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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

2016

Open to Public 🖏

Α	For th	<u>ie 20</u> 16 calen	dar yea <u>r, or tax y</u>	<u>year begin</u>	ning		, 20	16, and	ending			,			
В	Check r	f applicable	C Name of organiza	abon Sta	r of t	the Sea F	oundati	on,	Inc.		D Employ	er identifi	ation numb	er	*****
	Ad	Idress change	Doing business a	ns							30-0	966	70		
	├ ─┤	ime change			ıf mail is no	t delivered to street	address)		Room/suit	e	E Telepho	ne numbei			
	H	tial return	5640 Malon	ev Ave	nue						(30	5) 29	2-3013		
	H	nal return/terminated				ZIP or foreign posi	al code				(30)	,			
					•			r 22	040		G Groce re	counts &	3,517,8	217	
	\vdash	nended return	Key West F Name and addres		-65		F	ц ээ		(a) Is this a	group return				XNo
	∐ Ap	plication pending												Yes	H _{No}
			Thomas M Callaha		_			FL 33	040	If 'No,'	subordinates i attach a list (s	see instruc	tions)	163	
1	Tax-	exempt status	X 501(c)(3)	501(c) () <	(insert no)	4947(a)(1)	or	527						
J	Wel	bsite: 🕨 ww	w.sosmissi	on.org					H((c) Group	exemption nui	mber 🟲			
K	Form	of organization	X Corporation	Trust	Associatio	n Other		L Year of	f formation	2008	8 ∣Mis	tate of lega	al domicile	FL	
Pa	rt"L 3	Summar					·············								
			e the organizatio	n's mission	or most	significant acti	vities	The (Organi	izati	on pro	vides			
4.			d services					rivil	eged	resid	lents				
Governance		of Kev W	est, Flori	da. The	serv	ices are	provide	ed wi	th re	spect	and				
E			on and at							_~					
Š	2	Check this bo				nued its operat		sed of i	more tha	n 25% d	of its net as	sets			
ਲੁ		Number of vo	ting members of t									3			7
∞ ŏ	4	Number of inc	dependent voting	members o	of the gov	erning body (F	Part VI, line 1	lb) -				4			7
ë.	5	Total number	of individuals em	ployed in c	alendar y	ear 2016 (Par	t V, line 2a)					5			15
Activities &	6	Total number	of volunteers (es	tımate ıf ne	cessary)							6			80
Ą	7a	Total unrelate	ed business reven	ue from Pa	rt VIII, co	lumn (C), line	12					7a			0.
	b	Net unrelated	business taxable	e income fro	m Form	990-T, line 34						7b			0.
							-			Р	rior Year		Currer	nt Yea	r
•	8	Contributions	and grants (Part	VIII, line 1h	1)				-1	2	,685,5	49.	3,5	05,0)18.
Revenue	9		ice revenue (Part			- mary -	RECEIN								
Ş	10	Investment in	come (Part VIII, c	column (A),	lines 3, 4	l, and 7d)			- C		1	24.		1	191.
. œ	11	Other revenue	e (Part VIII, colum	nn (A), lines	5, 6d, 8d	c, 9c, 1 <u>0</u> c, and	11e)		lö					12,6	508.
	12	Total revenue	e – add lines 8 th	rough 11 (n	nust equa	al Part ΩΝ, cφί	ymia (A), line	212} /.		2	,685,6	73.		17,8	
	13		milar amounts pa						_lc/.l		<u> </u>	0.			0.
ļ						0.									
							120,8		2	47,4	105				
es	1		•			6	<u>, (, ,), , , , , , , , , , , , , , , , </u>	2.0			120,0				
SUS	16 a	Professional	fundraising fees (Рап іх, соі	umn (A),	line (Te)					F & viss. 4		Widely.		
Expenses	b	Total fundrais	sing expenses (Pa	art IX, colun	nn (D), Iır	ne 25) 🟲 🙎 _		23,9	952.	M4463 *	Y - X	4.5			<u>'</u>
ш	17	Other expens	es (Part IX, colun	nn (A), lines	s 11a-11d	d, 11f-24e)				2	2,401,9	50.	3,0	67,9	965.
	18	Total expense	es Add lines 13-1	17 (must eq	ual Part I	X, column (A)	, line 25)			2	2,522,7	94.	3,3	15,3	370.
	19	=	expenses Subtr								162,8	$\overline{}$		02,4	
5 8	_									Beginni	ng of Currer			f Year	
		Total assets (Part X, line 16) .								,240,8		1.4	46.5	516.
Assets Baland	21		s (Part X, line 26)								5,4				501.
Net /			•		21 from	line 20				<u> </u>			1 4		
	<u> </u>		fund balances S	ubtract fire	21 110111	iiile 20 · ·	<u> </u>			1 1	,235,4	02.	1,4	37,5	<u>, 15.</u>
	ırt II	Signatu													
Und	er penali	ties of perjury, I dec	clare that I have examiner (other than officer) is	ned this return, s based on all i	including ac	companying sched of which preparer h	lules and statem as anv knowledo	ents, and t e	to the best of	of my know	ledge and bel	ief, it is tru	e, correct, and	1	
		Colaration of proper		7						 		/	, /1 - 7		
							\rightarrow				ate	1 64	1//_		
Sig			re of officer								((
He	re		mas M Call	ahan						Execu	utive I	Direc	tor		
			r print name and title								,				
		Print/Type p	oreparer's name		Preparer's	s signature		Dat	, ,		Check	X if F	TIN		
Pa	id	Paul S	S. Mills, (CPA	Itan	المالا (كدا)	L GPA	- 3	20/2	20 17	self-employe	ed			
	epar			. Mills	s, CPA	Ā			,						
	e On			ifth S		-,				-	Firm's EIN	74-	297538	2	
	- -	- J I min addit			-1000		FL 33	040			Phone no	(305			
4.4.	ا جاؤی		Key We s return with the p		own cha	vo2 (soo inst-		<u> </u>			1. 110116 110	(505	X Yes		No
мa	y the l	RO DISCUSS THE	is retuiti with the	preparer sn	OMU 900.	ve / (see mstr	10110115 <i>)</i>						14 162		1.10

