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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2013

Ā	For the 2	013 calen	dar year, or tax	year begin	ning		, 2013	3, and	endin	g			,		
В	Check if app		C Name of organi			Sea Fo	undatio	n.	Inc.		D Emplo	yer Ideni	tification Num	per	
	Addres	s change	Doing Business					•			30-	0496	670		
	Name o	change			x if mail is not deliv	ered to street ac	idress)		Room/s	unte	E Teleph				
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	H	led return	Key West F Name and addr				FL	33	040	H(a) le thie	a group return			Yes	XNo
	Applica	ition pending	ŀ											Yes	HNo
-			Thomas M Callah					L 33	040	If 'No,'	subordinates attach a list (see instr	ructions)	٠,٠٥	LJ."
<u> </u>		npt status	X 501(c)(3)	501(c) (sert no)	4947(a)(1) o)T	527						
<u>1</u>	Websit	e: Nw	w.sosmissi	ion.org						H(c) Group	exemption nu	ımber			
K		rganization	X Corporation	Trust	Association	Other -	<u> </u>	. Year of	f formatio	n 200	8 M :	State of I	egal domicile	FL	
På		Summar													
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es			of individuals en	•	-							5			<u>6</u> 4
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ţ			d business reve		• • •							7a			0.
_	l		business taxabl		•	٠ ,.						7b			<u>`</u> .
										F	rior Year	•	Curre	nt Yea	
_	8 Co	ntributions	and grants (Part	t VIII, line 1	h)					1	,252,8	319.	1,6	502,6	641.
Revenue	9 Pro	ogram serv	ice revenue (Pai	rt VIII, line 2	(g)						/				
ě	10 Inv	estment in	come (Part VIII,	column (A),	lines 3, 4, and	d 7d) .					- 2	218.			140.
Œ	11 Oth	ner revenu	e (Part VIII, colui	mn (A), line:	s 5, 6d, 8c, 9c	, 10c, and 1	1e)								
	12 Tot	tal revenue	e — add lines 8 th	nrough 11 (ı	must equal Pa	rt VIII, colun	nn (A), line 1	12) .		1	,253,0	37.	1,6	502,	781.
	13 Gra	ants and si	milar amounts p	aid (Part IX	, column (A), lı	ines 1-3) .						0.			0.
	14 Be	nefits paid	to or for membe	rs (Part IX,	column (A), lin	ne 4)						0.			0.
ø	15 Sal	lanes, othe	er compensation,	employee_	benefits (Part-	X-column	A) vines 5 1	0) .			47,8	353.		47,	<u> 275.</u>
Expenses	16a Pro	ofessional i	fundraising fees	(Part IX, cd	lumn (A) line	UNITY	<u> </u>								
per .	li .		ing expenses (P						Ο.	6 04 505 300 70 000	Brasilia (Bariero Brasilia (Bariero	Section of		€:÷	
ũ	1		es (Part IX, colu		າດກະ			\vdash		12.4	,183,6			114,	
			es Add lines 13-					1			, 231, 4		† <u> </u>	162,	
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e g	20 To	tal accote /	(Part X, line 16)		1_00	للسايا				Beginni	ng of Curre 967, 1			106,	
A B			s (Part X, line 10)							<u> </u>		196.			700.
Š			fund balances		. 21 from la -	20		-		<u> </u>					
_	110			Subtract line	e 21 from line .	20	• • • • • •	• •	• • • •		965,6	43.	<u> </u>	106,	268.
			re Block												
Com	er penaities o plete Declara	of perjury, I dec ation of prepar	clare that I have exam er (other than officer)	used this return is (4)sed on all	, including accompa information of white	anying schedule preparer has	es and statemen any knowledge	ts and t	to the bes	st of my know	1eage and be	liet, it is i	true, correct, as	na	
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			s return with the	 _								· · · ·			No
bА	m ror Pa	DerWORK F	Reduction Act N	iotice, see '	ine separate i	instruction:	5.		TEE	A0101 11/0	8/13		Forr	n 990 (2013)

SCANNED MAY 2 7 2014

orm 9	990 (2013) Star of the Sea Foundation, Inc.	30-0496670	Page 2
Part	III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	<u>.,</u>	
1 E	Briefly describe the organization's mission		
	The Organization provides		
9	goods and services to the indigent and underprivileged residents		
5	See Form 990, Page 2, Part III, Line 1 (continued)		
2	Old the organization undertake any significant program services during the year which were not listed on the p	nor	
	Form 990 or 990-EZ?	· · · · Yes	X No
l	f Yes,' describe these new services on Schedule O		_
	Oid the organization cease conducting, or make significant changes in how it conducts, any program services?	? . Yes	X No
	f 'Yes,' describe these changes on Schedule O		
5	Describe the organization's program service accomplishments for each of its three largest program services, a Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount others, the total expenses, and revenue, if any, for each program service reported	is measured by expense of grants and allocations	s to
4a(Code) (Expenses \$ 1,462,038. including grants of \$ 0.)(R	evenue \$ 1,602	2,781.)
(Goods (food) and services are distributed to the indigent and		
1	underprivileged residents of Key West, Florida.		
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4 b (Code) (Expenses \$ including grants of \$) (R	evenue \$)
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4 d (Other program services (Describe in Schedule O)		
	Expenses \$ including grants of \$) (Revenue \$)
	Total program service expenses ► 1 462 038		,

<u> </u>	The state of the s		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
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		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If Yes,' complete Schedule C, Part II	4		Х
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		х
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		х
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_		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		х
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		х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
á	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.	11 a	х	
ŀ	Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		х
C	Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c	 	х
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		х
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
1	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		х
12	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	х	
ı	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	<u> </u>	Х
14:	a Did the organization maintain an office, employees, or agents outside of the United States?.	14a	ļ	Х
1	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		x_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b	<u> </u>	

Form 990 (2013) Star of the Sea Foundation, Inc.

