |                                 |  |
|  |                               | %  |                            |  |                        | S/L -   |                                |                                 |  |
|  |                               | %  |                            |  |                        | S/L -   |                                |                                 |  |
|  |                               | %  |                            |  |                        | S/L -   |                                |                                 |  |
| 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1  |                               |  |                            |  |                        | 28  |                                |                                 |  |
| 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1   |                               |  |                            |  |                        |   | 29                             |                                 |  |

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person  
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

|  |                  |    |                  |    |                  |    |                  |    |                  |    |                  |    |
|--|------------------|----|------------------|----|------------------|----|------------------|----|------------------|----|------------------|----|
| 30 Total business/investment miles driven during the year ( <b>do not</b> include commuting miles) | (a)<br>Vehicle 1 |    | (b)<br>Vehicle 2 |    | (c)<br>Vehicle 3 |    | (d)<br>Vehicle 4 |    | (e)<br>Vehicle 5 |    | (f)<br>Vehicle 6 |    |
| 31 Total commuting miles driven during the year  |                  |    |                  |    |                  |    |                  |    |                  |    |                  |    |
| 32 Total other personal(noncommuting) miles driven   |                  |    |                  |    |                  |    |                  |    |                  |    |                  |    |
| 33 Total miles driven during the year Add lines 30 through 32                                      |                  |    |                  |    |                  |    |                  |    |                  |    |                  |    |
| 34 Was the vehicle available for personal use during off-duty hours?                               | Yes              | No | Yes              | No | Yes              | No | Yes              | No | Yes              | No | Yes              | No |
| 35 Was the vehicle used primarily by a more than 5% owner or related person?                       |                  |    |                  |    |                  |    |                  |    |                  |    |                  |    |
| 36 Is another vehicle available for personal use?  |                  |    |                  |    |                  |    |                  |    |                  |    |                  |    |

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions)

|   |     |    |
|---|-----|----|
| 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?  | Yes | No |
| 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners |     |    |
| 39 Do you treat all use of vehicles by employees as personal use?   |     |    |
| 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?   |     |    |
| 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions )  |     |    |
| <b>Note:</b> If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles   |     |    |

Part VI Amortization

|   |                                 |                           |                     |  |                                   |
|---|---------------------------------|---------------------------|---------------------|--|-----------------------------------|
| (a)<br>Description of costs   | (b)<br>Date amortization begins | (c)<br>Amortizable amount | (d)<br>Code section | (e)<br>Amortization period or percentage | (f)<br>Amortization for this year |
| 42 Amortization of costs that begins during your 2011 tax year (see instructions)   |                                 |                           |                     |  |                                   |
| WEBSITE DEVELOPMENT   | 2011-10-01                      | 51,703                    |                     | 36M                                      | 4,309                             |
|   |                                 |                           |                     |  |                                   |
| 43 Amortization of costs that began before your 2011 tax year                       |                                 |                           |                     | 43                                       |                                   |
| 44 <b>Total.</b> Add amounts in column (f) See the instructions for where to report |                                 |                           |                     | 44                                       | 4,309                             |