Form 990 (2016)

Form	990 (2016) Star of the Sea Foundation, Inc.	30-0496670 Page 2
Par	tilis Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission	_
	The Organization provides	
	goods and services to the indigent and underprivileged residents	
	See Form 990, Page 2, Part III, Line 1 (continued)	
2	Did the organization undertake any significant program services during the year which were not listed on the p	prior
	Form 990 or 990-EZ?	Yes X No
	If 'Yes,' describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services'	? Yes X No
	If 'Yes,' describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, a Section $501(c)(3)$ and $501(c)(4)$ organizations are required to report the amount of grants and allocations to other services.	as measured by expenses
	and revenue, if any, for each program service reported	ners, the total expenses,
4 a	(Code) (Expenses \$ 3,315,370 . including grants of \$ 0 .) (R	Revenue \$ 3,517,626.
	Goods (food) and services are distributed to the indigent and	
		~
4 b	(Code) (Expenses \$ including grants of \$) (R	Revenue \$
		~ ~ ~ `~ ~ ~ ~ ~ ~ ~
		
4 c	(Code) (Expenses \$ including grants of \$) (R	Revenue \$
4 d	Other program services (Describe in Schedule O)	
	(Expenses \$ including grants of \$) (Revenue \$)
4 e	Total program service expenses ► 3,315,370.	

,		,	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, VII, VIII, IX, or X as applicable	j.		1
•	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	
ı	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
•	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	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	111		х
12:	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Х	
ſ	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14:	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
ı	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		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		х
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

			Yes	No
20:	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
t	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20ь		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? 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 or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23	•	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		х
	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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
	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		х
26		26		Х
27		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)	1 1 30 1		
	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		_X
	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28b		Х
	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	

BAA

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	<u> </u>	<u>. </u>	ىلن
			Yes	No
	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		,	, `. · . . ·
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		Sign gr	r, š., .
•	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	∭ 1 c	e and Security	<i>i</i>
2 8	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)		,
ı	of at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	. \$2	11	×
3 :	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
ı	of Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 Ь		
4 8	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
1	olf 'Yes,' enter the name of the foreign country	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	, A.	. *//
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	*	W. 3	
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
(c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		х
ı	of Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).	~)	. 3	43
á	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a	*,	x
ı	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	T	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	7 c		х
	If 'Yes,' indicate the number of Forms 8282 filed during the year	76	2 3	A)
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		x
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f	 	X
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899	 		
	as required?	7 g	<u> </u>	Х
J	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		Х
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	: š	1	2 1
	organization have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.	ė	ξ.,	F
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		X
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b	, x.e	X
	Section 501(c)(7) organizations. Enter		🐃	
	a Initiation fees and capital contributions included on Part VIII, line 12	1		.
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	┨┈┈	/ / s	16
	Section 501(c)(12) organizations. Enter a Gross income from members or shareholders	1 3 3 A	¥	 */}
		┥┈┈		
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	. 40-	J.	# #>
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	566	
		1 1	<i>#</i> ,	1
	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	120		:
ā	Note. See the instructions for additional information the organization must report on Schedule O	13 a	« · ·	. B : '
	•	1		11/4
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	\'	14-	Jal	х
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>
	o If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b	200 (2040