Part IV | Checklist of Required Schedules (continued)

		T	Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or			
	government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		х
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25a	24a		X
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
25	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		x
26		26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		x
	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29		29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If Yes, 'complete Schedule M	30		х
31		31		X
32		32		х
	,	32		
33	301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34_		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	ı

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Form 990 (2013)

Form 990 (2013)

Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part $V\,$. Yes No 1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1 b 0 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1 ¢ (gambling) winnings to prize winners? . . . 2 a 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 X 2 b b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?.... **b** If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O 3 b 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, secunties account, or other financial account)? 4 a **b** If 'Yes,' enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts Х 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?...... 5 a X ${f b}$ Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . 5 b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5с 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Х solicit any contributions that were not tax deductible as charitable contributions? 6 a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were 6 b Organizations that may receive deductible contributions under section 170(c). Х 7 a b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Х 7 c d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d Х 7 e e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?... X f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?. . . 7 f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 7 g Х h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Х 7 h 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 X holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. X 9 a a Did the organization make any taxable distributions under section 4966? X b Did the organization make a distribution to a donor, donor advisor, or related person? 9 b 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12. 10 a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . 10 h 11 Section 501(c)(12) organizations. Enter 11 a b Gross income from other sources (Do not net amounts due or paid to other sources 12a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? . . b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 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? 13 a Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in 13b which the organization is licensed to issue qualified health plans 13 c c Enter the amount of reserves on hand X 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O 14b

Form	990 (2013) Star of the Sea Foundation, Inc. 30-0496670	_	P	age 6
Pai	Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below	v, an	d for	
	a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes Schedule O. See instructions.	in		
	Check if Schedule O contains a response or note to any line in this Part VI			. Γ
Sec	tion A. Governing Body and Management			
000	tion A. Governing body and management		Yes	No
1 :	Enter the number of voting members of the governing body at the end of the tax year	* .	45	
	If there are material differences in voting rights among members	\ \`\		.; .
	of the governing body, or if the governing body delegated broad	3.5	43	; ,
	authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent			Š.
_	Enter the number of voting members included in line 1a, above, who are independent	- "":	1, I,	
2	officer, director, trustee or key employee?	2	_dir.	x
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	3		v
4	of officers, directors or trustees, or key employees to a management company or other person?	<u> </u>	 	X
•	since the prior Form 990 was filed?	4		х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	 	X
5		6	├	X
6	Did the organization have members or stockholders?	-	├	
/ a	members of the governing body?	7 a		х
		'a	├	
Ł	Are any governance decisions of the organization reserved to (or subject to approval by) members,	۱ ۔۔	İ	
	stockholders, or other persons other than the governing body?	7 b	73.6 C.F.	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	2413	K.K	*
a	The governing body?	8 a	X	
t	Each committee with authority to act on behalf of the governing body?	8 b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rever	iue C	ode.	
			Yes	No
10 a	Did the organization have local chapters, branches, or affiliates?	10a		Х
t	If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 b		
11:	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	——	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990		12 30	, ,
	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a		х
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			-
•	to conflicts?	12b		
(Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in			
	Schedule O how this was done	12 c	<u> </u>	Í
13	Did the organization have a written whistleblower policy?	13		Х
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			* ,
	The organization's CEO, Executive Director, or top management official	15a		Х
	Other officers of key employees of the organization	15b	 	X
•		* 4	*//2 '.	<u> </u>
40	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)		100)) 4
162	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	all state	X
t	olf '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 taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	 	
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed Florida			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available inspection indicate how you make these available. Check all that apply	e for p	nplic	
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available the public during the tax year	ble to		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	วก		
•	Thomas M Callahan 822 Georgia Street Key West FL 33040 (3	05)_	<u> 292-</u>	<u>3013</u>
BAA	TEEA0106 07/02/13	Form	990 (2013)

Form 990 (2013) Star of the Sea	Founda	atio	n,	In	c.				30-04966					
Part VII: Compensation of Officers Independent Contractors	, Direct	ors,	Tru	ste	es,	Key	En	nployees, Highes	t Compensated E	mployees, and				
Check if Schedule O contains a response or note to any line in this Part VII														
1 a Complete this table for all persons required organization's tax year														
 List all of the organization's current office compensation. Enter -0- in columns (D), (E), ar 							lividi	uals or organizations),	regardless of amount o	ıf				
• List all of the organization's current key	employees	s, if an	y S	ee in	stru	ctions								
 List the organization's five current highe who received reportable compensation (Box 5 organization and any related organizations 	st compen of Form W	sated /-2 and	emp J/or	loye Box	es (7 of	other Form	than 109	an officer, director, tru 9-MISC) of more than	stee, or key employee) \$100,000 from the					
 List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations 														
 List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations 														
organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated imployees, and former such persons														
Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee														
Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (C)														
(A) Name and Title (B) Average Average Position (do not check more than one box, unless person is both an effect and a director/(trustee) Reportable Reportable Reportable Reportable														
Name and Title Average hours per officer and a director/trustee) The organization related organizations compensation from the organizations compensation from the organizations compensation from the organizations compensation from the organization of the organization compensation from the organization compensation co														
any hours of an ast of the companies of														
	tions below dotted	itor Talto	onal		ploye	ee com	ľ			organizations				
	line)	ustee	huste		õ	pensa								
			æ			ied.								
_(1)_Erica_Hughes-Sterling Chairman	_2.00	ļ		х				0.	0.	0.				
(2) Doria H. Goodrich	_2.00									_				
Secretary			ļ	X				0.	_0.	0.				
(3) Thomas M. Callahan	35.00	x						0.	0.	0.				
Director (4) Patricia Erickson	2.00	 ^ -	\vdash					0.	· ·					
Director	_2.00	x						0.	0.	0.				
(5) John C. Baker	10.00													
Director		Х					<u> </u>	0.	0.	0.				
(6) Patricia Nossov	10.00			v				0.	0.	0.				
Treasurer (7)				Х										
(8)		-		ļ			<u> </u>							
				_										
(9)	-													
(10)														
(11)														
(12)					 		Γ							
(13)			-				+							
		L	<u> </u>	<u> </u>	L		1_							

