Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

ZU 1

40 i

Department of the Treasury Internal Revenue Service ► Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Α	For the	e 2018 calendar year, or tax year beginning , 2018, and er	nding		
В	Check if	applicable C		D Employer identi	fication number
	Add	dress change ST. THOMAS SWIMMING ASSOCIATION		66-0426	307
	Na	me change 6501 RED HOOK PLAZA, SUITE 201		E Telephone num	ber
	H	ST. THOMAS, VI 00802		340-779	-7872
	H			340 113	,0,2
	H	l return/terminaled			202.000
	\vdash	ended return	luen is the a	G Gross receipts group return for subords	
	Apı	plication pending F Name and address of principal officer:	1 ' '		~ ''° '''
		SAME AS C ABOVE		subordinates include attach a list. (see instru	clions)
<u> </u>		xempt status: X 501(c)(3) 501(c) () (insert no) 4947(a)(1) or 53			
1	Web	site: WWW.STTHOMASSWIMMING.ORG		exemption number	
K			formation, 1980	M State of I	egal domicile: VI
Pa	art I	Summary			
		Briefly describe the organization's mission or most significant activities THE PR			
σw		THOMAS SWIMMING ASSOCIATION IS TO PROVIDE AND PROMOTE	COMPETIT	<u> IVE_AND_REC</u>	CREATIONAL
귿	\	SWIMMING AND WATER SAFETY PROGRAMS TO THE ST. THOM	ias and si	L. JOHN CO	MMUNITIES.
Ë		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
<u>```</u> `	2 1	Check this box ► if the organization discontinued its operations or disposed of	more than 25%		_
. od	3 1	Number of voting members of the governing body (Part VI, line 1a).		3	* 8
S	4	Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2018 (Part V, line 2a)		5	8 13
⑤	6 -	Total number of moviduals employed in calendar year 2016 (Fart V, fine 2a)	• -	6	0
į	72	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
Ĭ,	,,,	Net unrelated business taxable income from Form 990-T, line 38		7b	0.
골		ter directated business taxable meeting from 1 offit 550-1, into 50-1.		rior Year	Current Year
Revenue AN FACTIVITIES & Governance	8	Contributions and grants (Part VIII, line 1h).		72,201.	196,461.
e i	9	Program service revenue (Part VIII, line 2g)	.	81,210.	90,134.
(9)	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) RECEIVED		-17,405.	275.
é	11	Other revenue (Part VIII column (A) lines 5, 6d, 8c, 9c, 10c, and 10c, 10c, 10c, 10c, 10c, 10c, 10c, 10c,		62,397.	6,939.
	12	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, luc, and 14e) Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>ي</u>]ي	198,403.	293,809.
	13	Grants and similar amounts paid (Part IX, column (A) pes 1-3) 1. 3 2019	31	6,630.	
		Benefits paid to or for members (Part IX, column (A) Nine 4)		- 0,030.	
			<u> </u>	122,063.	111,823.
8	115 1	Salaries other compensation employee hangus (Part IX		122,003.1	111,025.
ž,	15	Salaries, other compensation, employee benefits (Part IX, Difficulty Part IX)	1"		
Ĕ	15 16 a	Professional fundraising fees (Part IX, column (A), line 11e)]		
xpena	15 16a b		J		
Expenses	16 a	Professional fundraising fees (Part IX, column (A), line 11e)	J ====================================	149,865.	150,306.
Expen	16a b	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25)	J		150,306. 262,129.
Expen	16a b 17 18	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	J	149,865.	
58	16a b 17 1 18 19	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	17 Beginnin	149,865. 278,558.	262, 129. 31, 680. End of Year
58	16a b 17 1 18 19	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	17 Beginnin	149,865. 278,558. -80,155.	262,129. 31,680.
58	16a b 17 1 18 19	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 COLLECTION & DEPOSIT NO	D 17 Beginnin	149, 865. 278, 558. -80, 155. g of Current Year	262, 129. 31, 680. End of Year
58	16a b 17 18 19	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	D 17 Beginnin	149, 865. 278, 558. -80, 155. g of Current Year 788, 923. 52, 151.	262,129. 31,680. End of Year 819,627. 51,175.
Not Assets or Fund Balancos	16 a b 17 18 19 1 20 21 22	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		149, 865. 278, 558. -80, 155. g of Current Year 788, 923.	262, 129. 31, 680. End of Year 819, 627.
Not Assets or	16 a b 17 18 19 1 20 21 22 art II	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 COLLECTION & DI POSTI NO Total assets (Part X, line 16)	S.)	149,865. 278,558. -80,155. g of Current Year 788,923. 52,151. 736,772.	262,129. 31,680. End of Year 819,627. 51,175. 768,452.
Not Assets or	16 a b 17 18 19 1 20 21 22 art II	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	S.)	149,865. 278,558. -80,155. g of Current Year 788,923. 52,151. 736,772.	262,129. 31,680. End of Year 819,627. 51,175. 768,452.
Not Assets or	16 a b 17 18 19 1 20 21 22 art II	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 COLLECTION & DI POSTI NO Total assets (Part X, line 16)	S.)	149,865. 278,558. -80,155. g of Current Year 788,923. 52,151. 736,772.	262,129. 31,680. End of Year 819,627. 51,175. 768,452.
O Com	16 a b 17 18 19 20 21 22 art II spenalice. De	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 COLLECTION & DI POSTI NO Total assets (Part X, line 16)	S.)	149,865. 278,558. -80,155. g of Current Year 788,923. 52,151. 736,772.	262,129. 31,680. End of Year 819,627. 51,175. 768,452.
Not Assets of Country	16 a b 17 18 19 19 20 21 22 art II spenalte upiete. De	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	S.)	149,865. 278,558. -80,155. g of Current Year 788,923. 52,151. 736,772.	262,129. 31,680. End of Year 819,627. 51,175. 768,452.
O Com	16 a b 17 18 19 19 20 21 22 art II spenalte upiete. De	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	S.)	149,865. 278,558. -80,155. g of Current Year 788,923. 52,151. 736,772.	262,129. 31,680. End of Year 819,627. 51,175. 768,452.
Not Assets of Country	16 a b 17 18 19 19 20 21 22 art II spenalte upiete. De	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 COLLECTION & DI POSTI NO Total liabilities (Part X, line 16) Nov 15 2019 Net assets or fund balances Subtract line 21 from line 20 Signature Block Sof penury, I declare that there examined this return including accompanying schedules and statements, and to the best citaration of preparer (other than officer) is based of all information of which preparer has any knowledge Type or print name and title Print/Type greparers name Print/Type greparers name	t of my knowledge an	149, 865. 278, 558. -80, 155. g of Current Year 788, 923. 52, 151. 736, 772. d belief, it is true, correct	262,129. 31,680. End of Year 819,627. 51,175. 768,452.
Not Assets of Purifices of Puri	16 a b 17 18 19 20 21 22 art II s penaltre upie le . De	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25). Revenue less expenses. Subtract line 18 from line 12 COLLECTION & D) POST NO Total assets (Part X, line 16) Total liabilities (Part X, line 26) Net assets or fund balances Subtract line 21 from line 20 Signature Block Sol perury, I declare that there examined this return including accompanying schedules and statements, and to the besical all information of preparer (other than officer) is passed of all information of which preparer has any knowledge Type or print name and title Print/Type preparer's name Prépare signature Date Date	t of my knowledge an	149, 865. 278, 558. -80, 155. g of Current Year 788, 923. 52, 151. 736, 772. d belief. if is true, correct	262,129. 31,680. End of Year 819,627. 51,175. 768,452.
Do crossed to N Under Com	16 a b 17 18 19 20 21 22 art II s penaltres piete. De	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 COLLECTION & DI POSTI NO Total liabilities (Part X, line 16) Total liabilities (Part X, line 26) Net assets or fund balances Subtract line 21 from line 20 Signature Block Sol perpury, I declare that there examined this return including accompanying schedules and statements, and to the besical allon of preparer, (other than officer) is based of all information of which preparer has any knowledge Type or print name and title Print/Type preparers name JANICE V. HODGE, CPA Janice V. HODGE, CPA	S.)	149, 865. 278, 558. -80, 155. g of Current Year 788, 923. 52, 151. 736, 772. d belief. if is true, correct	262,129. 31,680. End of Year 819,627. 51,175. 768,452.
Do crossy to N Page Under Com	16 a b 17 18 19 20 21 22 art II s penaltrein Dere	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 COLLECTION & DEPOSIT NOTION &	t of my knowledge an	149, 865. 278, 55880, 155. g of Current Year 788, 923. 52, 151. 736, 772. d belief, if is true, correct LLL ST. Check if self-employed	262,129. 31,680. End of Year 819,627. 51,175. 768,452.
Do crossy to N Page Under Com	16 a b 17 18 19 20 21 22 art II s penaltres piete. De	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 COLLECTION & DI POSTI NO COLLECTION AL POSTI	t of my knowledge an	149,865. 278,55880,155. g of Current Year 788,923. 52,151. 736,772. d belief, it is true, correct LLLS STATE SEIF-Employed Fum's EIN 66	262,129. 31,680. End of Year 819,627. 51,175. 768,452. PTIN P00632604 -0500092
Par Under com	16 a b 17 18 19 20 21 22 art II s penaltes piete. De	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25). Revenue less expenses. Subtract line 18 from line 12 COLLECTION & DILPOSTI NO COLLECTI	t of my knowledge an	149, 865. 278, 55880, 155. g of Current Year 788, 923. 52, 151. 736, 772. d belief, if is true, correct LLL ST. Check if self-employed	262,129. 31,680. End of Year 819,627. 51,175. 768,452. Ct. and PTIN P00632604 -0500092 D) 776-1852
Par Vinder Com Sich Par Par Under Man	16 a b 17 18 19 20 21 22 art II s penaltes plete. De	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 COLLECTION & DI POSTI NO COLLECTION AL POSTI	t of my knowledge an	149,865. 278,55880,155. g of Current Year 788,923. 52,151. 736,772. d belief, it is true, correct the Check is self-employed Fum's EIN 66- Phane no (34)	262,129. 31,680. End of Year 819,627. 51,175. 768,452. PTIN P00632604 -0500092

