

**990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2018**Open to Public  
Inspection**A** For the 2018 calendar year, or tax year beginning , and ending**B** Check if applicable:☐ Address change☐ Name change☐ Initial return☐ Final return/  
terminated☐ Amended return☐ Application pending**C** Name of organization**Center for Coastal Studies, Inc.**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

**5 Holway Avenue**

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

**Provincetown****MA 02657****D** Employer identification number**04-2609788****E** Telephone number**508-487-3622****G** Gross receipts \$ **3,604,413****F** Name and address of principal officer:**Richard Delaney****5 Holway Avenue****Provincetown****MA 02657****H(a)** Is this a group return for subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: **www.coastalstudies.org****H(c)** Group exemption number ▶**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **1977****M** State of legal domicile: **MA****Part I Summary**

Activities &amp; Governance

**1** Briefly describe the organization's mission or most significant activities:**Scientific marine research, and public education and policy to protect and conserve coastal and ocean resources.****2** Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.**3** Number of voting members of the governing body (Part VI, line 1a)**3 24****4** Number of independent voting members of the governing body (Part VI, line 1b)**4 24****5** Total number of individuals employed in calendar year 2018 (Part V, line 2a)**5 50****6** Total number of volunteers (estimate if necessary)**6 0****7a** Total unrelated business revenue from Part VIII, column (C), line 12**7a 0****b** Net unrelated business taxable income from Form 990-T, line 38**7b 0**

Revenue

**8** Contributions and grants (Part VIII, line 1h)

Prior Year

**3,261,308**

Current Year

**3,225,167****9** Program service revenue (Part VIII, line 2g)**29,414****34,082****10** Investment income (Part VIII, column (A), lines 3, 4, and 7d)**9,685****-13,370****11** Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)**173,408****155,403****12** Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)**3,473,815****3,401,282**

Expenses

**13** Grants and similar amounts paid (Part IX, column (A), lines 1-3)**0****14** Benefits paid to or for members (Part IX, column (A), line 4)**0****15** Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)**2,252,536****2,273,111****16a** Professional fundraising fees (Part IX, column (A), line 11e)**0****b** Total fundraising expenses (Part IX, column (D), line 25) ▶ **340,373****17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)**1,333,964****1,167,097****18** Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)**3,586,500****3,440,208****19** Revenue less expenses. Subtract line 18 from line 12**-112,685****-38,926**

Net Assets or Fund Balances

**20** Total assets (Part X, line 16)

Beginning of Current Year

**5,383,085**

End of Year

**5,439,472****21** Total liabilities (Part X, line 26)**529,079****637,118****22** Net assets or fund balances. Subtract line 21 from line 20**4,854,006****4,802,354****Part II Signature Block**

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

**Sign Here**

Signature of officer

**Richard Delaney****President & CEO**

Type or print name and title

Date

**4/29/19****Paid**

Print/Type preparer's name

**Michael J Walsh, CPA**

Preparer's signature

**Michael J Walsh, CPA**

Date

**04/22/19**Check ☐ if PTIN

self-employed

**P00239736****Preparer Use Only**

Firm's name ▶

**Sanders, Walsh & Eaton, LLC**

Firm's EIN ▶

**04-3128198**

Firm's address ▶

**W. Chatham, MA 02669**

Phone no.

**508-945-0031**

May the IRS discuss this return with the preparer shown above? (see instructions)

☐ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2018)

DAA

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:**Scientific marine research, and public education and policy to protect and conserve coastal and ocean resources.****2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

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

If "Yes," describe these changes on Schedule O.

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code: ) (Expenses \$ **2,724,959** including grants of \$ ) (Revenue \$ **176,115** )  
**Education, disentanglement, equipment, marine and fisheries operations.****4b** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )  
**N/A****4c** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )  
**N/A****4d** Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses ► **2,724,959**

**Part IV Checklist of Required Schedules**

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	<b>X</b>	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	<b>X</b>	
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		<b>X</b>
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	<b>X</b>	
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		<b>X</b>
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		<b>X</b>
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		<b>X</b>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		<b>X</b>
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		<b>X</b>
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	<b>X</b>	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	<b>X</b>	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		<b>X</b>
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		<b>X</b>
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		<b>X</b>
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<b>X</b>	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		<b>X</b>
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	<b>X</b>	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		<b>X</b>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		<b>X</b>
14a Did the organization maintain an office, employees, or agents outside of the United States?		<b>X</b>
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		<b>X</b>
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		<b>X</b>
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		<b>X</b>
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)		<b>X</b>
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	<b>X</b>	
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		<b>X</b>
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		<b>X</b>
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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		<b>X</b>

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
<b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III</i>		<b>X</b>
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	<b>X</b>	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		<b>X</b>
<b>24b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>24c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>24d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		<b>X</b>
<b>25b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		<b>X</b>
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		<b>X</b>
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		<b>X</b>
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>28a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		<b>X</b>
<b>28b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		<b>X</b>
<b>28c</b> 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? <i>If "Yes," complete Schedule L, Part IV</i>		<b>X</b>
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	<b>X</b>	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		<b>X</b>
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		<b>X</b>
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		<b>X</b>
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		<b>X</b>
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		<b>X</b>
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?		<b>X</b>
<b>35b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		<b>X</b>
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		<b>X</b>
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	<b>X</b>	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
<b>1b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
<b>1c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		<b>X</b>

**Part V** Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
<b>2a</b> 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	<b>2a</b> 50		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<b>2b</b>	X	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>		X
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	<b>3b</b>		
<b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<b>4a</b>		X
<b>b</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).			
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>		X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>		X
<b>c</b> If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>		
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	<b>6a</b>		X
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>			
<b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	<b>7a</b>		X
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>		
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>		X
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>		X
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>		X
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>		
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>		X
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>		
<b>9 Sponsoring organizations maintaining donor advised funds.</b>			
<b>a</b> Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>		
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>		
<b>10 Section 501(c)(7) organizations.</b> Enter:			
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>		
<b>11 Section 501(c)(12) organizations.</b> Enter:			
<b>a</b> Gross income from members or shareholders	<b>11a</b>		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>		
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>		
<b>b</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	<b>13b</b>		
<b>c</b> Enter the amount of reserves on hand	<b>13c</b>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>		X
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	<b>14b</b>		
<b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	<b>15</b>		X
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	<b>16</b>		X