Form 990 (2013) Star of the Sea Foundati	on, I	nc.	_						30-049667			ge 8
Part VII Section A. Officers, Directors, Trus	tees, l	Key T	En	nplo ()		es,	and	d Highest Con	npensated Emp	loyees	(cont	inued)
(A) Name and title	Average hours per week	box	, unle	Pos heck ss pe	ition more rson i	than o	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of ot compensated		
	(list any hours for related organiza - tions below dotted line)	or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	omer	(W-2/1099-MISC)	(W-2/1099-MISC)	fro orga and	om the inization i related inization	
<u>(15)</u>					-						_	
(16)												
(17)												
(18)												
(19)									-			
(20)												
(21)												
(22)												
(23)												
(24)												
(25)												
1 b Sub-total		•	٠.		•		>	0.	0.			0.
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)		· 		• •		• •	•	0.	0.			0.
2 Total number of individuals (including but not limited	to those	listed	abo	ove)	who	rece	eive	d more than \$100,	000 of reportable cor	npensat	เดก	
from the organization >											Yes	No
3 Did the organization list any former officer, director, on line 1a? If 'Yes,' complete Schedule J for such ind								st compensated en	nployee	. 3		Х
4 For any individual listed on line 1a, is the sum of reporthe organization and related organizations greater the	an \$150,	,000?	If 'Y	'es'	com	plete	r co Sci	mpensation from hedule J for				v
5 Did any person listed on line 1a receive or accrue co for services rendered to the organization? If Yes, 'co		tion fi	om	any		lated				5		X
Section B. Independent Contractors	inpiete 3	ocnec	iuie	J 101	Suc	н рег	301			<u>., , , , , , , , , , , , , , , , , , , </u>		
 Complete this table for your five highest compensate compensation from the organization. Report compen 										ar		
(A) Name and business addres	ss							(B Description of		Compe	C) nsatio	n
								-				
2 Total number of independent contractors (including b	ut not lir	nited	to ti	nose	liste	ed ab	ove) who received mo	re than			
\$100,000 of compensation from the organization	0											
BAA		TEEA	0108	11/1	1/13			<u></u>		Form	990 (2013)

		Check if Schedule O co	ntains a i	respon	se or note to any li	ne in this Part VIII .			
! !				·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
TS ST	1 a	Federated campaigns .	1	1 a					
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	b	Membership dues		1 b			1		
S. §	C	Fundraising events	Į.	1 c					
FE	d	Related organizations		1 d					
Š	e	Government grants (contribution	ns) .	1 e	1,530,838.				
른	f	All other contributions, gifts, gran	nts, and				-		
돌등	l .	similar amounts not included ab		1f	71,803.	ļ			
SS	9	Noncash contributions included			1,194,214.				
<u></u>	<u>n</u>	Total. Add lines 1a-1f	· · · ·	•	· · · · · · · · · · · · · · · · · · ·	1,602,641.			
3	2 a			ŀ	Business Code				
Ğ	b							-	
띨	c			-				<u></u>	· · · · · · · · · · · · · · · · · · ·
-	4				·			· -	······································
	6					-			
3RA	f	All other program service r	revenue						
õ	a	Total. Add lines 2a-2f		· L					
	3	Investment income (includ	lina divide	ande u	nterest and				
						140.	140.	0.	0.
	4	Income from investment of	f tax-exer	mpt bo	nd proceeds >				
	5	Royalties			<u></u> . •				
			(i) Rea	al	(II) Personal				
		Gross rents							
		Less rental expenses							
		Rental income or (loss)			<u> </u>				
	d	Net rental income or (loss)							
	7 a	Gross amount from sales of	(ı) Secun	ities	(II) Other				
		assets other than inventory							
	b	Less cost or other basis and sales expenses]				;
		Gain or (loss)			 				
ļ		· · · · · · · · · · · · · · · · · · ·							
		• ,							
REVENUE	оa	Gross income from fundral (not including. \$	ising eve	nts	<u>]</u>	į			
뙲		of contributions reported o	n line 1c))					'
~		See Part IV, line 18.		. а	.]				
OTHE	b	Less direct expenses		. b					<u> </u>
۷	C	Net income or (loss) from t	fundraısır	ng ever	nts				
	9 a	Gross income from gaming	g activitie	s					
		See Part IV, line 19			· <u> </u>	}	j		
		Less direct expenses			1				
	C	Net income or (loss) from (gamıng a	ctivitie	s •				
	10 a	Gross sales of inventory, le	ess returr						· ·
J	b	Less cost of goods sold .		· a · b					
		Net income or (loss) from s							
		Miscellaneous Revenue		11461110	Business Code				
	11 a								
	b			+					
	С								
1	d	All other revenue	- -				 		
	е	Total. Add lines 11a-11d .		-)
		Total revenue. See instruc	ctions .	<u>. </u>		1,602,781.	140.	0.	0.
BAA					TEEA	0109 07/08/13			Form 990 (2013)

Form 990 (2013) Star of the Sea Foundation, Inc. 30-0496670 Page 10 Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)	
Check if Schedule O contains a response or note to any line in this Part IX	<u>. 11</u>

	oot include amounts reported on lines b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0.	0.		i.
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0.	0.		
3	Grants and other assistance to governments, organizations, and individuals outside the		_		}
	United States See Part IV, lines 15 and 16	0.	0.		
4	Benefits paid to or for members	0.	0.		
5	trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salanes and wages	40,980.	40,980.	0.	0.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	0.	0.	0.	0.
9	Other employee benefits	1,984.	1,984.	0.	0.
10	Payroli taxes	4,311.	4,311.	0.	0.
11	Fees for services (non-employees)				
ā	Management	-			
	Legal	0.	0.	0.	
	Accounting	3,200.	3,200.	0.	0.
	Lobbying				
	Professional fundraising services See Part IV, line 17.				
-	Investment management fees Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0)				
12	Advertising and promotion	60.	60.	0.	0.
13	Office expenses	1,058.	1,058.	0.	0.
14	Information technology				
15	Royalties				
16	Occupancy	35,266.	35,266.	0.	0.
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest		· · · · · · · · · · · · · · · · · · ·		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	23,777.	23,777.	0.	0.
23 24		7,982.	7,982.	0.	
	Dues & Subscriptions	7,825.	7,825.	0.	0.
	Food & Assistance	1,310,152	1,310,152.	0.	0
	Licenses & Taxes	.150.	0.	150	
	d Staff Development	1,060.	1.060	0.	0.
	e All other expenses	24,233.	24,233.	0.	0.
25	Total functional expenses. Add lines 1 through 24e .	1,462,038.	1,461,888.	150.	0.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				
BA		TEEA0110 11	<u> </u>	<u> </u>	Form 990 (2013)