	990 (2018) ST. THOMAS SWIMMING ASSOCIATION	66-0426307	Page 2
Par	rt III Statement of Program Service Accomplishments		رـــا
_	Check if Schedule O contains a response or note to any line in this Part III		<u> </u>
9	3	ON TO TO DECUTE	T 3 3370
	THE PRIMARY EXEMPT PURPOSE OF THE ST. THOMAS SWIMMING ASSOCIATI PROMOTE COMPETITIVE AND RECREATIONAL SWIMMING AND WATER SAFETY		
	THOMAS AND ST. JOHN COMMUNITIES.	PROGRAMS TO THE	51
-	Institute alle out oom communities.		
2	Did the organization undertake any significant program services during the year which were not listed on the	he 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 service if "Yes," describe these changes on Schedule O	ces? Yes	X No
4	Describe the organization's program service accomplishments for each of its three largest program service	es as measured hy exner	2421
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations tand revenue, if any, for each program service reported.	o others, the total expens	ses,
4 a	(Code) (Expenses \$ 169,816. including grants of \$) (R	Revenue \$ 49	,983.)
	SWIM TEAM.		
	THE SWIM TEAM IS A 10 MONTH COMPETITIVE PROGRAM AVAILABLE TO AL		
	YEARS OLD. SWIMMERS COMPETE AGAINST EACH OTHER AND SWIM TEAMS		
	THE GOAL IS TO BECOME BETTER SWIMMERS AND ADVANCE TO HIGHER SWIM LE THERE WERE 78 SWIM TEAM MEMBERS.	AFT2" DOKTING 701	: _'
	Thora and 70 buth that then but to .		-
4ь	(Code.) (Expenses \$ 56,606. including grants of \$) (R	Revenue \$ 33	,861.)
	SWIMMING AND WATER SAFETY.	,	,001.,
	SWIM LESSONS ARE MADE AVAILABE TO THE PUBLIC IN PRIVATE, FAMILY AND	GROUP FORMATS F	OR
	ALL LEVELS OF OF ABILITY. LESSONS ARE PROVIDED THROUGHTOUT THE		
	ABILITIES. DURING 2017, APPROXIMATELY 160 PEOPLE PARTICIPATED I		ONS
	DIRECTLY THROUGH OUR ORGANIZATION AND 447 THROUGH PARTNERSHIPS ORGANIZATIONS.	WITH OTHER	
	ORGANIZATIONS.		-1
4 c	(Code:) (Expenses \$ including grants of \$) (R	evenue >	,
		- 	
		- 	
			· ~
	Other program services (Describe in Schedule O.)	-	
	(Expenses \$ including grants of \$) (Revenue \$	<u> </u>	•
4e	Total program service expenses ► 226, 422.		990 (2018)