**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 ☒

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	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>24</b>	
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent	<b>24</b>	
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	<b>2</b>	<b>X</b>
<b>3</b>	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?	<b>3</b>	<b>X</b>
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<b>4</b>	<b>X</b>
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?	<b>5</b>	<b>X</b>
<b>6</b>	Did the organization have members or stockholders?	<b>6</b>	<b>X</b>
<b>7a</b>	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?	<b>7a</b>	<b>X</b>
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7b</b>	<b>X</b>
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	<b>8a</b>	<b>X</b>
<b>b</b>	Each committee with authority to act on behalf of the governing body?	<b>8b</b>	<b>X</b>
<b>9</b>	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	<b>9</b>	<b>X</b>

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?	<b>10a</b>	<b>X</b>
<b>b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	<b>10b</b>	
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<b>11a</b>	<b>X</b>
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	<b>12a</b>	<b>X</b>
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>12b</b>	<b>X</b>
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<b>12c</b>	<b>X</b>
<b>13</b>	Did the organization have a written whistleblower policy?	<b>13</b>	<b>X</b>
<b>14</b>	Did the organization have a written document retention and destruction policy?	<b>14</b>	<b>X</b>
<b>15</b>	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?		
<b>a</b>	The organization's CEO, Executive Director, or top management official	<b>15a</b>	<b>X</b>
<b>b</b>	Other officers or key employees of the organization	<b>15b</b>	<b>X</b>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	<b>16a</b>	<b>X</b>
<b>b</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?	<b>16b</b>	

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed ► **MA**
- 18** 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.  
☐ Own website ☒ Another's website ☒ Upon request ☐ Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records ►

**Richard Delaney****5 Holway Ave.****Provincetown****MA 02657****508-487-3622**

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

- List 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 employee."

- 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.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) <b>Richard Delaney</b>	40.00									
<b>President &amp; CEO</b>	0.00			X				162,000	0	8,163
(2) <b>Robert Samuelson</b>	2.00									
<b>Treasurer</b>	0.00	X		X				0	0	0
(3) <b>Elizabeth Frankel</b>	1.00									
<b>Clerk</b>	0.00	X		X				0	0	0
(4) <b>William Bonn</b>	1.00									
<b>Chair</b>	0.00	X		X				0	0	0
(5) <b>Jeanne Leszczynski</b>	1.00									
<b>Vice Chair</b>	0.00	X						0	0	0
(6) <b>Stephen Daniel</b>	1.00									
<b>Director</b>	0.00	X						0	0	0
(7) <b>Shawn Delude</b>	1.00									
<b>Director</b>	0.00	X						0	0	0
(8) <b>John Murphy, Jr.</b>	1.00									
<b>Director</b>	0.00	X						0	0	0
(9) <b>Roy F. Coppedge, III</b>	1.00									
<b>Director</b>	0.00	X						0	0	0
(10) <b>Lori Meads</b>	1.00									
<b>Director</b>	0.00	X						0	0	0
(11) <b>Dan Wolf</b>	1.00									
<b>Director</b>	0.00	X						0	0	0

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) Edward Reilly	1.00									
Director	0.00	X						0	0	0
(13) Alix Ritchie	1.00									
Director	0.00	X						0	0	0
(14) John H. Lippincott	1.00									
Director	0.00	X						0	0	0
(15) Linda B. Miller, Ph.D.	1.00									
Director	0.00	X						0	0	0
(16) Jeanne McNett	1.00									
Director	0.00	X						0	0	0
(17) Emily Flax	1.00									
Director	0.00	X						0	0	0
(18) Carol Green	1.00									
Director	0.00	X						0	0	0
(19) John King	1.00									
Director	0.00	X						0	0	0
1b Sub-total								162,000		8,163
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								162,000		8,163

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

3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

	Yes	No
3		X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

	Yes	No
4	X	

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
5		X

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
Avwatch	Aircraft	141,453
Nauset Marine	Boat repair	137,034

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



**Part VIII Statement of Revenue**Check if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	1a Federated campaigns	1a				
	b Membership dues	1b	72,337			
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	868,062			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2,284,768			
	g Noncash contributions included in lines 1a-1f: \$		52,511			
	h Total. Add lines 1a-1f		3,225,167			
<b>Program Service Revenue</b>	2a Other earned income	Busn. Code 611710	34,082	34,082		
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		34,082			
	<b>Other Revenue</b>	3 Investment income (including dividends, interest, and other similar amounts)		4,408		
4 Income from investment of tax-exempt bond proceeds						
5 Royalties						
6a Gross rents		(i) Real (ii) Personal				
b Less: rental exps.						
c Rental inc. or (loss)						
d Net rental income or (loss)						
7a Gross amount from sales of assets other than inventory		(i) Securities (ii) Other	9,776			
b Less: cost or other basis & sales exps.			27,554			
c Gain or (loss)			-17,778			
d Net gain or (loss)			-17,778	-17,778		
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		a	139,155			
b Less: direct expenses		b	60,070			
c Net income or (loss) from fundraising events			79,085			
9a Gross income from gaming activities. See Part IV, line 19		a				
b Less: direct expenses		b				
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances		a	191,825			
b Less: cost of goods sold	b	115,507				
c Net income or (loss) from sales of inventory		76,318	76,318			
<b>Miscellaneous Revenue</b>	11a	Busn. Code				
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d					
	12 Total revenue. See instructions.		3,401,282	92,622	0	4,408

Form 990 (2018)

Center for Coastal Studies, Inc.