Form 990 (2013)

BAA

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 200,985. Cash - non-interest-bearing 33,272. 2 2 Savings and temporary cash investments 124,207. 124,228. 3 3 Pledges and grants receivable, net . . 4 Accounts receivable, net . . 4 5 Loans and other receivables from current and former officers, directors, 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 8 Prepaid expenses and deferred charges . 9 3,097 7,225 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 874,040 b Less accumulated depreciation . . . 10 c 778,658. 10 b 802,435 95,382 Investments — publicly traded securities 11 11 Investments - other securities See Part IV, line 11 . . . 12 12 Investments - program-related See Part IV, line 11 . 13 13 14 14 Other assets See Part IV, line 11 15 15 Total assets. Add lines 1 through 15 (must equal line 34) 967,139 16 1,106,968 16 17 Accounts payable and accrued expenses. 1,496 17 700 18 18 Grants payable. 19 Deferred revenue 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Loans and other payables to current and former officers, directors, trustees, 22 22 23 Secured mortgages and notes payable to unrelated third parties 24 24 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 \ldots 25 25 Total liabilities. Add lines 17 through 25....... 26 700. 1.496 26 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. 27 1,031,268 27 965,643 Temporarily restricted net assets . . . 28 75,000. 28 0 Permanently restricted net assets 29 29 R Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 31 31 32 32 Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances . 33 1,106,268. 33 965,643 34 1,106,968. 967,139 34

Form	990 (2013) Star of the Sea Foundation, Inc. 30-	049 <u>6670</u>		Page) 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,602	2,78	1.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,462	2,03	8.
3	Revenue less expenses Subtract line 2 from line 1	3	140	0,74	3.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4	96!	5,64	3.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-11	8.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1,106	5,26	<u>8.</u>
Par	t XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				Ш
			Y	'es l	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				:
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				٠
2 a	were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both				132
	Separate basis Consolidated basis Both consolidated and separate basis				
t	Were the organization's financial statements audited by an independent accountant?		2 b	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both X Separate basis				۶., ا ۱
c	: If 'Yes' to line 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?	t,	2 c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O), " », »,
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3 a	х	
t	of Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required at	ıdıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>	3 b	x	
BAA			Form 99	90 (20	13)

SCHEDULE A (Form 990 or 990-EZ)

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.

Department of the Treasury Internal Revenue Service ► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Employer identification number

		f the													96670			
Par									nizations i				art.) S	ee inst	ruction	s.		_
The c	rgai							•	s 1 through		•	•						
1									ches describ		tion 17	0(b)(1)(A	۸)(i).					
2		A school	descn	bed in s	section	170(b)	(1)(A)(i	i). (Attach	Schedule E)									
3		A hospita	al or a	coopera	ative hos	spital se	ervice d	organization	described in	n section	170(b)	(1)(A)(iii)	١.					
4		A medica	al resea	arch ore	ganızatıd	on oper	ated in	conjunction	with a hosp	ntal descr	nbed in	section '	170(b)(ʻ	1)(A)(iii)	Enter th	ne hospital's		
		name, cr																_
5		An orgar 170(b)(1	iization (A)(iv	operat). (Con	ted for th nplete P	ne bene art II)	efit of a	college or i	iniversity ow	ned or or	perated	by a gov	ernmen	tal unit d	escribed	In section		
6					•		-		nt described				•					
7	X	ın sectio	n 170(b)(1)(A	(vi). (C	Complet	te Part	II)	t of its suppo		governr	nental ur	nit or fro	m the ge	eneral pu	ıblıc describ	ed	
8	Ļ	A commi	unity tr	ust des	cribed in	n sectio	n 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4).																
10		An organ	ızatıon	organ	ized and	l operat	ed exc	lusively to t	est for public	safety S	See sec	tion 509((a)(4).					
11		An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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																
		а ПТу	pe I	b	Тур	e II	С	Type II	I - Function	nally integ	rated	c	ı 🗍 :	Type III -	- Non-fu	inctionally in	tegrated	
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								nation from	the IRS tha		e I, Typ	e II or Ty	pe III su	pporting	organiza	ation,		
g		Since Au	gust 1	7, 2006	6, has th	e orgar	ization	accepted a	iny gift or co	ontribution	n from a	ny of the	followir	ng persoi	าร?			
•			-			J			. •			-					Yes	ło
		(i) A p	erson ow, the	who di e gover	rectly or	indirec	tly cont e supp	trols, either orted organ	alone or tog zation?	ether with	person	s descrit	oed in (i	ı) and (III • • •) 	11 g (i)		
		(ii) Af	amıly r	nembe	r of a pe	rson de	escribe	d in (i) abov	e?							. 11 g (ii)		
		(iii) A3	35% co	ntrolled	d entity of	of a ner	son de:	scribed in (i) or (II) abov	e?						11 g (iii)	 	—
h					•			•	ganization(s							119(111)		
		(ı) Name o				(II) EIN		(III) Type of (described above or	f organization on lines 1-9 IRC section tructions))	(iv) is organiza column (i) your gov docur	stion in listed in reming	(v) Did you the organiz column (i) supp	zation in of your	(vi) l: organiz colun organize U :	ation in in (i)	(VII) Amoun sup	t of monetar	y y
_										Yes	No	Yes	No	Yes	No			
(A)																		
(B)																İ		
<u>·</u> ,					 			<u> </u>		1			 -	†				
(C)										ļ					<u> </u>			
(D)										ļ					<u></u>			
(E)																		
Total																		
BAA	Fo	Paperw	ork Re	ductio	n Act N	otice, s	see the	Instructio	ns for Form	990 or 9	90-EZ.			Schedule	A (Form	n 990 or 99	0-EZ) 201	3