-0426307 AB 2003

Part IV.	Checklist o	f Required	Schedules

7.	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete	-	No
	Schedule A	1 X	
2		2 X	÷
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	3 :	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 !	X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III.	5	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 :	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	- +·-	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8	X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counse ing, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D. Part IV	9	. x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V.	10	X
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable		
í	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.	11 a X	! :
1	b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIL	11 Б	X
•	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
(d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d.	X
•	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X.	11 e	X
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	11 f	Х
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	; ; X
١	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b	, X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	' X
14	Did the organization maintain an office, employees, or agents outside of the United States?	14a	. X
ŀ	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 fore gn 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	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17	- 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
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a	X
ь	of Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	<u> </u>
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
		E 000	(2010)

Form 990 (2018) ST. THOMAS SWIMMING ASSOCIATION

[Part IV | Checklist of Required Schedules (continued)

			res	NO
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		х
24 8	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
ı	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		ł i
25 a	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		X.
i	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	25Ь		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II	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	instructions for applicable filing thresholds, conditions, and exceptions).	· •	,	
	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		_ X
ŧ	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		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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		<u>x</u>
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV. and Part V, line 1.	34		Х
3 5 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
t	of 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		_ x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R. Part Vi	37	*****	×
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part V Times 16 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
Par	t 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	 i	Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter 0 if not applicable 1 a 1			-10
	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 (gamb ing) winnings to prize winners?	1 c	х	
BAA		<u> </u>	990 (2018;

BAA

Form 990 (2018)

Statements Regarding Other IRS Filings and Tax Compliance (continued) Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return Х b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2 b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? ... 3 a b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O 3 b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)?...... 4 a b If 'Yes,' enter the name of the foreign country: > See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) Х 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . 5 a X 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? ... 5 c 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization X 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 not tax deductible 7 ... 6 b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and 7 a Х services provided to the payor? 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 Form 82827 7 c d if 'Yes,' indicate the number of Forms 8282 filed during the year 7 d Χ e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e 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 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7 h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring R organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9 a 9 b b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter. a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11 a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11 b 12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a 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. 13 a a is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand X 14a Did the organization receive any payments for indoor lanning services during the tax year? 14a 14b b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O. Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or Х 15 excess parachute payment(s) during the year? If 'Yes,' see instructions and file Form 4720, Schedule N Х 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O.

TEEA0105L 12/31/18

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 Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year... 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. b Enter the number of voting members included in line 1a, above, who are independent 8 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 X 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . 4 Х Did the organization become aware during the year of a significant diversion of the organization's assets?. X 5 6 Did the organization have members or stockholders? Х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . X 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a b Each committee with authority to act on behalf of the governing body?. 8 h Х 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 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?.... 10 a X b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13. 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12 b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in SEE SCHEDULE O . . . Schedule O how this was done 12 c 13 Did the organization have a written whistleblower policy?... Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15 a 15 b b Other officers or key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? ... 16 a Х b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Other (explain in Schedule O) X Upon request Another's website Own website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records 20 SHAW BOSWELL 6501 RED HOOK PLAZA, SUITE 201 THOMAS, VI 00802 340-998-1289

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

Check if Schedule O contains a response or note to any line in this Part VII.

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D). (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employees.'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

		(C)					- 1		1		
(A) Name and Title	(B) Average hours per	ge is both an officer and a director/trustee)				s pers and a	an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimaled amount of other compensation	
	per week (list any hours for related organizations below dolled line)	or director	Institutional trustee	Officer	Kcy employee	Highest compensated employee	Former	the organization (W 2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations	
(1) NATASHIA LEINENBACH	1								0		
DIRECTOR		 			<u> </u>	\vdash	\dashv	0.	0.	0.	
(2) JANE TOWNSEND DIRECTOR	1							0.	0.	0.	
(3) ENRIQUE RODRIGUEZ	1					[[
DIRECTOR	0	ĺ						0.	0.	0.	
(4) ANIA WILSON POE	1										
DIRECTOR	0				:			0.	0.	0.	
(5) FRANK ODLUM	1										
PRESIDENT	0			X				0.	0.	<u> </u>	
(6) BONNIE BARR	1_1_	1		- 1			- 1		ľ		
SECRETARY	0	<u> </u>		Х				0.	0.	0.	
(7) RABIN BACHAN	1	ļ		i							
TREASURER	0			X				0.	0.	0.	
(8) SHANE BRUNT	11	}					1				
VICE PRESIDENT	0			X				0.	0.	0.	
(9)											
(10)											
(11)											
(12)										phobasis migritic pg the medium follows	
(13)											
(14)											
							_				