Pai	Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions								
	Check if Schedule O contains a response or note to any line in this Part VI			. X					
500	ction A. Governing Body and Management			. 141					
000	Mon A. Coverning Body and management		Yes	No					
1 a	a Enter the number of voting members of the governing body at the end of the tax year 1 a 7 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O								
ŧ	Enter the number of voting members included in line 1a, above, who are independent Lab 7			graph of					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		x					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		х					
4	Did the organization make any significant changes to its governing documents								
	since the prior Form 990 was filed?	4		X					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X					
6	Did the organization have members or stockholders?	6		X					
7:	2 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more	- <u>*</u> -							
, ,	members of the governing body?	7 a		X					
	Are any governance decisions of the organization reserved to (or subject to approval by) members,	<u> </u>							
	stockholders, or persons other than the governing body?	7 b		x					
_	· · · · · · · · · · · · · · · · · · ·	7.0	**	A 8.					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	ŀ (j		: /					
	a The governing body?	8 a	X	, y,					
	b Each committee with authority to act on behalf of the governing body?	8 b	$\frac{x}{x}$						
		00		├					
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	ction B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	ode.))					
			Yes	No					
10 a	a Did the organization have local chapters, branches, or affiliates?	10 a		Х					
	b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 b							
11 a	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х						
ı	b Describe in Schedule O the process, if any, used by the organization to review this Form 990	1 1		. 1					
12 8	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a		×					
	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b							
(c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c							
13	Did the organization have a written whistleblower policy?	13		x					
14	Did the organization have a written document retention and destruction policy?	14	X						
	Did the process for determining compensation of the following persons include a review and approval by independent		, <u>A</u>						
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	*							
á	a The organization's CEO, Executive Director, or top management official	15a		x					
	Other officers or key employees of the organization	15b		Х					
•	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions)	3. 3	, and	7					
40.	3 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a								
	taxable entity during the year?	16 a	out mit.	X					
	o If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16 b							
$\overline{}$	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 (Section 501(c)(3)s only) for public inspection. Indicate how you made these available. Check all that apply.	availab	le						
	Own website Another's website X Upon request Other (explain in Schedule O)								
19	the public during the tax year	le to							
20		0E) '		2012					

Form 990 (2016) Star of the Sea Founda Part VII Compensation of Officers, Direct			- <u></u>		30-04966	70 Page 7
Part VIII Compensation of Officers, Direct						70 Page 7
			Employe	es, Highest C	ompensated Er	nployees, and
Independent Contractors						_
Check if Schedule O contains a response or					 	<u></u>
Section A. Officers, Directors, Trustees, K	ey Emp	oyees, and	l Highest	Compensate	d Employees	
1 a Complete this table for all persons required to be listed organization's tax year.	d Report of	compensation f	for the caler	ndar year ending w	ith or within the	
 List all of the organization's current officers, direct compensation Enter -0- in columns (D), (E), and (F) if no 		`	ividuals or o	organizations), rega	ardless of amount of	
 List all of the organization's current key employees 	, if any Se	e instructions	for definition	n of 'key employee	,	
 List the organization's five current highest compensation (Box 5 of Form Worganization and any related organizations 						
• List all of the organization's former officers, key em of reportable compensation from the organization and any			npensated (employees who red	ceived more than \$1	000,000
 List all of the organization's former directors or truorganization, more than \$10,000 of reportable compensation. 						
List persons in the following order individual trustees or demployees, and former such persons	lirectors, ir	stitutional trus	tees, officer	s, key employees,	highest compensate	:d
Check this box if neither the organization nor any rela	ted organi	zation compen	sated any o	current officer, direc	ctor, or trustee	
		(C)				
(A) Name and Title	(B) Average hours per week (list any hours for related organiza-	Position (do not than one box, un is both an official rector/tru	less person cer and a	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations

	week (list any hours for related organiza- tions below dotted line)	ndividual trustee or director	nstitutional trustee	Officer	(ey employee	inghest compensated amployee	ormer	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Erica Hughes-Sterling Director	2.00			х				0.	0.	0.
(2) Doria Goodrich President	2.00			х				0.	0.	0.
(3) Thomas M. Callahan Director	35.00	Х						0.	0.	0.
(4) Patricia Erickson Secretary	2.00	х						0.	0.	0.
(5) John C. Baker Director	_2.00	х	<u> </u>					0.	0.	0.
	10.00			х				0.	0.	0.
(7) Peter Batty Director	2.00	х			_			0.	0.	0.
(9)										
(10)				!						
(11)										
(12)										
(13)										
(14)	1									

BAA	TEEA0108 11/16/16		Form	990 (2	2016)
	\$100,000 of compensation from the organization				
2	Total number of independent contractors (including but not limited to those listed above) who received more than		4	
	(A) Name and business address	(B) Description of services	Compe	C) ensation	n
Sec 1	tion B. Independent Contractors Complete this table for your five highest compensated independent contractors that recompensation from the organization Report compensation for the calendar year ending	eived more than \$100,000 of			
5	Did any person listed on line 1a receive or accrue compensation from any unrelated orgor services rendered to the organization? If 'Yes,' complete Schedule J for such person		5		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other co the organization and related organizations greater than \$150,000? If 'Yes,' complete So such individual	4	*	X	
	on line 1a? If 'Yes,' complete Schedule J for such individual		3	ļ	X