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

Sec	tion A. Public Support		<u> </u>				
begi	ndar year (or fiscal year nning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	489,363.	801,235.	914,822.	1,252,819.	1,602,641.	5,060,880.
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	489,363.	801,235.	914,822.	1,252,819.	1,602,641.	5,060,880.
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			and which a summinum will consider to		· · · · · · · · · · · · · · · · · · ·	5,060,880.
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	489,363.	801,235.	914,822.	1,252,819.	1,602,641.	5,060,880.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	421.	499.	318.	218.	140.	1,596.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10			,			5,062,476.
12	Gross receipts from related activities	es, etc (see instruc	tions)			12	
13	First five years. If the Form 990 is organization, check this box and s	for the organization for the organization for the organization to the organization for the organization for the organization of the organization for the org	on's first, second, the	hırd, fourth, or fifth	tax year as a sect	ion 501(c)(3)	▶ ∏
Sec	tion C. Computation of Pul	blic Support P	ercentage				
	Public support percentage for 2013					14	99.97 %
15	Public support percentage from 20	12 Schedule A, Pa	ırt II, line 14			15	%
16a	16a 33-1/3% support test — 2013. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
b	b 33-1/3% support test — 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
17 a	10%-facts-and-circumstances te or more, and if the organization meets the 'facts-a	ets the 'facts-and-	circumstances' tes	t, check this box a	ind stop here. Exp	lain in Part IV how	_
b	10%-facts-and-circumstances te or more, and if the organization me organization meets the 'facts-and-circumstant' or the control of the contr	ets the 'facts-and-	circumstances' tes	t, check this box a	ind stop here. Exc	lain in Part IV how	the
18	Private foundation. If the organization						
							<u>_</u>

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

<u> 2ec</u>	tion A. Public Support						
	dar year (or fiscal yr beginning in) ► Gifts, grants, contributions and membership fees	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	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						
3	tax-exempt purpose 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		1				
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)	1000	397.30				
Sec	tion B. Total Support						
Calen	dar year (or fiscal yr beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b				L		
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 Ins 9,10c, 11 and 12)						
14	First five years. If the Form 990 organization, check this box and s	s for the organizati	on's first, second,	third, fourth, or fifth	tax year as a sec	tion 501(c)(3)	▶ □
Sec	tion C. Computation of Pu	blic Support F	ercentage				
15	Public support percentage for 201	3 (line 8, column (f) divided by line 1	3, column (f)) · ·		1	5 <u></u> %
16	Public support percentage from 2	012 Schedule A, Pa	art III, line 15		<u> .</u> <u></u>	1	6 %
Sec	tion D. Computation of Inv	estment Inco	me Percentag	е			
17	Investment income percentage fo	r 2013 (line 10c, co	lumn (f) divided b	y line 13, column (f	7))	<u> 1</u>	
18	Investment income percentage from	om 2012 Schedule	A, Part III, line 17			<u>[1</u>	8
19 a	33-1/3% support tests - 2013. If	f the organization d	id not check the b	ox on line 14, and	line 15 is more tha	n 33-1/3%, and	line 17
t	is not more than 33-1/3%, check to 33-1/3% support tests — 2012. It	f the organization d	id not check a box	on line 14 or line	19a, and line 16 is	more than 33-1/	/3%, and
20	line 18 is not more than 33-1/3%,		•	•		-	
20	Private foundation. If the organiz	Lation did not check	a box on line 14,				

Schedule A	(Form 990 or 990-EZ) 2013 St	ar of the	Sea Fou	indation,	Inc.	30-0496670	Page 4
Part IV	Supplemental In or 17b, and Part (See instructions	nformation III, line 12. s).	. Provide the Also comple	e explanation expl	ons required for any add	by Part II, line 10; Itional information.	Part II, line 17a	
				-				
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SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Department of the Treasury Internal Revenue Service Name of the organization

m990. Open to Public Inspection

Employer identification number

Sta	er of the Sea Foundation, Inc.			30-0496670	
Par	Organizations Maintaining Dono	r Advised Funds or Otl	her Similar Fund		
	Complete if the organization answer	ered 'Yes' to Form 990, F	Part IV, line 6.		
		(a) Donor advised	funds	(b) Funds and other account	ts
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 are the organization's property, subject to the org	advisors in writing that the ass anization's exclusive legal con	ets held in donor advi	sed funds	No
6	Did the organization inform all grantees, donors, for charitable purposes and not for the benefit of impermissible private benefit?	the donor or donor advisor, or	for any other purpose		No
Par	Conservation Easements. Complete if the organization answer		Part IV line 7		
1	Purpose(s) of conservation easements held by the				-
•	Preservation of land for public use (e.g., recr	• ,		in historically important land area	
	Protection of natural habitat			certified historic structure	
	Preservation of open space		Ш		
2	Complete lines 2a through 2d if the organization	held a qualified conservation o	ontribution in the form	n of a conservation easement on th	ne
	last day of the tax year				
				Held at the End of the	Tax Yea
	Total number of conservation easements .			2 a	
ı	Total acreage restricted by conservation easeme	nts		2 b	
•	Number of conservation easements on a certified	i historic structure included in ((a)	2 c	
(d Number of conservation easements included in (structure listed in the National Register	· · · · · · · · · · · · · · · · · · ·		2 d	
3	Number of conservation easements modified, tra tax year ▶	nsferred, released, extinguish	ed, or terminated by the	he organization during the	
4	Number of states where property subject to cons	ervation easement is located.	·		
5	Does the organization have a written policy regar and enforcement of the conservation easements			f violations, Yes	No
6	Staff and volunteer hours devoted to monitoring,	inspecting, and enforcing cons	servation easements of	during the year	
7	Amount of expenses incurred in monitoring, inspi	ecting, and enforcing conserva	ition easements durin	g the year	
8	Does each conservation easement reported on li and section 170(h)(4)(B)(ii)?			70(h)(4)(B)(ı) Yes	No
9	In Part XIII, describe how the organization report include, if applicable, the text of the footnote to the conservation easements	s conservation easements in it ne organization's financial state	s revenue and expen ements that describes	se statement, and balance sheet, a the organization's accounting for	and
Pa	Organizations Maintaining Colle Complete if the organization answ	ctions of Art, Historica ered 'Yes' to Form 990, I	I Treasures, or C Part IV, line 8.	Other Similar Assets.	•
1	a If the organization elected, as permitted under SI art, historical treasures, or other similar assets hi in Part XIII, the text of the footnote to its financial	FAS 116 (ASC 958), not to repeld for public exhibition, educa	ort in its revenue stat	ement and balance sheet works of rtherance of public service, provide	
ı	b If the organization elected, as permitted under SI historical treasures, or other similar assets held f following amounts relating to these items	FAS 116 (ASC 958), to report	ın ıts revenue stateme	ent and balance sheet works of art, rance of public service, provide the	ģ
	(i) Revenues included in Form 990, Part VIII, Iir	ne 1		▶\$	
	(ii) Assets included in Form 990, Part X			▶\$	
2	If the organization received or held works of art, amounts required to be reported under SFAS 11	historical treasures, or other si 6 (ASC 958) relating to these i	milar assets for financ tems	cial gain, provide the following	
	a Revenues included in Form 990, Part VIII, line 1			▶\$	
	h Accate included in Form 000. Bort V			. ^	