04-2609788

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**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
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				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,052,486	1,528,554	272,971	250,961
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	220,625	158,185	30,661	31,779
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	8,974	4,123	4,731	120
13 Office expenses	54,451	18,170	7,133	29,148
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	9,950	9,505	345	100
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	37,114	34,722	2,334	58
20 Interest	26,198	22,115	2,090	1,993
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	207,445	194,949	12,496	
23 Insurance	103,800	97,095	4,198	2,507
24 Other expenses. Itemize expenses not 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.)				
a Program operations	323,256	323,076	180	
b Consulting fees	186,949	175,599	11,350	
c Bad debt	37,101	37,101		
d Utilities	33,926	26,766	3,660	3,500
e All other expenses	137,933	94,999	22,727	20,207
25 Total functional expenses. Add lines 1 through 24e	3,440,208	2,724,959	374,876	340,373
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**Check if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash—non-interest bearing	714,595	1	483,657
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	374,604	4	498,166
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	9,858	8	28,202
	9 Prepaid expenses and deferred charges	4,019	9	48,409
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 6,556,680		
	b Less: accumulated depreciation	10b 2,597,514	3,858,361	10c 3,959,166
	11 Investments—publicly traded securities	171,648	11	171,872
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	250,000	15	250,000
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	5,383,085	16	5,439,472	
<b>Liabilities</b>	17 Accounts payable and accrued expenses	111,517	17	96,247
	18 Grants payable		18	
	19 Deferred revenue		19	127,097
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	383,550	23	367,649
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	34,012	25	46,125
	26 <b>Total liabilities.</b> Add lines 17 through 25	529,079	26	637,118
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	4,512,741	27	4,638,428
	28 Temporarily restricted net assets	236,879	28	65,179
	29 Permanently restricted net assets	104,386	29	98,747
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 <b>Total net assets or fund balances</b>	4,854,006	33	4,802,354	
34 <b>Total liabilities and net assets/fund balances</b>	5,383,085	34	5,439,472	

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☐

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	<b>3,401,282</b>
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	<b>3,440,208</b>
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	<b>-38,926</b>
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	<b>4,854,006</b>
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	<b>-12,726</b>
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	<b>4,802,354</b>

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☐**1** Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other \_\_\_\_\_

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

**2a** Were the organization's financial statements compiled or reviewed by an independent accountant?

If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:

☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis**b** Were the organization's financial statements audited by an independent accountant?

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:

☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis**c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.**3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
<b>2a</b>		<b>X</b>
<b>2b</b>	<b>X</b>	
<b>2c</b>	<b>X</b>	
<b>3a</b>	<b>X</b>	
<b>3b</b>	<b>X</b>	

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(20) Stacey Smith	1.00									
Director	0.00	X						0	0	0
(21) Christopher W. Clark, PhD	1.00									
Director	0.00	X						0	0	0
(22) Ed Feijo	1.00									
Director	0.00	X						0	0	0
(23) Harriet Larsen	1.00									
Director	0.00	X						0	0	0
(24) Carole Levin	1.00									
Director	0.00	X						0	0	0
(25) Andrew Young	1.00									
Director	0.00	X						0	0	0
<b>1b Sub-total</b>										
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>										

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

**3** Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

**4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

**5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		
4		
5		

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

**SCHEDULE A**  
**(Form 990 or 990-EZ)**Department of the Treasury  
Internal Revenue Service**Public Charity Status and Public Support**

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

▶ **Attach to Form 990 or Form 990-EZ.**▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2018****Open to Public  
Inspection**

Name of the organization

**Center for Coastal Studies, Inc.**

Employer identification number

**04-2609788****Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: .....
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: .....
- 10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations .....
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,838,513	3,004,259	3,974,713	3,261,308	3,225,167	16,303,960
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4</b> <b>Total.</b> Add lines 1 through 3	2,838,513	3,004,259	3,974,713	3,261,308	3,225,167	16,303,960
<b>5</b> 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)						312,754
<b>6</b> <b>Public support.</b> Subtract line 5 from line 4						15,991,206

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>7</b> Amounts from line 4	2,838,513	3,004,259	3,974,713	3,261,308	3,225,167	16,303,960
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	15,958	3,724	6,062	4,685	4,408	34,837
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>11</b> <b>Total support.</b> Add lines 7 through 10						16,338,797
<b>12</b> Gross receipts from related activities, etc. (see instructions)					12	636,722
<b>13</b> <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	97.87%
<b>15</b> Public support percentage from 2017 Schedule A, Part II, line 14	<b>15</b>	99.63%
<b>16a</b> <b>33 1/3% support test—2018.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>		
<b>b</b> <b>33 1/3% support test—2017.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
<b>17a</b> <b>10%-facts-and-circumstances test—2018.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
<b>b</b> <b>10%-facts-and-circumstances test—2017.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
<b>18</b> <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> 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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6</b> <b>Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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						
<b>c</b> Add lines 7a and 7b						
<b>8</b> <b>Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13</b> <b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
<b>14</b> <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> <span style="float: right;">► <input type="checkbox"/></span>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2017 Schedule A, Part III, line 15	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2017 Schedule A, Part III, line 17	<b>18</b>	%

**19a** **33 1/3% support tests—2018.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

**b** **33 1/3% support tests—2017.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

**20** **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐



**Part IV 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**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
<b>b</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 <b>Part VI</b> when and how the organization made the determination.		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.		
<b>4a</b> 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>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
<b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
<b>b</b> <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c</b> <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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 <b>Part VI</b> .		
<b>7</b> 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).		
<b>8</b> 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).		
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .		
<b>b</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 <b>Part VI</b> .		
<b>c</b> 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 <b>Part VI</b> .		
<b>10a</b> 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>b</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.)		

**Part IV Supporting Organizations** (continued)

- 11 Has the organization accepted a gift or contribution from any of the following persons?
- a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?
- b A family member of a person described in (a) above?
- c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in **Part VI**.

	Yes	No
11a		
11b		
11c		

**Section B. Type I Supporting Organizations**

- 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.
- 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.

	Yes	No
1		
2		

**Section C. Type II Supporting Organizations**

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

	Yes	No
1		

**Section D. All Type III Supporting Organizations**

- 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?
- 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).
- 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.

	Yes	No
1		
2		
3		

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

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a ☐ The organization satisfied the Activities Test. Complete **line 2** below.
- b ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.
- c ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions).