	Check if Schedule O contains a response or note to any line 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, Grants Amounts	b	Federated campaigns 1a Membership dues 1b Fundraising events 1c	64,258.		revenue		312314			
Contributions, Gifts, Grants and Other Similar Amounts	е	Related organizations 1 de Government grants (contributions) 1 e All other contributions, gifts, grants, and similar amounts not included above 1 f	2,931,009.							
	_	Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f		3,505,018.						
Program Service Revenue	2 a b c		Business Code							
Progra		All other program service revenue Total. Add lines 2a-2f					**********			
	3	Investment income (including dividends, other similar amounts)	interest and	191.	191.	0.	0.			
	b	Royalties	(n) Personal							
	7 a	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses	(II) Other							
Other Revenue	8 a	Gross income from fundraising events (not including: \$ 64,258. of contributions reported on line 1c) See Part IV, line 18	a b							
·	9 a	Gross income from gaming activities See Part IV, line 19 Less direct expenses Net income or (loss) from gaming activities	a b							
	10 a	Gross sales of inventory, less returns and allowances	a b							
	11 a		Business Code		*	Factor and the second				
	, t	d All other revenue		12,608.	12,608.	0.	0.			
		Total. Add lines 11a-11d		12,608. 3,517,817.	12,799.	0.	0.			
					1 14,122.		0			

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								
	Check if Schedule O contains a res				(2)			
Do i 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses			
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0.	0,					
2	Grants and other assistance to domestic individuals See Part IV, line 22	0.	0.					
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0.	0.					
4 5	Benefits paid to or for members Compensation of current officers, directors,				<u> </u>			
6	trustees, and key employees	0.	0.	0.	0.			
7	Other salaries and wages	0. 227,870.	227,870.	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	2,233.	2,233.	0.	0.			
10	Payroll taxes		17,302.	0.				
11	Fees for services (non-employees)	17,302.	17,302.	0.	0.			
a	Management							
t	Legal							
c	Accounting	3,500.	3,500.	0.	0.			
c	Lobbying							
e	Professional fundraising services See Part IV, line 17 .							
f	Investment management fees	0.	0.	0.	0.			
g	Other (If line 11g amount exceeds 10% of line 25, column	1,257.	1,257.	0.	0.			
12	(A) amount, list line 11g expenses on Schedule 0) Advertising and promotion	1,291.	1,291.	0.	0.			
13	Office expenses	1,325.	1,325.	0.	0.			
14	Information technology	1,323.	1,323.	·				
15	Royalties							
16	Occupancy	32,772.	32,772.	0.	0.			
17	Travel		327,12.	- -				
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	10.000	10.000	<u> </u>				
22	Depreciation, depletion, and amortization	40,992.	40,992.	0.	0.			
23 24		14,353.	14,353.	0.	0.			
	covered above (List miscellaneous expenses							
	of line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)							
a	Staff Development	627.	627.	0.	<u> </u>			
t	Food & Assistance	2,890,968.	2,890,968.	0.	Q.			
	Licenses & Taxes	361.		361.	0.			
	Payroll Processing	2,983.	2.983.	0.	<u> </u>			
	All other expenses	77,536.	52,224.	1,360.	_23,952.			
25	Total functional expenses. Add lines 1 through 24e	3,315,370.	3,289,697.	1,721.	23,952.			
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 Graph of the property of the proper							
	301 30-2 (M3C 330-120) · · · · · · · ·			L				

Form 990 (2016) Star of the Sea Foundation, Inc.

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	247,469.	1	175,901.
	2	Savings and temporary cash investments	124,472.	2	374,668.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions).		6	
S	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	3,980.	9	3,874.
	10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		}- - - - - -	
	b	Less accumulated depreciation 10b 184,708.	864,975.	10 c	892,073.
	11	Investments – publicly traded securities		11	
	12	Investments – other securities See Part IV, line 11		12	
	13	Investments – program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,240,896.	16	1,446,516.
	17	Accounts payable and accrued expenses	5,434.	17	8,601.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	 	20	
ies	21	Escrow or custodial account liability Complete Part IV of Schedule D	· · · · · · · · · · · · · · · · · · ·	21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
-	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D \ldots		25	
	26	Total liabilities. Add lines 17 through 25	5,434.	26	8,601.
Ses		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
lan	27	Unrestricted net assets	1,230,028.	27	1,179,314.
Ba	28	Temporarily restricted net assets	5,434.	28	258,601.
힏	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.		À.	
ţ	30	Capital stock or trust principal, or current funds		30	<u> </u>
8	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	<u> </u>
é	33	Total net assets or fund balances	1,235,462.	33	1,437,915.
	34	Total liabilities and net assets/fund balances	1,240,896.	34	1,446,516.
BA	A				Form 990 (2016)