Fartyviti Section A. Onicers, Directors, Truste	(B)		,ioy	((<u> </u>		·9··	est compensate	u Linployees (Juninaeu)	
(A) Name and title	Average hours per week	box	, unle er a	heck	erson direct	e lhan is bol lor/lrus	th an stee)	Reportable	(E) Reportable compensation from	i i ami	(F) Estimated ount of other
	(list any hours for related organiza - tions below dotted fine)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organization (W 2/1099-MISC)	QI a	mpensalion from the ganizalion nd related ganizalions
(15)											
(16)		-					_		**************************************		
(17)											
(18)				<u> </u>	_		 			_	
(19)									·	+	
(20)			-		-				·	-	
(21)				-							
(22)										 	-
(23)	<u></u>								748		
(24)										-	
(25)							_		······································		
1 b Sub-total				اا	<u>.</u>	LJ	-	0.	0	<u> </u>	0.
c Total from continuation sheets to Part VII, Section						•	>	0.	0		0.
2 Total number of individuals (including but not limit	ed to thos		ed a	abov	e) w	ho re	ecei	0. ved more than \$10	0,000 of reportab		0. ensation
from the organization 0											Yes No
3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for such	or, or trust Individual	ee, k	ey e		loye			hest compensated	employee	3	х
For any individual listed on line 1a, is the sum of rethe organization and related organizations greater	eportable	com	pens	satio 'Ye:	on ar	nd ot ompl	her ete	compensation from	n		
such individual 5 Did any person listed on line 1a receive or accrue	compensa	ation	fron	 n an	i. Iv un	relat	ed (organization or inc		4	X
for services rendered to the organization? If 'Yes,' Section B. Independent Contractors	complete	Sche	dule	9 <i>J f</i>	or s	uch p	ers	on .	·	. 5	<u> </u>
1 Complete this table for your five highest compensation	ted indep	ende	nt c	ontr	acto	rs tha	at re	eceived more than	\$100,000 of		
compensation from the organization. Report comp (A) Name and business addre		or tri	e ca	ienc	ar y	ear e	eno	Description o		((C) ensation
	-										
	_	_									
2 Total number of independent contractors (including \$100,000 of compensation from the organization	_	ımıte	d to	thos	se li	sted	abo	ove) who received r	nore than		
BAA		EEAO	1081	08/0	3/18					Form	990 (2018)

	<u> </u>	Check if Schedule O contains a response or note to a	ny line in this Part VIII			
•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	l a	Federated campaigns 1 a Membership dues 1 b 500 Fundraising events 1 c Related organizations 1 d	0.	-		1
utions, i	e f	Government grants (contributions) . 1 e 54, 87! All other contributions, gifts, grants, and similar amounts not included above . 16 141 086				
ntrib d Otl	, g	similar amounts not included above 11 141.089 Noncash contributions included in lines la-11 \$	<u>o.</u>			
	h	Total. Add lines 1a-1f	196,461.			
Program Service Revenue	2 a	SWIM PROGRAM REVENUE 713940	90 134.	90,134.		
n Service	d					
gran	f	All other program service revenue .				
8	g	Total. Add lines 2a-2f	90,134.	_		
	3	Investment income (including dividends, interest and other similar amounts)	275.	275.		
	5	Royalties			- 	
	ь	Gross rents . 5, 254. Less rental expenses Hental income or (loss) . 5, 254.	1	í		
	d	Net rental incurre or (loss)	5,254.			5, 254.
	i	Gross amount from sales of assets other than inventory (i) Securities (ii) Other				
		Less cust or other basis and sales expenses Gain or (loss)		;		
	d	Net gain or (loss)	•			,
Other Revenue	8 a	Gross income from fundraising events (not including \$ of contributions reported on line 1c)				
r Re		See Part IV, line 18 a				
粪		Less direct expenses b Net income or (loss) from fundraising events	-			
J		Gross income from gaming activities. See Part IV, line 19			, .	
		Léss direct expenses b Net income or (loss) from gaming activities	<u> </u>		·	
	ļ	Gross sales of inventory, less returns and allowances a 700 Less, cost of goods sold b	6.			
		Net income or (loss) from sales of inventory	706.	706.		
		Miscellaneous Revenue Business Code OTHER INCOME 900099	979.	979.		
	b c	All abbas spirasia		- ·		• • •
		All other revenue	<u> </u>			· · · · · · · · · · · · · · · · · · ·
		Total. Add lines 11a-11d Total revenue. See instructions	979. 293,809.	92,094.	r.	5,254.
DAA		•	· EAGLOOL 00/03/10			Form 990 (2018)

Sec	tion 501(c)(3) and 501(c)(4) organizations must c	complete all columns. Al	ll other organizations mu	st complete column (A)	
	Check if Schedule O contains a re			•	
Do i 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(8) 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			general enpended	
2	Grants and other assistance to domestic individuals. See Part IV, line 22.		•	• •	
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	ļ 			•
4 5	Benefits paid to or for members Compensation of current officers, directors, 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)(8)	0.	0.	0.	0.
7	Other salaries and wages	103,876.	88,295.	15,581.	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)		33,23	2570011	
9	Other employee benefits				
10 11	Payroll taxes	7,947.	6,755.	1,192.	-
	Management		· ·		
	Legal	9,440.	8,024.	1,416.	
	Accounting	1,807.	1,536.	271.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				·
f	Investment management fees				
9	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	16,359.	13,905.	2,454.	
12	Advertising and promotion	5,368.	5,368.		
13	Office expenses	330.	281.	49.	nes a manager com \$2900.
14	Information technology	· · · · · · · · · · · · · · · · · · ·	·		
15	Royalties				
16	Occupancy				
17	Travel	7,939.	7,939.		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials		1		
19	Conferences, conventions, and meetings				
20	Interest	94.	80.	14.	
21	Payments to affiliates				
	Depreciation, depletion, and amortization	26,782.	22,765.	4,017.	
23 24	Insurance	14,983.	12,736.	2,247.	
	covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O).	1			
	UTILITIES	27,439.	23,323.	4,116.	
þ	MAINTENANCE	19,469.	16,549.	2,920.	
C	CHEMICALS	10,500	10,500.		
d	BANK AND CREDIT CARD FEES	3,298.	2,803.	495.	
	All other expenses.	6, 498.	5,563.	935.	
	Total functional expenses. Add lines 1 through 24e	262,129.	226, 422.	35,707.	
	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)	1		·	

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (**B**) End of year (A) Beginning of year Cash — non interest-bearing ... 116,317 62,916 1 2 Savings and temporary cash investments. 2 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 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' berieficiary organizations (see instructions). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10 a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D 10a 849,739 b Less: accumulated depreciation 10b 726,007 146,429 10 c 703,310. Investments - publicly traded securities. 11 11 12 Investments — other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 Intangible assets. 14 .. 14 15 Other assets See Part IV, line 11. 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 788,923 819,627 Accounts payable and accrued expenses 17 9,850 2,691 18 Grants payable 18 19 Deferred revenue 19 41,325. 49,460 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 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 24 Unsecured notes and loans payable to unrelated third parties 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 25 Total liabilities. Add lines 17 through 25 52,151 26 ,175. Organizations that follow SFAS 117 (ASC 958), check here or Fund Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 768,452. 736,772 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 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 Net Assets Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 33 33 Total net assets or fund balances 736,772 768,452. Total liabilities and net assets/fund balances 819,627. 34 788,923