	of the Sea F			30-0496		Page 2
Part III Organizations Mainta	ining Collection	s of Art, Histo	rical Treasures, or	Other Similar Ass	ets (continu	<u>ed)</u>
 Using the organization's acquisition items (check all that apply) 	n, accession, and oth	er records, check a	ny of the following that a	are a significant use of its	collection	
a Public exhibition		d Loan o	r exchange programs			
b Scholarly research		e Other				
c Preservation for future general	ions	_				
4 Provide a description of the organia Part XIII	zation's collections a	nd explain how they	further the organization	n's exempt purpose in		
5 During the year, did the organization to be sold to raise funds rather than	n to be maintained a	s part of the organiz	cation's collection?		Yes	No
Part IV Escrow and Custodia line 9, or reported an a	I Arrangements mount on Form 9	. Complete if th 990, Part X, line	e organization ansv 21	wered 'Yes' to Form	990, Part IV	
1 a Is the organization an agent, truste on Form 990, Part X?		r intermediary for co		ets not included	Yes	No
b if 'Yes,' explain the arrangement in	Part XIII and comple	ete the following tab	le			
					Amount	
c Beginning balance	· · · · · ·			1 c		
d Additions during the year				1 d		
e Distributions during the year				1 e		
f Ending balance				. 1f		
2 a Did the organization include an am	ount on Form 990, F	art X, line 21?			Yes	No
b If 'Yes,' explain the arrangement in	Part XIII Check her	e if the explantion h	as been provided in Pai	t XIII		7
,		•	•		_	
Part V. Endowment Funds. C	omplete if the or	ganization ansv	vered '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
1 a Beginning of year balance						
b Contributions						
c Net investment earnings, gains, and losses						
d Grants or scholarships		1			1	
Other expenditures for facilities and programs						
f Administrative expenses		<u> </u>				
g End of year balance		1				
2 Provide the estimated percentage	of the current year e	nd halance (line 1g	column (a)) held as		•	
a Board designated or quasi-endowr	-	% Salaries (iiiic 19,	colainii (a)) nola as			
b Permanent endowment		 °				
		0_				
c Temporarily restricted endowment		 %				
The percentages in lines 2a, 2b, a	nd 2c should equal 1	00%				
3 a Are there endowment funds not in organization by	the possession of th	e organization that	are held and administere	ed for the	Yes	No
(i) unrelated organizations					3a(i)	<u> </u>
(ii) related organizations					. 3a(ii)	
b If 'Yes' to 3a(II), are the related org	janizations listed as i	equired on Schedu	le R?		. 3b	
4 Describe in Part XIII the intended in	uses of the organizat	ion's endowment fu	nds			
Part VI Land, Buildings, and	Equipment.					
Complete if the organiz	zation answered	'Yes' to Form 9	90, Part IV, line 11a	a. See Form 990, Pa	art X, line 10.	•
Description of property		st or other basis investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book va	ilue
1a Land		250,000.			250	,000.
b Buildings		482,848.		48,725.		,123.
c Leasehold improvements						
d Equipment		11,000.		5,500.	5	,500.
e Other		130,192.		41,157.		,035.
Total. Add lines 1a through 1e (Column			nn (B), line 10(c))	±1,13/.		, 658.
BAA	(a) must squar i om	. 550, r a.t A, coluir	(D), 10(0) / .	Sched	ule D (Form 99	