Form	1990(2016) Star of the Sea Foundation, Inc	-0496670	Page 12
Pa	TSXIS Reconciliation of Net Assets		
	Check if Schedule O contains a response or note to any line in this Part XI		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,517,817.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,315,370.
3	Revenue less expenses. Subtract line 2 from line 1	3	202,447.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4	1,235,462.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,437,909.
Pai	t XII Financial Statements and Reporting	1.10.1	1,131,100.
	· · · ·		
	Check if Schedule O contains a response or note to any line in this Part XII	• • • • • • • •	Yes No
4	Accounting method used to prepare the Form 990 Cash X Accrual Other		Tes No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.		
2.	in Schedule O. In Were the organization's financial statements compiled or reviewed by an independent accountant?		2a X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on separate basis, consolidated basis, or both	а	
	Separate basis, consolidated basis, or both Separate basis Gonsolidated basis Both consolidated and separate basis		
	were the organization's financial statements audited by an independent accountant?		2b X
•	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate		20 1
	basis, consolidated basis, or both		
	X Separate basis Consolidated basis Both consolidated and separate basis		19 19 14
	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the au	dıt,	
	review, or compilation of its financial statements and selection of an independent accountant?		2c X
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		
3 8	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Singl Audit Act and OMB Circular A-133?	e 	3 a X
	of 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		3 b X
BAA			Form 990 (2016)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization				Employer identifica	ition number					
Star of the Sea Four				30-049667						
Rart 1 Reason for Public	c Charity Status (All o	rganizations must co	omplete this	part.) See instruction	18.					
The organization is not a private f	oundation because it is (For	lines 1 through 12, check	k only one box)							
1 A church, convention of	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).									
2 A school described in s	ection 170(b)(1)(A)(ii). (Atta	ch Schedule E (Form 990	0 or 990-EZ).)							
3 A hospital or a cooperate	tive hospital service organiza	ition described in section	170(b)(1)(A)(ii	i).						
4 A medical research organized name, city, and state	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 operate section 170(b)(1)(A)(iv	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)									
	government or government	al unit described in sectio	on 170(b)(1)(A)	(v).						
	rmally receives a substantial (vi). (Complete Part II)	part of its support from a	governmental u	unit or from the general po	ublic described					
8 A community trust desc	ribed in section 170(b)(1)(A)(vi). (Complete Part II)								
9 An agricultural research	organization described in se	ection 170(b)(1)(A)(ix) o	perated in conju	inction with a land-grant o	college					
	nd-grant college of agricultu	,	er the name, city	, and state of the college	or					
from activities related to investment income and	rmally receives (1) more that its exempt functions—subjet unrelated business taxable extion 509(a)(2). (Complete P	ct to certain exceptions, a ncome (less section 511	and (2) no more	than 33-1/3% of its supp	ort from gross					
	ed and operated exclusively		See section 50 9	9(a)(4).						
or more publicly suppor	red and operated exclusively ted organizations described nat describes the type of sup	in section 509(a)(1) or se	ection 509(a)(2	 See section 509(a)(3). 	urposes of one Check the box in					
a Type I. A supporting or	ganization operated, supervi er to regularly appoint or ele	sed, or controlled by its si	upported organi	zation(s), typically by givi	ng the supported tion You must					
	rganization supervised or col porting organization vested /. Sections A and C.									
c Type III functionally in	ntegrated. A supporting orga tructions) You must compl	inization operated in conn	nection with, and	functionally integrated w	vith, its supported					
d Type III non-functiona functionally integrated	Ily integrated. A supporting The organization generally n	organization operated in	connection with	its supported organization d an attentiveness require	on(s) that is not ement (see					
e Check this box if the ord	t complete Part IV, Section ganization received a written on-functionally integrated su	determination from the IF	RS that it is a Ty	rpe I, Type II, Type III fun	ctionally					
	rted organizations									
g Provide the following inform	nation about the supported o	rganization(s)			L- <u></u> -					
(I) Name of supported organization	(n) EIN	(III) Type of organization (described on lines 1-10 above (see instructions))	(iv) is the organization listed in your governing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)					
			Yes No	-						
		 	163 140	 	 					
(A)										
(B)										
(C)				 						
(D)										
(E)				*						
Total				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 If the organization fails to qualify under the tests listed below, please complete Part III)

Seci	tion A. Public Support						
begir	ndar year (or fiscal year nning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	1,252,819.	1,602,641.	1,883,709.	2,685,549.	3,505,018.	10,929,736.
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	1,252,819.	1,602,641.	1,883,709.	2,685,549.	3,505,018.	10,929,736.
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						10,929,736.
Sec	tion B. Total Support						
Cale: begir	ndar year (or fiscal year nning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	1,252,819.	1,602,641.	1,883,709.	2,685,549.	3,505,018.	10,929,736.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	218.	140.	124.	124.	191.	797.
9	Net income from unrelated business activities, whether or not the business is regularly carried on			1			
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						10,930,533.
12	Gross receipts from related activiti	es, etc (see instru	ctions)			12	<u></u>
13	First five years. If the Form 990 is organization, check this box and s	s for the organization here.	on's first, second, 1	hırd, fourth, or fifth	tax year as a sec	tion 501(c)(3)	
Sec	tion C. Computation of Pu						
14	Public support percentage for 201			, column (f))		14	99.99 %
15	Public support percentage from 20	015 Schedule A, Pa	art II, line 14			15	99.99 %
16a	33-1/3% support test-2016. If the and stop here. The organization of	ne organization did qualifies as a public	not check the box cly supported orga	on line 13, and lin nization	e 14 is 33-1/3% or	more, check this t	oox ► [X]
	33-1/3% support test—2015. If the and stop here. The organization of	qualifies as a publi	cly supported orga	nization		• • • •	▶ ∐
17a	10%-facts-and-circumstances te or more, and if the organization method organization meets the 'facts-a	eets the 'facts-and	-circumstances' tes	st, check this box a	and stop here. Ext	olain in Part VI how	/
	10%-facts-and-circumstances to or more, and if the organization morganization meets the 'facts-and-	eets the 'facts-and- circumstances' tes	circumstances' test t The organization	st, check this box a i qualifies as a pub	and stop here . Exp blicly supported org	olain in Part VI how Janization	^{/ the} ▶ 🏻
18	Private foundation. If the organiz	ation did not check	c a box on line 13,	16a, 16b, 17a, or 1	17b, check this box	c and see instruction	ons ▶ [_]