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

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI** identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in **Part VI**.
- 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.

	Yes	No
2a		
2b		
3a		
3b		

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

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

Section 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		

  

Section 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):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d 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		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		

  

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

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

**Part V** Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year	
1	Amounts paid to supported organizations to accomplish exempt purposes		
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity		
3	Administrative expenses paid to accomplish exempt purposes of supported organizations		
4	Amounts paid to acquire exempt-use assets		
5	Qualified set-aside amounts (prior IRS approval required)		
6	Other distributions (describe in Part VI). See instructions.		
7	<b>Total annual distributions.</b> Add lines 1 through 6.		
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.		
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)	(i) 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 VI). 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 <b>Total</b> 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 <b>Remainder.</b> Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c <b>Remainder.</b> 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 <b>Excess distributions carryover to 2019.</b> Add lines 3j and 4c.			
8 <b>Breakdown of line 7:</b>			
a Excess from 2014 .....			
b Excess from 2015 .....			
c Excess from 2016 .....			
d Excess from 2017 .....			
e Excess from 2018 .....			

**Part VI**

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

**SCHEDULE C**  
**(Form 990 or 990-EZ)**Department of the Treasury  
Internal Revenue Service**Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

**2018****Open to Public  
Inspection**

▶ Complete if the organization is described below.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization

**Center for Coastal Studies, Inc.**

Employer identification number

**04-2609788****Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities")

2 Political campaign activity expenditures (see instructions)

▶ \$

3 Volunteer hours for political campaign activities (see instructions)

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

1 Enter the amount of any excise tax incurred by the organization under section 4955

▶ \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955

▶ \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

☐ Yes☐ No

4a Was a correction made?

☐ Yes☐ No

b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities

▶ \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities

▶ \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b

▶ \$

4 Did the filing organization file Form 1120-POL for this year?

☐ Yes☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990 or 990-EZ) 2018

**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

**A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

**B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying)															
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)															
<b>c</b> Total lobbying expenditures (add lines 1a and 1b)															
<b>d</b> Other exempt purpose expenditures															
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)															
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.															
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)															
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0-															
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0-															
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

**Part II-B** Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers?		<b>X</b>	
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	<b>X</b>		
<b>c</b> Media advertisements?		<b>X</b>	
<b>d</b> Mailings to members, legislators, or the public?		<b>X</b>	
<b>e</b> Publications, or published or broadcast statements?		<b>X</b>	
<b>f</b> Grants to other organizations for lobbying purposes?		<b>X</b>	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?		<b>X</b>	
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		<b>X</b>	
<b>i</b> Other activities?	<b>X</b>		10,000
<b>j</b> Total. Add lines 1c through 1i			10,000
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		<b>X</b>	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	<b>1</b>	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	<b>2</b>	
<b>3</b> Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	<b>3</b>	

**Part III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

<b>1</b> Dues, assessments and similar amounts from members	<b>1</b>	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year	<b>2a</b>	
<b>b</b> Carryover from last year	<b>2b</b>	
<b>c</b> Total	<b>2c</b>	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>3</b>	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions)	<b>5</b>	

**Part IV** Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

## Schedule C, Part II-B, Line 1

Compensation and fees paid to advisory firm for federal governmental relations, strategic guidance and advisory.



**Part IV** Supplemental Information *(continued)*

Area with horizontal dotted lines for supplemental information.

**SCHEDULE D  
(Form 990)**Department of the Treasury  
Internal Revenue Service**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2018**Open to Public  
Inspection

Name of the organization

Employer identification number

**Center for Coastal Studies, Inc.****04-2609788****Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <input type="checkbox"/> Yes <input type="checkbox"/> No		

**Part II Conservation Easements.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ .....

4 Number of states where property subject to conservation easement is located ▶ .....

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ .....

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ .....

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 .....	▶ \$ .....
(ii) Assets included in Form 990, Part X .....	▶ \$ .....

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 .....	▶ \$ .....
b Assets included in Form 990, Part X .....	▶ \$ .....

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

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

- ☐ **a** Public exhibition  
☐ **b** Scholarly research  
☐ **c** Preservation for future generations  
☐ **d** Loan or exchange programs  
☐ **e** Other

**4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

**5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

**Part IV Escrow and Custodial Arrangements.**

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

**1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

**b** If "Yes," explain the arrangement in Part XIII and complete the following table:

**c** Beginning balance

**d** Additions during the year

**e** Distributions during the year

**f** Ending balance

	Amount
<b>1c</b>	
<b>1d</b>	
<b>1e</b>	
<b>1f</b>	

**2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

**b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

**Part V Endowment Funds.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance	341,265	426,256	414,867	413,405	212,513
<b>b</b> Contributions			313,522		185,000
<b>c</b> Net investment earnings, gains, and losses	-9,046	24,001	11,484	1,462	15,892
<b>d</b> Grants or scholarships					
<b>e</b> Other expenditures for facilities and programs	168,293	108,992	313,617		
<b>f</b> Administrative expenses					
<b>g</b> End of year balance	163,926	341,265	426,256	414,867	413,405

**2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

**a** Board designated or quasi-endowment ☐ %

**b** Permanent endowment ☒ 60.00 %

**c** Temporarily restricted endowment ☒ 40.00 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

**3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations

(ii) related organizations

	Yes	No
<b>3a(i)</b>		<input checked="" type="checkbox"/>
<b>3a(ii)</b>		<input checked="" type="checkbox"/>
<b>3b</b>		

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

**4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land		499,950		499,950
<b>b</b> Buildings		4,031,248	1,123,038	2,908,210
<b>c</b> Leasehold improvements				
<b>d</b> Equipment		2,025,482	1,474,476	551,006
<b>e</b> Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				3,959,166