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cos	or end-of-year market value
Financial derivatives			
Closely-held equity interests		<u> </u>	
Other			
			<u></u>
		_	
)			
)			
·	-		
	· · ·		
al (Column (b) must equal Form 990, Part X, column (B) line 12)			
ort VIII Investments - Program Related.			
Complete if the organization answered '	Yes' to Form 990,	Part IV, line 11c. See Form	990, Part X, line 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost	or end-of-year market value
1)			
2)			
3)			
1)			
5)			
6)			
7)			
B)			
9)	-	-	
3)			
	-	-	
10)			
tal (Column (b) must equal Form 990, Part X, column (B) line 13) . ▶ art IX Other Assets.			
tal (Column (b) must equal Form 990, Part X, column (B) line 13).▶ art IX Other Assets. Complete if the organization answered	Yes' to Form 990,	Part IV, line 11d See Form	990, Part X, line 15.
0) al (Column (b) must equal Form 990, Part X, column (B) line 13) . art IX Other Assets. Complete if the organization answered (a) De		Part IV, line 11d See Form	990, Part X, line 15. (b) Book value
0) al (Column (b) must equal Form 990, Part X, column (B) line 13) . ▶ art IX Other Assets. Complete if the organization answered (a) De	Yes' to Form 990,	Part IV, line 11d See Form	990, Part X, line 15. (b) Book value
0) al (Column (b) must equal Form 990, Part X, column (B) line 13) art IX Other Assets. Complete if the organization answered (a) De	Yes' to Form 990,	Part IV, line 11d See Form	990, Part X, line 15. (b) Book value
o) tal (Column (b) must equal Form 990, Part X, column (B) line 13) art IX Other Assets. Complete if the organization answered (a) December 1) (2) (3)	Yes' to Form 990,	Part IV, line 11d See Form	990, Part X, line 15. (b) Book value
0) al (Column (b) must equal Form 990, Part X, column (B) line 13) art IX Other Assets. Complete if the organization answered (a) De 1) 2) 3) 4)	Yes' to Form 990,	Part IV, line 11d See Form	990, Part X, line 15. (b) Book value
0) tal (Column (b) must equal Form 990, Part X, column (B) line 13) .▶ art IX Other Assets. Complete if the organization answered (a) December 1) (2) (3) (4) (5)	Yes' to Form 990,	Part IV, line 11d See Form	990, Part X, line 15. (b) Book value
0) al (Column (b) must equal Form 990, Part X, column (B) line 13) .▶ art IX Other Assets. Complete if the organization answered (a) De 1) 2) 3) 4) 5) 6)	Yes' to Form 990,	Part IV, line 11d See Form	990, Part X, line 15. (b) Book value
0) al (Column (b) must equal Form 990, Part X, column (B) line 13) art IX Other Assets. Complete if the organization answered (a) De 1) 2) 3) 4) 5) 6) 7)	Yes' to Form 990,	Part IV, line 11d See Form	990, Part X, line 15. (b) Book value
O) al (Column (b) must equal Form 990, Part X, column (B) line 13) Complete if the organization answered (a) De 1) 2) 3) 4) 5) 6) 7)	Yes' to Form 990,	Part IV, line 11d See Form	990, Part X, line 15. (b) Book value
at (Column (b) must equal Form 990, Part X, column (B) line 13) Other Assets. Complete if the organization answered (a) December 1) 2) 3) 4) 5) 6) 7) 8)	Yes' to Form 990,	Part IV, line 11d See Form	990, Part X, line 15. (b) Book value
al (Column (b) must equal Form 990, Part X, column (B) line 13) Other Assets. Complete if the organization answered (a) Definition (a) Defi	Yes' to Form 990,		990, Part X, line 15. (b) Book value
O) Jai (Column (b) must equal Form 990, Part X, column (B) line 13) Ant IX Other Assets. Complete if the organization answered (a) December 1) 2) 3) 4) 5) 6) 7) 8) 9) 0) Ital. (Column (b) must equal Form 990, Part X, column (B),	Yes' to Form 990,	Part IV, line 11d See Form	990, Part X, line 15. (b) Book value
o) lat (Column (b) must equal Form 990, Part X, column (B) line 13) art IX Other Assets. Complete if the organization answered (a) December 20 3) 4) 5) 6) 7) 8) 9) 0) latal. (Column (b) must equal Form 990, Part X, column (B), latal. (Column (b) must equal Form 990, Part X, column (B), latal. (Other Liabilities.	Yes' to Form 990, escription		(b) Book value
at (Column (b) must equal Form 990, Part X, column (B) line 13) Other Assets. Complete if the organization answered (a) December 20 (b) December 30 (c) December 30 (d) December 30 (e) December 30 (e) December 30 (f) December 30 (g) December 30 (h) De	Yes' to Form 990, escription	11e or 11f. See Form 990, Part X,	(b) Book value
art iX Other Assets. Complete if the organization answered (a) De 1) 2) 3) 4) 5) 6) 7) 8) 9) 0) tal. (Column (b) must equal Form 990, Part X, column (B) line 13) And the organization answered (a) De 1) 2) 3) 4) 5) 6) 7) 8) 9) 0) tal. (Column (b) must equal Form 990, Part X, column (B), art X Other Liabilities. Complete if the organization answered 'Yes' to F (a) Description of liability	Yes' to Form 990, escription	11e or 11f. See Form 990, Part X,	(b) Book value
O) al (Column (b) must equal Form 990, Part X, column (B) line 13) . Art IX Other Assets. Complete if the organization answered (a) De (a)	Yes' to Form 990, escription	11e or 11f. See Form 990, Part X,	(b) Book value
O) al (Column (b) must equal Form 990, Part X, column (B) line 13) Complete if the organization answered (a) De 1) 2) 3) 4) 5) 6) 7) 8) 9) 0) tal. (Column (b) must equal Form 990, Part X, column (B), art X Other Liabilities. Complete if the organization answered 'Yes' to F (a) Description of liability 1) Federal income taxes 2)	Yes' to Form 990, escription	11e or 11f. See Form 990, Part X,	(b) Book value
at (Column (b) must equal Form 990, Part X, column (B) line 13) The IX Other Assets. Complete if the organization answered (a) December 1) 2) 3) 4) 5) 6) 7) 8) 9) 0) tal. (Column (b) must equal Form 990, Part X, column (B), art X Other Liabilities. Complete if the organization answered 'Yes' to F (a) Description of liability 1) Federal income taxes 2) 3)	Yes' to Form 990, escription	11e or 11f. See Form 990, Part X,	(b) Book value
O) al (Column (b) must equal Form 990, Part X, column (B) line 13) The ix Other Assets. Complete if the organization answered (a) December 1) 2) 3) 4) 5) 6) 7) 8) 9) 0) tal. (Column (b) must equal Form 990, Part X, column (B), art X Other Liabilities. Complete if the organization answered 'Yes' to F (a) Description of liability 1) Federal income taxes 2) 3) 4)	Yes' to Form 990, escription	11e or 11f. See Form 990, Part X,	(b) Book value
O) al (Column (b) must equal Form 990, Part X, column (B) line 13) The complete if the organization answered (a) December 1) 2) 3) 4) 5) 6) 7) 8) 9) 0) tal. (Column (b) must equal Form 990, Part X, column (B), art X Other Liabilities. Complete if the organization answered 'Yes' to F (a) Description of liability 1) Federal income taxes 2) 3) 4) 5)	Yes' to Form 990, escription	11e or 11f. See Form 990, Part X,	(b) Book value
O) al (Column (b) must equal Form 990, Part X, column (B) line 13) The art IX Other Assets. Complete if the organization answered (a) December 1) 2) 3) 4) 5) 6) 7) 8) 9) 0) tal. (Column (b) must equal Form 990, Part X, column (B), art X Other Liabilities. Complete if the organization answered 'Yes' to F (a) Description of liability 1) Federal income taxes 2) 3) 4) 55) 66)	Yes' to Form 990, escription	11e or 11f. See Form 990, Part X,	(b) Book value
O) al (Column (b) must equal Form 990, Part X, column (B) line 13) The complete if the organization answered (a) December 1) 2) 3) 4) 5) 6) 7) 8) 9) 0) tal. (Column (b) must equal Form 990, Part X, column (B), art X Other Liabilities. Complete if the organization answered 'Yes' to F (a) Description of liability 1) Federal income taxes 2) 3) 4) 5) 6) 77)	Yes' to Form 990, escription	11e or 11f. See Form 990, Part X,	(b) Book value
O) al (Column (b) must equal Form 990, Part X, column (B) line 13) The complete if the organization answered (a) December 1) 2) 3) 4) 5) 6) 7) 8) 9) 0) tal. (Column (b) must equal Form 990, Part X, column (B), art X Other Liabilities. Complete if the organization answered 'Yes' to F (a) Description of liability 1) Federal income taxes 2) 3) 4) 5) 6) 77 88	Yes' to Form 990, escription	11e or 11f. See Form 990, Part X,	(b) Book value
art IX Other Assets. Complete if the organization answered (a) Decay (a) Decay (b) must equal Form 990, Part X, column (b) line 13) . • Assets. Complete if the organization answered (a) Decay (a) Decay (b) Decay (b) Decay (c)	Yes' to Form 990, escription	11e or 11f. See Form 990, Part X,	(b) Book value
O) Lat (Column (b) must equal Form 990, Part X, column (B) line 13) Ant IX Other Assets. Complete if the organization answered (a) De (b) (c) (c) (d) (d) (e) (e) (e) (e) (f) (f) (f) (f) (f) (f) (f) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g	Yes' to Form 990, escription	11e or 11f. See Form 990, Part X,	(b) Book value
O) al (Column (b) must equal Form 990, Part X, column (B) line 13) The complete if the organization answered (a) December 1) 2) 3) 4) 5) 6) 7) 8) 9) 0) tal. (Column (b) must equal Form 990, Part X, column (B), art X Other Liabilities. Complete if the organization answered 'Yes' to F (a) Description of liability 1) Federal income taxes 2) 3) 4) 5) 6) 77 88 99	Yes' to Form 990, escription	11e or 11f. See Form 990, Part X,	(b) Book value