Part III . Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

	tion A. Public Support							
	dar year (or fiscal year beginning ın) 🟲	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 201	6	(f) Total
	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							
	that are not an unrelated trade or business under section 513.							
5	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					· · · · · · · · · · · · · · · · · · ·		
	governmental unit to the organization without charge							
	Total. Add lines 1 through 5							
	Amounts included on lines 1, 2, and 3 received from disqualified persons							
	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							
	Public support. (Subtract line 7c from line 6)					i ja	<u>*</u>	
Sect	tion B. Total Support							
	dar year (or fiscal year beginning in) 🟲	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 201	6	(f) Total
	Amounts from line 6							
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
	income (less section 511 taxes) from businesses acquired after June 30, 1975							
	Add lines 10a and 10b Net income from unrelated business	 		<u> </u>				
	activities not included in line 10b, whether or not the business is regularly carned on						_	
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)							
	Total support. (Add lines 9, 10c, 11, and 12.)							
	First five years. If the Form 990 is organization, check this box and s	top here		third, fourth, or fifth	tax year as a sect	ion 501(c)(3) 	▶ []
	tion C. Computation of Pu						· · ·	
	Public support percentage for 201		-				15	
	Public support percentage from 20				<u> </u>	· · · · · · · · · · · · · · · · · · ·	16	용
	tion D. Computation of Inv							
	Investment income percentage for	•					17	
	Investment income percentage fro						18	용
19a	33-1/3% support tests—2016. If t is not more than 33-1/3%, check the	he organization did	not check the box	x on line 14, and lir	ne 15 is more than oublicly supported (33-1/3%, an organization	d line	¹⁷
b	33-1/3% support tests-2015. If t	he organization did	not check a box of	on line 14 or line 19	a, and line 16 is m	ore than 33-	-1/3%,	and
	line 18 is not more than 33-1/3%, Private foundation. If the organiz							

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A. D. and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents?

 If 'No,' describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in **Part VI** when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in **Part VI** what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in **Part VI**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

		Yes	No
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Partive Supporting Organizations (continued)	
11 Has the organization accepted a gift or contribution from any of the following persons?	Yes No
A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a
b A family member of a person described in (a) above?	11b
c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI .	11c
Section B. Type I Supporting Organizations	
	Yes No
Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities if the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization	2
Section C. Type II Supporting Organizations	
	Yes No
Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	s 1
Section D. All Type III Supporting Organizations	
	Yes No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1
Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard	3
Section E. Type III Functionally Integrated Supporting Organizations	
1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see insti	ructions)
The experience artisfied the Astrophys Text Complete time 2 holour	ructionsy.
a The organization satisfied the Activities Test Complete line 2 below.	
b The organization is the parent of each of its supported organizations. Complete line 3 below	
c The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	ee instructions)
2 Activities Test Answer (a) and (b) below.	Yes No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supporte organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b
3 Parent of Supported Organizations Answer (a) and (b) below.	
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard	3b
	/Form 000 or 000 EZ) 2016

Pai	tWeel Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	iniza	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Ninstructions. All other Type III non-functionally integrated supporting organizations may be supported to the control of the c			
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recovenes of pnor-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Sec	tion B Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	* ·		
а	Average monthly value of securities	1 a		
t	Average monthly cash balances	1 b		
	Fair market value of other non-exempt-use assets	1 c		
d	Total (add lines 1a, 1b, and 1c)	1 d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI)	7.		
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
_ 7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		<u> </u>
2	Enter 85% of line 1	2		
3_	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally integrate (see instructions)	d Type	e III supporting organizatio	on

Schedule A (Form 990 or 990-EZ) 2016

	T Var Type III Non-Functionally integrated 509(a)(3) Su	ipporting Organiza	tions (continuea)	
Sec	tion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purpos			
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	ns,		
3	Administrative expenses paid to accomplish exempt purposes of suppo	rted organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organization Part VI) See instructions	tion is responsive (provide	e details	
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6	: A A		
	Underdistributions, if any, for years prior to 2016 (reasonable cause required — explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2016			<u> </u>
a				
b		. 3 M. m		A A TATAL MITTALL
С	From 2013		1 "1 14 " 2 " 1 " 1 " " . "	% 4 ° 8 ° 6 ° 8 ° 10 ° 10 ° 10 ° 10 ° 10 ° 10 ° 10
d	From 2014	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	\$. Z. & & P 9 1
e	From 2015		# 1/ N . N . N . N	·
f	Total of lines 3a through e		free to the first of freet or	
g	Applied to underdistributions of prior years	4		
	Applied to 2016 distributable amount	1	. # ' !	
i	Carryover from 2011 not applied (see instructions)			
i	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2016 from Section D, fine 7			
a	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3 ₁ and 4c			
8	Breakdown of line 7	****	1 N N 12 N N	
	STOCKHOOM OF MICE		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Excess from 2013			
	Excess from 2014			
	Excess from 2015	*		
<u> </u>	Excess from 2016		<u> </u>	1 W W