**Part VII Investments—Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

**Part VIII Investments—Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (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.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) <b>Accrued vacation</b>	<b>22,959</b>	
(3) <b>Capital lease</b>	<b>16,270</b>	
(4) <b>403(b) payable</b>	<b>6,803</b>	
(5) <b>Accrued state sales tax</b>	<b>93</b>	
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	<b>46,125</b>	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements		<b>1</b>	<b>3,427,879</b>
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	<b>-12,726</b>	
<b>b</b>	Donated services and use of facilities	<b>2b</b>	<b>39,323</b>	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>		
<b>e</b>	Add lines 2a through 2d		<b>2e</b>	<b>26,597</b>
<b>3</b>	Subtract line 2e from line 1		<b>3</b>	<b>3,401,282</b>
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>		
<b>c</b>	Add lines 4a and 4b		<b>4c</b>	
<b>5</b>	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		<b>5</b>	<b>3,401,282</b>

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements		<b>1</b>	<b>3,479,531</b>
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities	<b>2a</b>	<b>39,323</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>		
<b>c</b>	Other losses	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>		
<b>e</b>	Add lines 2a through 2d		<b>2e</b>	<b>39,323</b>
<b>3</b>	Subtract line 2e from line 1		<b>3</b>	<b>3,440,208</b>
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>		
<b>c</b>	Add lines 4a and 4b		<b>4c</b>	
<b>5</b>	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		<b>5</b>	<b>3,440,208</b>

**Part XIII Supplemental Information.**

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

## Part XIII Supplemental Information (continued)

**SCHEDULE G**  
**(Form 990 or 990-EZ)**

**Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No. 1545-0047

**2018**

Department of the Treasury  
Internal Revenue Service

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Open to Public Inspection

Name of the organization

**Center for Coastal Studies, Inc.**

Employer identification number

**04-2609788**

**Part I Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

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

- a** ☐ Mail solicitations **e** ☐ Solicitation of non-government grants  
**b** ☐ Internet and email solicitations **f** ☐ Solicitation of government grants  
**c** ☐ Phone solicitations **g** ☐ Special fundraising events  
**d** ☐ In-person solicitations

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

**b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
<b>Total</b>						

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

**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

	(a) Event #1 <b>Hiebert fellows</b> (event type)	(b) Event #2 <b>On-line auction</b> (event type)	(c) Other events <b>1</b> (total number)	(d) Total events (add col. (a) through col. (c))
<b>Revenue</b>				
1 Gross receipts	90,710	33,045	15,400	139,155
2 Less: Contributions				
3 Gross income (line 1 minus line 2)	90,710	33,045	15,400	139,155
<b>Direct Expenses</b>				
4 Cash prizes				
5 Noncash prizes				
6 Rent/facility costs				
7 Food and beverages	198		7,801	7,999
8 Entertainment		1,250		1,250
9 Other direct expenses	49,381	1,354	86	50,821
10 Direct expense summary. Add lines 4 through 9 in column (d)				60,070
11 Net income summary. Subtract line 10 from line 3, column (d)				79,085

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

	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
<b>Revenue</b>				
1 Gross revenue				
<b>Direct Expenses</b>				
2 Cash prizes				
3 Noncash prizes				
4 Rent/facility costs				
5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)				
8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities:

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

b If "No," explain:

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

b If "Yes," explain:



- 11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13 Indicate the percentage of gaming activity conducted in:
- |                               |     |   |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility         | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$
- c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**SCHEDULE J**

(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization

**Compensation Information**For certain Officers, Directors, Trustees, Key Employees, and Highest  
Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2018**Open to Public  
InspectionEmployer identification number  
**04-2609788****Part I Questions Regarding Compensation****1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.☐ First-class or charter travel☐ Travel for companions☐ Tax indemnification and gross-up payments☐ Discretionary spending account☐ Housing allowance or residence for personal use☐ Payments for business use of personal residence☐ Health or social club dues or initiation fees☐ Personal services (such as maid, chauffeur, chef)**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.☐ Compensation committee☐ Independent compensation consultant☐ Form 990 of other organizations☐ Written employment contract☒ Compensation survey or study☒ Approval by the board or compensation committee**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:**a** Receive a severance payment or change-of-control payment?**b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?**c** Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.****5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:**a** The organization?**b** Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:**a** The organization?**b** Any related organization?

If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

X

X

X

X

X

X

X

X

X

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

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

**Note:** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
<b>1 Richard Delaney President &amp; CEO</b>	(i) 162,000 (ii) 0 (iii) 0	0	0	8,163	0	170,163	0
2	(i) (ii) (iii)						
3	(i) (ii) (iii)						
4	(i) (ii) (iii)						
5	(i) (ii) (iii)						
6	(i) (ii) (iii)						
7	(i) (ii) (iii)						
8	(i) (ii) (iii)						
9	(i) (ii) (iii)						
10	(i) (ii) (iii)						
11	(i) (ii) (iii)						
12	(i) (ii) (iii)						
13	(i) (ii) (iii)						
14	(i) (ii) (iii)						
15	(i) (ii) (iii)						
16	(i) (ii) (iii)						

**Part III** Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Area with horizontal dotted lines for supplemental information.

**SCHEDULE M  
(Form 990)**

Department of the Treasury  
Internal Revenue Service  
Name of the organization

**Noncash Contributions**

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  
▶ Attach to Form 990.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2018**

**Open To Public  
Inspection**

**Center for Coastal Studies, Inc.**

Employer identification number

**04-2609788**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art — Works of art				
2 Art — Historical treasures				
3 Art — Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities — Publicly traded	<b>X</b>	<b>4</b>	<b>19,938</b>	
10 Securities — Closely held stock				
11 Securities — Partnership, LLC, or trust interests				
12 Securities — Miscellaneous				
13 Qualified conservation contribution — Historic structures				
14 Qualified conservation contribution — Other				
15 Real estate — Residential				
16 Real estate — Commercial				
17 Real estate — Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ( )	<b>X</b>	<b>4</b>	<b>32,573</b>	
26 Other ▶ ( )				
27 Other ▶ ( )				
28 Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		<b>X</b>
31		<b>X</b>
32a		<b>X</b>



**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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2018**Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue Service

Name of the organization

Center for Coastal Studies, Inc.

Employer identification number

04-2609788

**Form 990, Part VI, Line 11b - Organization's Process to Review Form 990**

Form 990 is reviewed by the President and CEO and treasurer before filing  
and is also made available to Executive Committee members before filing.

**Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy**

The Organization has created a conflict of interest policy for all  
directors and employees to sign annually.

**Form 990, Part VI, Line 15a - Compensation Process for Top Official**

Compensation involves use of comparable data and review and approval by the  
Executive Committee.

**Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation**

Form 990 and other governing documents are available upon written request  
to the President and CEO.

Form **4562**Department of the Treasury  
Internal Revenue Service (99)  
Name(s) shown on return**Depreciation and Amortization**  
(Including Information on Listed Property)

▶ Attach to your tax return.

▶ Go to [www.irs.gov/Form4562](http://www.irs.gov/Form4562) for instructions and the latest information.

OMB No. 1545-0172

**2018**Attachment  
Sequence No. **179****Center for Coastal Studies, Inc.**Identifying number  
**04-2609788**

Business or activity to which this form relates

**Indirect Depreciation****Part I Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,000,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,500,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2017 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12	13	

**Note:** Don't use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	197,658

**Part III MACRS Depreciation (Don't include listed property. See instructions.)****Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2018	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

**Section B—Assets Placed in Service During 2018 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			27.5 yrs.	MM	S/L	
			39 yrs.	MM	S/L	
				MM	S/L	

**Section C—Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System**

20a Class life				S/L	
b 12-year			12 yrs.	S/L	
c 30-year			30 yrs.	MM	S/L
d 40-year			40 yrs.	MM	S/L

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	10,186
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	207,844
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2018)



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

<b>24a</b> Do you have evidence to support the business/investment use claimed?				<b>Yes</b>	<b>No</b>	<b>24b</b> If "Yes," is the evidence written?				<b>Yes</b>	<b>No</b>
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost			
<b>25</b> Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions								<b>25</b>			
<b>26</b> Property used more than 50% in a qualified business use:											
<b>2014 Toyota Tacoma Pick Up Truck</b>											
<b>05/30/14 100.00 % 26,592 26,592 5.0 S/L- 10,186</b>											
<b>27</b> Property used 50% or less in a qualified business use:											
<b>28</b> Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1											
<b>28 10,186</b>											
<b>29</b> Add amounts in column (i), line 26. Enter here and on line 7, page 1											
<b>29</b>											

**Section B—Information on Use of Vehicles**

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

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

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

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. See instructions.

<b>37</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	<b>Yes</b>	<b>No</b>
<b>38</b> Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
<b>39</b> Do you treat all use of vehicles by employees as personal use?		
<b>40</b> Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
<b>41</b> Do you meet the requirements concerning qualified automobile demonstration use? See instructions		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
<b>42</b> Amortization of costs that begins during your 2018 tax year (see instructions):					
<b>43</b> Amortization of costs that began before your 2018 tax year					<b>43</b>
<b>44</b> Total. Add amounts in column (f). See the instructions for where to report					<b>44</b>

04-2609788

## Federal Asset Report

FYE: 12/31/2018

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
<b>Other Depreciation:</b>										
1	Engine - IBIS	3/16/07	26,521				26,521	10 MO200DB	26,521	0
2	Camera	5/31/07	1,099				1,099	5 MO200DB	1,099	0
3	Life vest	10/18/07	1,967				1,967	5 MO200DB	1,967	0
4	Fluormeter	2/23/07	6,863				6,863	5 MO200DB	6,863	0
5	Turbidity meter kit	6/08/07	893				893	5 MO200DB	893	0
6	Sterilizer	11/16/07	4,034				4,034	5 MO200DB	4,034	0
7	Laboratory equipment	10/22/07	3,104				3,104	5 MO200DB	3,104	0
8	Zodiac trailer	8/01/98	1,500				1,500	5 MO S/L	1,500	0
9	Infaltable (2)	7/01/98	11,990				11,990	5 MO S/L	11,990	0
10	Trailer	7/01/98	4,222				4,222	5 MO S/L	4,222	0
11	Outboard motor	7/01/98	1,575				1,575	5 MO S/L	1,575	0
12	Life raft	7/01/99	2,595				2,595	5 MO S/L	2,595	0
13	1998 Dodge	7/01/98	2,200				2,200	3 MO S/L	2,200	0
14	Microscopes	7/01/99	3,870				3,870	5 MO S/L	3,870	0
15	Biomedical receivers	7/01/99	1,481				1,481	5 MO S/L	1,481	0
16	Electronic equipment	7/01/99	8,103				8,103	5 MO S/L	8,103	0
17	Infaltable boats (2)	7/01/99	7,127				7,127	5 MO S/L	7,127	0
18	Electronic equipment	7/01/99	2,240				2,240	5 MO S/L	2,240	0
19	Electronic equipment	7/01/99	12,222				12,222	5 MO S/L	12,222	0
20	Equipment	7/01/99	3,781				3,781	5 MO S/L	3,781	0
21	Camcorders (2)	7/01/00	2,975				2,975	5 MO S/L	2,975	0
22	Equipment	7/01/00	1,265				1,265	5 MO S/L	1,265	0
23	Computer	7/01/00	1,007				1,007	5 MO S/L	1,007	0
24	Electronics	7/01/00	5,762				5,762	5 MO S/L	5,762	0
25	25 hp Johnson outboard	7/01/00	1,600				1,600	5 MO S/L	1,600	0
26	DVD camera	7/01/00	755				755	5 MO S/L	755	0
27	Sea drop	7/01/00	865				865	5 MO S/L	865	0
28	Computer	7/01/00	1,838				1,838	5 MO S/L	1,838	0
29	Fluorometer	12/01/00	4,042				4,042	5 MO S/L	4,042	0
30	435Z projector	7/01/00	4,325				4,325	5 MO S/L	4,325	0
31	2 biomedical receivers	7/01/00	2,032				2,032	5 MO S/L	2,032	0
32	1999 express trailer	7/01/00	2,101				2,101	5 MO S/L	2,101	0
33	Yamaha engine	7/01/00	2,700				2,700	5 MO S/L	2,700	0
34	Hose system	7/01/00	4,941				4,941	5 MO S/L	4,941	0
35	Computer equipment	7/01/01	12,013				12,013	5 MO S/L	12,013	0
36	Digital camera	7/01/01	3,173				3,173	5 MO S/L	3,173	0
37	Thinkpad	7/01/01	1,112				1,112	5 MO S/L	1,112	0
38	Office desks etc	7/01/01	6,421				6,421	5 MO S/L	6,421	0
39	Equipment	7/01/01	580				580	5 MO S/L	580	0
40	Drogues	7/01/01	1,917				1,917	5 MO S/L	1,917	0
41	Camera	7/01/01	2,448				2,448	5 MO S/L	2,448	0
42	Computer equipment	7/01/01	4,204				4,204	5 MO S/L	4,204	0
43	Equipment	7/01/00	660				660	5 MO S/L	660	0
44	Equipment	7/01/01	1,257				1,257	5 MO S/L	1,257	0
45	Hard drive	7/01/01	1,500				1,500	5 MO S/L	1,500	0
46	Equipment	7/01/01	2,210				2,210	5 MO S/L	2,210	0
47	Coolsan	7/01/01	1,710				1,710	5 MO S/L	1,710	0
48	Shearwater	7/01/00	193,511				193,511	5 MO S/L	193,511	0
49	S/W (2) 350hp diesel engines	11/30/00	57,786				57,786	10 MO S/L	57,786	0
50	Original building	7/01/78	53,811				53,811	30 MO S/L	53,811	0
51	Improvements	7/01/84	4,557				4,557	18 MO S/L	4,557	0
52	Improvements	7/01/85	1,178				1,178	18 MO S/L	1,178	0
53	Improvements	7/01/86	3,832				3,832	18 MO S/L	3,832	0
54	Improvements	7/01/87	7,514				7,514	18 MO S/L	7,514	0
55	Cottage improvements	7/01/88	32,072				32,072	18 MO S/L	32,072	0
56	Improvements	7/01/89	2,371				2,371	18 MO S/L	2,371	0
57	Photo vault	7/01/90	4,069				4,069	18 MO S/L	4,069	0
58	Carpeting	7/01/90	466				466	10 MO S/L	466	0
59	Improvements	12/31/92	3,184				3,184	18 MO S/L	3,184	0
60	Improvements	7/01/93	1,602				1,602	18 MO S/L	1,602	0
61	Carpeting	7/01/93	1,059				1,059	10 MO S/L	1,059	0
62	Electrical improvements	7/01/94	843				843	10 MO S/L	843	0
63	Bulkhead	7/01/94	26,700				26,700	30 MO S/L	20,470	890
64	Race point	7/01/98	29,900				29,900	17 MO S/L	29,900	0
66	Land - original	7/01/78	29,129				29,129	0 -- Land	0	0
68	File cabinet	7/01/02	513				513	5 MO S/L	513	0
69	15 hp outboard (net)	7/01/02	1,263				1,263	5 MO S/L	1,263	0
70	7 airconditioners	7/01/02	2,056				2,056	5 MO S/L	2,056	0