		6-0426307	P	age 12
Pä	rtXI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	293,	809.
2	Total expenses (must equal Part IX, column (A), line 25)	2		129.
3	Revenue less expenses Subtract line 2 from line 1.	3		680.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		772.
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		0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (8))	10	768.	452.
Pa	t XII Financial Statements and Reporting			
<u></u>	Check if Schedule O contains a response or note to any line in this Part XII			
	Check is defined by Configures a response of note to any line in this Part XII	· · · · ·	Yes	الا No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other	··	163	110
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.		-	
2 8	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a X	ļ
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both.	i on a		-
	X Separate basis Consolidated basis Both consolidated and separate basis		· .	
ŧ	Were the organization's financial statements audited by an independent accountant?		2 b	X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separal basis, consolidated basis, or both	e	:	
	Separate basis Consolidated basis Both consolidated and separate basis		1	ļ
•	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	ie audit,	2 c X	
	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 Audit Act and OMB Circular A-133?	Single 	3a,	X_
t	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits	red audit	3 b	
BAA			Form 990	(2018)
				· ·-

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

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545 0047

2018

Open to Public Inspection

Name o	I the organization				Employer identi	fication number
ST.	THOMAS SWIMMING ASSOCIAT	ION			66-04263	307
Part	I Reason for Public Charity Statu	s (All organizati	ons must compl	ete this pa	rt.) See instructions.	
The or	ganization is not a private foundation bed	ause it is: (For lin	es 1 through 12, ch	eck only one	box)	
1	A church, convention of churches, or a	association of chur	ches described in s	ection 170/b	Y1YAYD.	~ 1
2	A school described in section 170(b)(1			-		F) T
3	A hospital or a cooperative hospital se		•	•	•	
4	A medical research organization oper	-				iter the hospital's
-	name, city, and state			. -	· · · · · · · · · · · · · · · · ·	
5	An organization operated for the bene section 170(b)(1)(A)(iv). (Complete Po	efit of a college or (art II.)	university owned or	operated by	a governmental unit des	scribed in
6	A federal, state, or local government	or governmental u	nit described in sec	tion 170(b)(1	χΑχν) .	
7	An organization that normally receive in section 170(b)(1)(A)(vi). (Complete	s a substantial par Part II.)	rt of its support from	m a governm	ental unit or from the ge	neral public described
8	A community trust described in section	n 170(b)(1)(A)(vi).	(Complete Part II)			
9	An agricultural research organization or university or a non-land-grant colle university					
10	An organization that normally receive from activities related to its exempt furivestment income and unrelated bus June 30, 1975. See section 509(a)(2).	inctions—subject to iness taxable inco	o certain exceptions me (less section 51	s, and (2) no	more than 33-1/3% of its	s support from gross
11	An organization organized and operat	• •	•	. See sectio	n 509(a)(4).	
12	An organization organized and operat or more publicly supported organization lines 12a through 12d that describes to	ons described in se	ection 509(a)(1) or s	section 509(a	a)(2). See section 509(a)(3	the purposes of one 3). Check the box in
а	Type I. A supporting organization oper organization(s) the power to regularly complete Part IV, Sections A and B.	rated, supervised.	or controlled by its	supported o	rganization(s), typically t	oy giving the supported ganization You must
b	Type II. A supporting organization sup management of the supporting organi must complete Part IV, Sections A an	zation vested in th	ed in connection wi e same persons tha	ith its suppo at control or	rted organization(s), by h manage the supported o	aving control or rganization(s) You
С	Type III functionally integrated. A support organization(s) (see instructions). You	porting organization in the property of the pr	on operated in conr art IV, Sections A,	ection with, D, and E .	and functionally integrat	ed with, its supported
d	Type III non-functionally integrated. A functionally integrated. The organizationstructions). You must complete Part	on generally must	satisfy a distribution	connection v on requireme	with its supported organizent and an attentiveness	ration(s) that is not requirement (see
е	Check this box if the organization receintegrated, or Type III non-functionally	eived a written dete r integrated suppor	ermination from the rting organization.	RS that it i	s a Type I, Type II, Type	III functionally
f	Enter the number of supported organization	ons .				
g	Provide the following information about the	ne supported organ	nization(s).			
(1)	Name of supported organization (! (de	Type of organization scribed on lines 1-10 ve (see instructions))	(iv) Is the organization is in your govern document?	ing	(vi) Amount of other support (see instructions)
				Yes N	-	
		L		103 11		
		!	į			
(A)						
(B)				·		
(C)						1
(D)				ļ.		
						
(E)				+		***** ***
Total					0	0.

66-0426307

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.)

Sec	ction A. Public Support			or process and may			
Cale	endar year (or fiscal year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Oo not include any 'unusual grants.')	100,394.	50,725	125,025.	71,094_;	196,461.	543,699.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	, 200,031,		. 1 <u>201</u> 023.	- 11,021-,	1207 101.	Q.
3	The value of services or facilities furnished by a governmental unit to the organization without charge	Ĺ -,				-	0.
4	Total. Add lines 1 through 3	100,394.	50,725.	125,025.	71,094.	196,461.	543,699.
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).	,	, , , , , , , , , , , , , , , , , , , ,		4		<u> 135,5</u> 35.
6	Public support. Subtract line 5 from line 4		*				408,164.
Sec	tion B. Total Support	_			<u></u>		
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	100,394.	50,725.	125,025.	71,094.	196,461.	543,699.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.	41.	38.	203.	110	275.	667.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	,					0.
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI	214 241	204 246	217 605	150 505	00.124	070 011
11	Total support. Add lines 7	214,241.	204,346.	217,695.	152,595.	90,134.	879,011.
12	through 10	ii				12	1,423,377. 83,821.
13	First five years. If the Form 990 i organization, check this box and	s for the organizati	-	third, fourth, or fi	fth tax year as a se	, ,	
Sec	tion C. Computation of Pu	blic Support F	Percentage				
14	Public support percentage for 20					14	28.68 %
15	Public support percentage from 2	2017 Schedule A, P	art II, line 14			15	24.41 %
16a	33-1/3% support test—2018. If the and stop here. The organization of						box -
b	33-1/3% support test—2017. If the and stop here. The organization	e organization did i qualifies as a publ	not check a box or icly supported org	n line 13 or 16a, a anization	nd line 15 is 33-1/3		
17a	10%-facts-and-circumstances tes or more, and if the organization r the organization meets the 'facts	neets the 'facts-an	d-circumstances'	test, check this bo	x and stop here. E	xolain in Part VI h	ow ► <u>X</u>
	10%-facts-and-circumstances ter or more, and if the organization r organization meets the 'facts-and	neets the 'facts-an I-circumstances' te	d-circumstances' ist. The organization	lest, check this bo on qualifies as a p	x and stop here. E sublicly supported	xplain in Part VI h organization	ow the
18	Private foundation. If the organiz	ation did not check	a box on line 13,	16a, 16b, 17a, or	17b, check this bo	x and see instructi	ons -
BAA					Sch	edule A (Form 990	or 990-EZ) 2018