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

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047 2016

m990. Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

	Star of the Sea Foundation,	Inc.		30-0496670	
D'a	t I/ S Organizations Maintaining Dono		er Similar Fund		
<u>rai</u>	Complete if the organization answer	ered 'Yes' on Form 990, F	Part IV, line 6	ac of 71000amo.	
		(a) Donor advised f	funds	(b) Funds and other acco	ounts
1	Total number at end of year	(4, 20.10. 00.10.0		(2)	
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor are the organization's property, subject to the organization's property.				
6	Did the organization inform all grantees, donors, a for charitable purposes and not for the benefit of timpermissible private benefit?	and donor advisors in writing the he donor or donor advisor, or f	at grant funds can b for any other purpose	e used only e conferring	No
Par	t II Conservation Easements. Complete if the organization answer	ered 'Yes' on Form 990 F	Part IV line 7		
1	Purpose(s) of conservation easements held by the				
•	Preservation of land for public use (e.g., recre	•		a historically important land area	
	Protection of natural habitat	sation of cadoation,	∟	a certified historic structure	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization h	neld a qualified conservation co	ontribution in the form	n of a conservation easement or	n the
_	last day of the tax year				
				Held at the End of the	ne Tax Year
				2 a	
ŀ	Total acreage restricted by conservation easemer	nts		2b	
(Number of conservation easements on a certified	historic structure included in (a	a)	2 c	
(Number of conservation easements included in (o structure listed in the National Register			2 d	
3	Number of conservation easements modified, trantax year ►	nsferred, released, extinguishe	d, or terminated by t	he organization during the	
4	Number of states where property subject to conse	ervation easement is located 🟲			
5	Does the organization have a written policy regard and enforcement of the conservation easements in		spection, handling o		No
6	Staff and volunteer hours devoted to monitoring, i	nspecting, handling of violation	ns, and enforcing cor	nservation easements during the	e year
7	Amount of expenses incurred in monitoring, insper ►\$	ecting, handling of violations, ar	nd enforcing conserv	vation easements during the yea	r
8	Does each conservation easement reported on lin and section 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requir	rements of section 17	70(h)(4)(B)(ı) · · · · Yes	No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote to the conservation easements	s conservation easements in its e organization's financial stater	revenue and expen ments that describes	ise statement, and balance shee the organization's accounting fo	et, and or
Par	Organizations Maintaining Collection Complete if the organization answer	ctions of Art, Historical ered 'Yes' on Form 990, F	Treasures, or (Part IV, line 8.	Other Similar Assets.	
1 8	If the organization elected, as permitted under SF art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its financial	ld for public exhibition, education	on, or research in fui		
t	b If the organization elected, as permitted under SF historical treasures, or other similar assets held fo following amounts relating to these items:	AS 116 (ASC 958), to report in public exhibition, education, of	n its revenue stateme or research in furthei	ent and balance sheet works of a rance of public service, provide	art, the
	(i) Revenue included on Form 990, Part VIII, line				
	(ii) Assets included in Form 990, Part X			···· • \$	
2	If the organization received or held works of art, h amounts required to be reported under SFAS 116	istorical treasures, or other sim	nilar assets for financ		
ē	Revenue included on Form 990, Part VIII, line 1			····· ▶ \$	
t	Assets included in Form 990, Part X			> \$	