04-2609788

## Federal Asset Report

FYE: 12/31/2018

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
71	Trailer	7/01/02	1,459				1,459	5 MO S/L	1,459	0
72	Digital walkman w/screen	7/01/02	721				721	5 MO S/L	721	0
73	Rigging	7/01/02	811				811	5 MO S/L	811	0
74	Telemetry	7/01/02	11,788				11,788	5 MO S/L	11,788	0
75	Rigging	7/01/02	5,628				5,628	5 MO S/L	5,628	0
76	Equipment	7/01/02	1,818				1,818	5 MO S/L	1,818	0
77	Telemetry	7/01/02	12,940				12,940	5 MO S/L	12,940	0
78	Rigging	7/01/02	7,360				7,360	5 MO S/L	7,360	0
79	Cannon digital camera	7/01/02	2,501				2,501	5 MO S/L	2,501	0
80	Laptop	7/01/02	1,228				1,228	5 MO S/L	1,228	0
81	DSL hookup	7/01/02	1,423				1,423	5 MO S/L	1,423	0
82	Computer	7/01/02	1,429				1,429	5 MO S/L	1,429	0
83	Computer	7/01/02	1,203				1,203	5 MO S/L	1,203	0
84	Boat	7/01/02	7,000				7,000	5 MO S/L	7,000	0
85	Storage shed	7/01/03	1,418				1,418	5 MO S/L	1,418	0
86	RV Ibis	7/01/03	189,255				189,255	10 MO S/L	189,255	0
87	Aquatic echo system	7/01/03	1,595				1,595	5 MO S/L	1,595	0
88	Photo equipment	6/03/03	4,356				4,356	5 MO S/L	4,356	0
89	Aviation coveralls	5/22/03	3,919				3,919	5 MO S/L	3,919	0
90	Digital camera	6/18/03	1,500				1,500	5 MO S/L	1,500	0
91	Cyropoter	7/08/03	623				623	5 MO S/L	623	0
92	ADF unit	3/14/03	1,695				1,695	5 MO S/L	1,695	0
93	Outboard motor	7/29/03	3,510				3,510	5 MO S/L	3,510	0
94	Electronics	5/15/03	3,932				3,932	5 MO S/L	3,932	0
95	Computer	2/26/03	1,499				1,499	5 MO S/L	1,499	0
96	Apple computer	7/01/03	1,578				1,578	5 MO S/L	1,578	0
97	Laptop computer	5/15/03	2,871				2,871	5 MO S/L	2,871	0
98	Computers	6/11/03	7,250				7,250	5 MO S/L	7,250	0
99	Equipment	7/01/03	862				862	5 MO S/L	862	0
100	Electronic equipment	10/15/03	2,960				2,960	5 MO S/L	2,960	0
101	Location beacon	11/19/03	4,523				4,523	5 MO S/L	4,523	0
102	Headsets	12/22/03	1,669				1,669	5 MO S/L	1,669	0
103	Computer	10/30/03	1,413				1,413	5 MO S/L	1,413	0
104	Dell computer	10/29/04	1,084				1,084	5 MO S/L	1,084	0
105	Carpeting	6/15/04	2,028				2,028	5 MO S/L	2,028	0
106	Spring loaded knife	5/03/04	2,489				2,489	5 MO S/L	2,489	0
107	SS pole gimble & custom handle	4/27/04	2,250				2,250	5 MO S/L	2,250	0
108	Dartgun modification	12/03/04	950				950	5 MO S/L	950	0
109	Flowmeter	5/10/04	604				604	5 MO S/L	604	0
110	Stereomicroscope	5/03/04	3,263				3,263	5 MO S/L	3,263	0
111	Tow cable and accessories	7/26/04	4,670				4,670	5 MO S/L	4,670	0
112	2 flight suits	1/23/04	762				762	5 MO S/L	762	0
113	Digital camera	4/30/04	1,910				1,910	5 MO S/L	1,910	0
114	Canon digital camera	4/20/04	1,500				1,500	5 MO S/L	1,500	0
115	Canon digital camera	3/31/04	2,092				2,092	5 MO S/L	2,092	0
116	Olympus digital camera	6/02/04	1,156				1,156	5 MO S/L	1,156	0
117	Sony digital camera	3/31/04	2,192				2,192	5 MO S/L	2,192	0
118	Air conditioner	8/10/04	903				903	5 MO S/L	903	0
119	2 Zodiacs & 2 Honda outboard	6/25/04	15,756				15,756	5 MO S/L	15,756	0
120	Dell computer 7 FS monitor	2/17/04	2,110				2,110	5 MO S/L	2,110	0
121	HP designkeet printer	1/30/04	1,410				1,410	5 MO S/L	1,410	0