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)

Sec	tion A. Public Support	sto nated below, p	icase complete i	····				· · · · · · · · · · · · · · · · · · ·
· —		(a) 2014	(h) 2015	(c) 2016	(d) 2017	; (e) 2018	·	(f) Total
talend 1	lar year (or fiscal year beginning in) > Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants')	(a) 2014	(b) 2015	(0) 2010	(a) 2017	(e) 2018	'	ty iotai
2	any unusual grants) 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					!	,7	
3	Gross receipts from activities that are not an unrelated trade or business under section 513	,				. 		•
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf			-	,			
5	The value of services or facilities furnished by a governmental unit to the organization without charge	·····					1-	
	Total. Add lines 1 through 5					1		
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.	,				,		_
c	Add lines 7a and 7b.			1				
8	Public support. (Subtract line 7c from ne 6.).		,					
Sec	tion B. Total Support				``	·		
Calent	dar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	3	(f) Total
9	Amounts from line 6							_
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		/					
_	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b.	/				· · · ·		· ·
11	Net income from unrelated business act vities not included in I ne 10b, whether or not the business s regular y carried on	<u> </u>	-			1 '		•••
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)			. , -			` .	•
13	Total support. (Add lines 9, 10c, 11, and 12)					1	`	
14	First five years. If the Form 990 is organization, check this box and	for the organizat	ion's first, second	third, fourth, or f	fifth tax year as a	section 501(c)(3) ¹	
Sec	tion C. Computation of Pu	blic Support I	Percentage					i,
15	Public support percentage for 201	18 (line 8, column	(f), divided by line	: 13, column (f)).			15	, , ,
	Public support percentage from 2				. <u> </u>		16	\
	ion D. Computation of Investi							
17	Investment income percentage fo			by line 13, colum	nn (f))		17	7
18	Investment income percentage fro	om 2017 Schedule	A, Part III, line 1	7,		,	18	
	33-1/3% support tests-2018. If this not more than 33-1/3%, check	this box and stop	here. The organiza	ation qualifies as	a publicly suppor	ted organizat	ion	
b	33-1/3% support tests—2017. If the line 18 is not more than 33-1/3%,	ne organization did , check this box ar	i not check a box on the contract of the contr	on line 14 or line organization quali	19a, and line 16 i ifies as a publicly	is more than supported or	33-1/39 gan za!	6, and tion ►
20	Private foundation. If the organization							

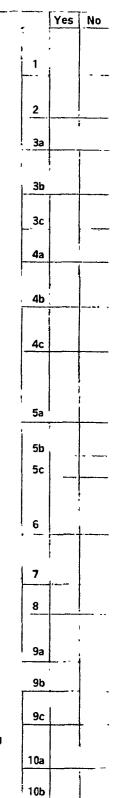
Rart IVa Supporting Organizations

(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 (as 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.)



Sch	edule A (Form 990 or 990-EZ) 2018 ST. THOMAS SWIMMING ASSOCIATION 66-04263	07	F	age 5
Pa	rt IV 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	,	
1	b A family member of a person described in (a) above?	116	- !	
	A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		-
Sec	tion B. Type I Supporting Organizations			
_			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	tion 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		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard	3		
Sec	tion 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 instruction	ns).		
а	The organization satisfied the Activities Test. Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	struction	is).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
			163	100
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2 b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	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		
BAA	TEF ADAPA 08/07.18 Schedule A (Form 9/	90 or 99	0-EZ)	2018

| Part 以 | Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization	on Nov. s must co	20, 1970 (explain in Pa omplete Sections A thro	irt VI) See ough E
Sec	tion A — Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	[1'	•	
2	Recoveries of prior-year distributions	2	•	!
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		,
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		· -
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8 ,		
Sec	tion B — Minimum Asset Amount		(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).			<u>i</u>
a	Average monthly value of securities	1a		<u>i</u>
L.	Average monthly cash balances	1b		1.
	Fair market value of other non-exempt-use assets	1c		
C	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		- <u> </u>
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		1
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	ت شده بن	,
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 inte	grated Ty	pe III supporting organ	nization

Part V Type III Non-Functionally Integrated 509(a)(3) Suppor		continued)	26307 Page
Section D — Distributions	ting Organizations (Johnmaed)	Current Year
Amounts paid to supported organizations to accomplish exempt purpose.	00505		- Ourient Teat
2 Amounts paid to perform activity that directly furthers exempt purpo		zations,	-
In excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supposes of supposes.	poorted organizations	· ·	
Amounts paid to acquire exempt-use assets	photed digatizations		manually in states in some wife. These
5 Qualified set-aside amounts (pr or IRS approval required)			
6 Other distributions (describe in Part VI) See instructions			· · ·
7 Total annual distributions. Add lines 1 through 6.	and a second to the		-
8 Distributions to attentive supported organizations to which the organ in Part VI). See instructions	lization is responsive (pr	ovide details	and the second s
9 Distributable amount for 2018 from Section C, line 6			-
10 Line 8 amount divided by line 9 amount			
Section E – Distribution Allocations (see instructions)	Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			·
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required — explain in Part V ₂). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014.			•
c From 2015			
d From 2016	,		
e From 2017 , ,			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.	<u> </u>	50: 3: 12: 3	
4 Distributions for 2018 from Section D, line 7:			
a Applied to underdistributions of prior years		1	
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4	·	·	
5 Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7.			
a Excess from 2014 .	-		<u> </u>
b Excess from 2015	J. Comments		
c Excess from 2016			
d Excess from 2017			
e Excess from 2018	<u>i</u>	i .	<u>i</u>
BAA		Schedule A (For	m 990 or 990-EZ) 2018

TEEA0407L 09/20/18

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.)

PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE	 2018	_	2017	 2016	_	2015	 2014
SWIM PROGRAM REVENUE FUNDRAISING EVENTS	\$ 90,134.	\$	81,210. 71,385.	\$ 112,957. 104.738.	\$	113,269. 91.077	\$ 118,540. 95,701.
TOTAL	\$ 90,134.	\$		\$ 217,695.	\$	204,346.	\$ 214,241.

PART II, LINE 17B - 10% FACTS AND CIRCUMSTANCES TEST - PRIOR YEAR

THE ORGANIZATION MEETS THE "FACTS AND CIRCUMSTANCES" TEST BY THE FOLLOWING:

- 1. ORGANIZATION MAINTANS A CONTINUOUS AND BONA FIDE PROGRAM FOR SOLICITATION OF FUNDS FROM THE GENERAL PUBLIC, COMMUNITY, MEMBERSHIP GROUP, AND THE V.I. GOVERNMENT.
- 2. ORGANIZATION PROVIDES FACILITIES AND SERVICES DIRECTLY FOR THE BENEFIT OF THE GENERAL PUBLIC ON A CONTINUING BASIS (USE OF SWIMMING POOL & SWIMING LESSONS).
- 3. ORGANIZATION OFFERS MEMBERSHIP TO THE COMMUNITY AT RATES DESIGNED TO MAKE MEMBERSHIP AVAILABLE TO A BROAD CROSS-SECTION OF THE PUBLIC.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545 0047

Open to Public Inspection Employer identification number

THOMAS SWIMMING ASSOCIATION

	DI. INDEMO DWIMING ADSUCT.			66-042630) /
a	Complete if the organization answ	r Advised Funds of wered 'Yes' on For	o <mark>r Other Similar Fui</mark> m 990, Part IV, line	nds or Accounts. 6.	
		(a) Donor ad	lvised funds	(b) Funds and other	accounts
1	Total number at end of year .				
!	Aggregate value of contributions to (during year).				
	Aggregate value of grants from (during year)				
	Aggregate value at end of year				
i	Did the organization inform all donors and dono are the organization's property, subject to the or	r advisors in writing tha rganization's exclusive l	t the assets held in donor egal control?	advised fundsYe	s No
;	Did the organization inform all grantees, donors for charitable purposes and not for the benefit o impermissible private benefit?	, and donor advisors in If the donor or donor adv		- '	
_					<u> </u>
1	rt II Conservation Easements.	worod 'Vos' on For	m 000 Part IV lina	7	
	Complete if the organization answ Purpose(s) of conservation easements held by the			<u>/.</u>	
					4
	Preservation of land for public use (e.g., rec	reation or education)	<u></u>	a historically important lar	
	Protection of natural habitat		Preservation of	a certified historic structure	•
	Preservation of open space				
	Complete lines 2a through 2d if the organization last day of the tax year	held a qualified conser	vation contribution in the	form of a conservation eas	ement on the
				Held at the End	of the Tax Ye
	Total number of conservation easements			2 a	
1	Tota [*] acreage restricted by conservation easeme	ents		2 b	
	: Number of conservation easements on a certifie	d historic structure inclu	uded in (a)	2c	
	Number of conservation easements included in structure listed in the National Register	(c) acquired after 7/25/0	6, and not on a historic	2 d	
	Number of conservation easements modified, tratax year ▶	ansferred, released, exti	inguished, or terminated t	by the organization during t	he
	Number of states where property subject to cons	ervation easement is lo	cated >		
	Does the organization have a written policy rega and enforcement of the conservation easements	•	toring, inspection, handli	ng of violations, Ye	s No
	Staff and volunteer hours devoted to monitoring,			conservation easements	during the yea
	Amount of expenses incurred in monitoring, insp	secting, handling of viol	ations, and enforcing con	servation easements durin	g the year
	Does each conservation easement reported on li and section 170(h)(4)(B)(ii)?	ine 2(d) above satisfy th	ne requirements of section	170(h)(4)(B)(i) Ye:	s No
	in Part XIII, describe how the organization repor include, if applicable, the text of the footnote to conservation easements	ts conservation easeme the organization's finan	ents in its revenue and ex icial statements that desc	pense statement, and bala ribes the organization's ac	nce sheet, an counting for
ľ	t III Organizations Maintaining Collection Complete if the organization answ	ns of Art, Historical Twered 'Yes' on Form	Treasures, or Other Si m 990, Part IV, line	milar Assets. 8.	
1	alf the organization elected, as permitted under S art, historical treasures, or other similar assets in Part XIII, the text of the footnote to its financia	held for public exhibition	n, education, or research i	statement and balance she in furtherance of public ser	et works of vice, provide,
	If the organization elected, as permitted under S historical treasures, or other similar assets held following amounts relating to these items:	FAS 116 (ASC 958), to for public exhibition, ed	report in its revenue stat lucation, or research in fu	ement and balance sheet v irtherance of public service	vorks of art, , provide the
	(i) Revenue included on Form 990, Part VIII, lin	ie 1			
	(ii) Assets included in Form 990, Part X				
	If the organization received or held works of art,	historical treasures, or		nancial gain, provide the fo	ollowing
	amounts required to be reported under SEAS 11	6 (ASC 958) relation to	these items:		
	amounts required to be reported under SFAS 110 Revenue included on Form 990, Part VIII, line 1.	6 (ASC 958) relating to	these items:		