1 1 1										
Schedule D (Form 990) 2016 Star	of the S	Sea Fo	oundation,	Inc.			30-049	6670	ſ	Page 2
Part ∥ Organizations Maintai					reasures, c	r Other	Similar Ass	sets (co		
Using the organization's acquisition items (check all that apply)										
a Public exhibition			d Loan	or exchar	ge programs					
b Scholarly research			e Othe	r						
c Preservation for future generati	ons									
4 Provide a description of the organiz Part XIII	ation's collec	tions and	d explain how th	ey further	the organization	n's exemp	purpose in			
5 During the year, did the organizatio to be sold to raise funds rather than	n solicit or re i to be mainta	ceive do	nations of art, hi part of the orgar	istorical tre	easures, or othe	er sımılar a	ssets	Yes		No
Part V Escrow and Custodial line 9, or reported an ar	Arrangen nount on F	nents. orm 99	Complete if to 90, Part X, lin	the orga ne 21.	nization ans	wered 'Y	es' on Forn	n 990, Pa	art IV,	
1 a Is the organization an agent, trustee on Form 990, Part X?					ns or other as:	sets not inc	luded	Yes		No
b If 'Yes,' explain the arrangement in	Part XIII and	complet	e the following to	able						
								Amount		
c Beginning balance			• • • •			1 c				
d Additions during the year						. 1 d				
e Distributions during the year						· · 1e				
f Ending balance						· 1f		T 1 1 2		T
2 a Did the organization include an amo						-		Yes	\vdash	No
b If 'Yes,' explain the arrangement in	Part XIII Che	eck nere	ir the explanation	n nas bee	n provided on	Part XIII .			L]
Part V. Endowment Funds. Co	omnlete if	the ora	anization and	swered '	Yes' on For	m 990 P	art IV line	10		
Tata v, a Lindownient i unds. O	(a) Current		(b) Prior year		(c) Two years bac		hree years back		ır years l	hack
1 a Beginning of year balance	(u) Current	jeur	(a) That year		100 70015 000	. (4)	wee yours sack	(6) 1 00	Jours .	<u></u>
b Contributions										
6 Not investment comings, going								<u> </u>		
c Net investment earnings, gains, and losses	-							 		
d Grants or scholarships								 		
e Other expenditures for facilities and programs					 					
f Administrative expenses										
g End of year balance	<u> </u>	<u> </u>		<u>.</u>	7 33 1 11			<u> </u>		
2 Provide the estimated percentage of		year end	•	g, column	(a)) neid as					
a Board designated or quasi-endown			<u>-</u> %							
b Permanent endowment	 %	i	ૄ							
c Temporarily restricted endowment The percentages on lines 2a, 2b, ar		equal 10	 -							
3 a Are there endowment funds not in to organization by			•						Yes	No
(i) unrelated organizations								. 3a(i)		
(ii) related organizations										
b If 'Yes' on line 3a(ii), are the related	organization	s listed a	as required on S	chedule F	?			3b		
4 Describe in Part XIII the intended us			n's endowment	funds						
Rart VI Land, Buildings, and I										
Complete if the organize	ation answ	ered 'Y	es' on Form	990, Pa	rt IV, line 11	la. See F	orm 990, P	art X, lın	e 10.	
Description of property			or other basis vestment)		ost or other is (other)	depr	cumulated reciation	(d) Bo	ook valu	ne
1 a Land					250,000.		* *		250,	000.
b Buildings					482,848.		77,696.			152.
Lossehold improvements		1		1		1				

93,553 <u> 250,380. l</u> Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c) ▶

d Equipment

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. ► 892,073. Schedule **D** (Form 990) 2016

79,789.

157,132.

13,764.

93,248.

chedule D (Form 990) 2016 Star of the Sea Foundation, Inc.	30-0496670	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue pe		
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements		
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recovenes of prior year grants		
d Other (Describe in Part XIII)		
e Add lines 2a through 2d		
3 Subtract line 2e from line 1		
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII)		
c Add lines 4a and 4b		
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses		
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a		
1 Total expenses and losses per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	****	
a Donated services and use of facilities	j.	
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	
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		
b Other (Describe in Part XIII)		
c Add lines 4a and 4b	4c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4; Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Schedule **D** (Form 990) 2016

BAA

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

2016

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

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public

Employer identification number

Pai		•		130-	049667	<u></u>		
	a. Types cr. reperty	(a)	(b)	(c)	Ī -	(d)	_	
	· · · · · · · · · · · · · · · · · · ·	Check if applicable	Number of contributions or items contributed	Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Metho noncash	od of det contribu	ermini tion ar	ng nounts
1	Art – Works of art							
2	Art – Historical treasures				<u> </u>			
3	Art - Fractional interests							
4	Books and publications		₹ ; % % /					
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
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	<u> </u>			<u> </u>			
16	Real estate – Commercial							
17	Real estate — Other				<u> </u>			
18	Collectibles							
19	Food inventory				<u> </u>			
20	Drugs and medical supplies			<u> </u>	<u> </u>			
21	Taxidermy				<u> </u>			
22	Historical artifacts							
23	Scientific specimens				 			
24	Archeological artifacts							
25	Other () .				 			
26	Other ()							
27	Other • () .			**				
28	Other ()							
29	Number of Forms 8283 received by the organization	during the ta	x year for contributions f	for which the				
	organization completed Form 8283, Part IV, Donee A	Acknowledge	mént		29			
							Yes	No
30a	During the year, did the organization receive by contrit must hold for at least three years from the date of the for exempt purposes for the entire holding period?	he initial cont	ribution, and which isn't	required to be used	at	20.0		
	If 'Yes,' describe the arrangement in Part II		• • • • • • • •			30 a		X.,
31	Does the organization have a gift acceptance policy t	that requires	the review of any nonsta	andard contributions?		31		* X
•		•	-					
	Does the organization hire or use third parties or rela noncash contributions?					32 a		X
t	If 'Yes,' describe in Part II				}	**	, * ¥ {	# . T p . 1
33	If the organization didn't report an amount in column describe in Part II	(c) for a type	of property for which co	olumn (a) is checked,			·À	

Page 2

Partill Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

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.

2016

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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.

Open to Public

Name of the organization

Employer identification number

Star of the Sea Foundation, Inc.

30-0496670

Independent CPA prepares Form 990. Form 990 is then presented to Board of Directors. Any questions by BOD are discussed and answered prior to Pt VI, Line 11b mailing Informational Return to the Internal Revenue Service.

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