Sche	dule D (Form 990) 2013 Star of the Sea Foundation, Inc.	0-0496670	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per I	Return.	
	Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a		
1	Total revenue, gains, and other support per audited financial statements	1 1,	602,781.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
	Net unrealized gains on investments		
	Donated services and use of facilities	- 1	
	Recoveries of prior year grants	-	
	I Other (Describe in Part XIII)	-	
	Add lines 2a through 2d	2 e	
3	Subtract line 2e from line 1		602,781.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1	`` 	002,701.
	Investment expenses not included on Form 990, Part VIII, line 7b	 ^	
		_	
			602 701
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		602,781.
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses per	r Keturn.	
	Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	· 1 1,	,462,038.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
-	Donated services and use of facilities		
b	Prior year adjustments	_[· , "]	
С	Other losses		
d	Other (Describe in Part XIII)	_ نا	
е	Add lines 2a through 2d	. 2 e	
3	Subtract line 2e from line 1	3 1	,462,038.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	**** {	
	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII)	المناء ا	
	: Add lines 4a and 4b	4 c	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	. 5 1	<u>,462,038.</u>
Par	t XIII Supplemental Information.		
Provi	ide 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, 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any addit	onal information	
			·

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Schedule **D** (Form 990) 2013

Schedule D (Form 990) 2013 Star of the Sea Foundation, Inc. Part XIII Supplemental Information (continued)	30-0496670	Page 5
i. are xxiii y cappienientai mormation (commeca)		
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TEEA3305 07/01/13

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Schedule D (Form 990) 2013

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

► Complete if the organizations answered 'Yes' on Form 990. Part IV, lines 29 or 30.

► Attach to Form 990.

Attach to Form 990.

► Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open To Public Inspection

Name of the organization Employer identification number 30-0496670 Star of the Sea Foundation, Inc. Part I Types of Property (a) (b) (c) (d) Method of determining Check if Number of Noncash contribution applicable contributions or amounts reported noncash contribution amounts items contributed on Form 990, Part VIII, line 1g Art - Works of art . Art — Historical treasures . . . Art - Fractional interests Books and publications Clothing and household goods 6 7 Boats and planes . . Intellectual property. Securities - Publicly traded . 9 Securities - Closely held stock 10 Securities - Partnership, LLC, or trust interests 11 Securities - Miscellaneous 12 13 Qualified conservation contribution -Qualified conservation contribution - Other. . . . Real estate - Residential. 15 Real estate - Commercial 16 Real estate - Other 17 18 Food inventory 19 737,169 1,194,214. National Avg Price per pound Drugs and medical supplies . . 20 Taxidermy 21 22 Historical artifacts 23 Scientific specimens Archeological artifacts 24 25 Other ► 26 Ofher ► 27 Other ► 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the 29 organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 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? . . . 30 a 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 Х 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?.............. 32 a Х b If 'Yes,' describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, 33

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

describe in Part If

Schedule M (Form 990) 2013

Schedule	e M (Form 990) 2013	Star of	the Sea	. Foundatio	n, Inc.		30-0496670	Page 2
Part	Supplemental the organization received, or a	I Information on is reporting combination of	Provide in Part I, of both Al	the information column (b), the so complete th	n required by F e number of co is part for any	Part I, lines 30b, ontributions, the additional inforr	30-0496670 32b, and 33, and w number of items nation.	hether
						,		
						-		
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Schedule M (Form 990) 2013

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2013 والفرا ما شعرو شافعتها

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Star of the Sea Foundation, Inc.	30-0496670
Pt VI, Line 11a Board of Directors meet to Review Form 990 prepa	red
Pt VI, Line 11a _ by outside CPA before filing Informational Retur	n
Pt XI Error Correction	
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Star of the Sea Foundation, Inc.

30-0496670

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Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

of Key West, Florida. The services are provided with respect and compassion and at no costs to individuals.