	THOMAS SV					-0426307	
Part III Organizations Maintaini	ing Collectio	ns of Art	, Historicai	reasures, or Oth	er Similar Assets	(continuea)	
3 'Using the organization's acquisition items (check all that apply):	on, accession	and other		-	-	int use of its c	ollection
a Public exhibition			d Loan	or exchange progran	าร		
b Scholarly research			e Other				
c Preservation for future general	ations						
4 Provide a description of the organ Part XIII	nization's colle	ections and	explain how	they further the orga	nization's exempt pu	irpose in	
5 During the year, did the organizat to be sold to raise funds rather th	an to be main	tained as p	part of the org	anization's collection	<u>1?</u>	Yes	
Part IV Escrow and Custodial A	amount on	Form 99	ete if the or 90, Part X,	ganization answe line 21.	rea 'Yes' on Form	1 990, Part I	V,
1 a is the organization an agent, trus on Form 990, Part X?	tee, custodian	or other in	itermediary fo	r contributions or oth	ner assets not includ	ed . Yes	s No
b If 'Yes,' explain the arrangement							
						Amoun	it
c Beginning balance.				•	. 1c		
d Additions during the year.					. 1d		
e Distributions during the year					. 1e		412
f Ending balance					16]		
2a Did the organization include an ai	mount on Forn	n 990, Pari	t X, line 21, fo	or escrow or custodia	I account liability?.	Yes	s No
b If 'Yes,' explain the arrangement	in Part XIII C	neck here i	f the explanat	tion has been provide	ed on Part XIII 🔒 👝		
Part V Endowment Funds. Com	nolete if the	organiza	tion answer	ed 'Yes' on Form	990, Part IV, line	: 10	
	(a) Current	year	(b) Prior year	(c) Two years	back (d) Three yea	rs back (e)	Four years back
1 a Beginning of year balance		T					
b Contributions							
c Net investment earnings, gains, and losses							
d Grants or scholarships .		ì					
e Other expenditures for facilities and programs	1						
f Administrative expenses .		. }			· · · · · · · · · · · · · · · · · · ·		
g End of year balance .						· · · · · · · · · · · · · · · · · · ·	
Provide the estimated percentage	of the current	year end	balance (line	1g, column (a)) held	as		
a Board designated or quasi-endow	ment 🟲		ક				
b Permanent endowment >	ૢ						
c Temporarily restricted endowment	1 -	ş	è				
The percentages on lines 2a, 2b,	and 2c should	equal 100	%.				
3a Are there endowment funds not in	the persons	an of the o	rannization th	at are hold and adm	inistered for the		
organization by:	i ilie possessii	on or the or	gariization ti	at are new and adm	mistered for the		Yes No
(i) unrelated organizations .		•				. 3a(i)	
(ii) related organizations						. 3a(ii)	
b If 'Yes' on line 3a(ii), are the relat	ted organizatio	ons listed a	s required on	Schedule R? .		. '3b	
4 Describe in Part XIII the intended	uses of the or	ganization	's endowment	funds	_		
Part VI Land, Buildings, and							
Complete if the organization			on Form 99	0. Part IV. line 1	1a. See Form 990), Part X, lir	ne 10.
Description of property	- All-	(a) Cost or	other basis	(b) Cost or other basis (other)	(c) Accumula depreciatio	ted (d)	Book value
1a Land		(
b Buildings	·			797,380	122,6	570.	674,710.
c Leasehold improvements.				20,590		587.	19,903.
d Equipment				23,794			5,850.
e Other				7,975		128.	2,847.
Total. Add lines 1a through 1e. (Column	(d) must equa	al Form 99	0. Part X. col			. ▶	703,310.
BAA	(2)					Schedule D (Form 990) 2018

BAA

Schedule D (Form 990) 2018 ST. THOMAS SWIMMI	NG ASSOCIATION	66-042	26307 Page 3
Part VII Investments - Other Securities.		N/A	
Complete if the organization answered '\	<mark>es' on Form 990, Pa</mark>	art IV, line 11b. See Form 990, Pai	t X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of	-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			-
(3) Other			
(A)	 		
(B)			 -
(C)			
(D)	· 		
(E)	• •		
(F)			
(G)	·		
(H)			
(1)			
Total (Column (b) must equal Form 990, Part X, column (B) line 12)	•		
Part VIII Investments - Program Related.		N/A	
Complete if the organization answered 'Y		art IV, line 11c. See Form 990, Par	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)		<u>)</u>	
(2)			
(3)			· · · · · · · · · · · · · · · · · · ·
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)	· · · · · · · · · · · · · · · · · · ·		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.).			
Part IX Other Assets. Complete if the organization answered 'Y	N/A es' on Form 990. Pa	art IV. Jine 11d. See Form 990. Par	t X. line 15.
	scription		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7) (8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B,	line 15)	-	
Part X Other Liabilities.			
Complete if the organization answered 'Yes' on	Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	i.
(a) Description of liability	(b) Book value		·
(1) Federal income taxes	!	_ 1	
(2)			
(3)		, İ	
(4)			
(5)			
(6)]	
(7)			
(8)	· ·		
(9)			
(10)	-		
(11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	-		
2. Liability for uncertain tax positions. In Part XIII, provide the text of the for		ancial statements that reports the organization's li	ability for uncertain
tax positions under FIN 48 (ASC 740) Check here if the text of the footnote h			<u> </u>
RAA	TEEA33031 10/10/18	Schei	dule D (Form 990) 2018

Schedule D (Form 990) 2018 ST. THOMAS SWIMMING ASSOCIATION	66-0426307_	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.	N/A	
. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	. 1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII)		
e Add lines 2a through 2d	. 2e	
3 Subtract line 2e from line 1	. 3	
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	4c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	. 5	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	n. N/A	
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		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII)	1	
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	;	
b Other (Describe in Part XIII)	a-l	
c Add lines 4a and 4b	4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Part XIII Supplemental Information.		
r art Ain Juppiemental 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) 2018

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.

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Triasury Internal Revenue Service Name of the organization

ST. THOMAS SWIMMING ASSOCIATION

Employer identification number

66-0426307

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

FORM 990 WAS REVIEWED BY THE BOARD MEMBERS OF THE ORGANIZATION BEFORE FILING.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

CONFLICT OF INTEREST ISSUES ARE DISCUSSED AND QUESTIONED DURING BOARD OF DIRECTOR MEETINGS.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

NO OTHER DOCUMENTS AVAILABLE TO THE PUBLIC.