122	Wireless network	2/05/04	1,293				1,293	5 MO S/L	1,293	0
123	Custom built computer	8/04/04	848				848	5 MO S/L	848	0
124	Domorperfect software	3/09/04	8,349				8,349	3 MO S/L	8,349	0
125	Software program	4/02/04	2,000				2,000	3 MO S/L	2,000	0
126	Toshiba satellite P10 S429	1/01/04	1,727				1,727	5 MO S/L	1,727	0
128	Dock - building	4/12/05	4,900				4,900	15 MO S/L	4,165	327
129	Scientific equipment	10/28/05	6,987				6,987	5 MO S/L	6,987	0
130	Camera equipment	2/25/05	933				933	5 MO S/L	933	0
131	Camera equipment	12/23/05	1,779				1,779	5 MO S/L	1,779	0
132	Land annex	2/15/06	500,000				500,000	0 -- Land	0	0
133	Building annex	2/15/06	2,030,762				2,030,762	30 MO S/L	802,008	67,692
134	Desk	1/03/06	1,845				1,845	5 MO S/L	1,845	0
135	Computer	6/13/06	3,772				3,772	5 MO S/L	3,772	0
136	Camera equipment	6/09/06	754				754	5 MO S/L	754	0
137	Satellite tracking equipment	3/22/06	21,284				21,284	5 MO S/L	21,284	0
138	Survival suits	9/19/06	1,017				1,017	3 MO S/L	1,017	0
139	Satellite tracking equipment	6/16/06	16,688				16,688	5 MO S/L	16,688	0
140	Camera equipment	3/08/06	2,991				2,991	5 MO S/L	2,991	0
141	Ecological test equipment	3/31/06	11,011				11,011	5 MO S/L	11,011	0
142	Electronic equipment	9/16/06	33,209				33,209	5 MO S/L	33,209	0

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## Federal Asset Report

FYE: 12/31/2018

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
143	Boat - Sea Sprite	5/12/08	9,330				9,330	10 MO S/L	9,019	311
144	Camera body	5/06/08	1,114				1,114	5 MO S/L	1,114	0
145	2 life vests	11/05/08	1,340				1,340	5 MO S/L	1,340	0
146	Hi flex hose	10/22/08	1,616				1,616	5 MO S/L	1,616	0
147	GPS	10/23/08	2,381				2,381	5 MO S/L	2,381	0
148	Lab scale	3/21/08	1,295				1,295	5 MO S/L	1,295	0
149	Dive suits	3/21/08	1,295				1,295	5 MO S/L	1,295	0
150	Camera	7/21/08	1,356				1,356	5 MO S/L	1,356	0
151	YSI equipment	8/18/08	3,564				3,564	5 MO S/L	3,564	0
152	Antenna	4/22/08	618				618	5 MO S/L	618	0
153	GPS	7/21/08	890				890	5 MO S/L	890	0
154	Sewer system	3/24/08	3,725				3,725	30 MO S/L	1,211	124
155	Photo equipment	6/14/09	3,995				3,995	5 MO S/L	3,995	0
156	Equipment	8/18/09	1,170				1,170	5 MO S/L	1,170	0
157	Camera	6/22/09	1,213				1,213	5 MO S/L	1,213	0
158	Computer	8/10/09	864				864	5 MO S/L	864	0
159	Aviation overalls	11/25/09	1,590				1,590	5 MO S/L	1,590	0
160	POD	11/30/09	3,000				3,000	5 MO S/L	3,000	0
161	Equipment	10/14/09	6,150				6,150	5 MO S/L	6,150	0
163	Assembly for sonar	11/02/09	6,900				6,900	5 MO S/L	6,900	0
164	Hydrographic equipment	11/25/09	4,600				4,600	5 MO S/L	4,600	0
165	Sea floor mapping equipment	12/09/09	42,474				42,474	5 MO S/L	42,474	0
166	Photo equipment	7/27/09	10,237				10,237	5 MO S/L	10,237	0
167	Boats - Seaway	7/01/09	10,000				10,000	10 MO S/L	8,500	1,000
168	Liferaft - Shearwater	8/02/10	2,175				2,175	10 MO S/L	1,613	218
169	Engine - IBIS	2/09/10	41,775				41,775	10 MO S/L	33,072	4,178
170	Pick up truck	2/08/10	4,800				4,800	5 MO S/L	4,800	0
171	GPS	3/03/10	4,506				4,506	5 MO S/L	4,506	0
172	Procase	3/16/10	1,481				1,481	5 MO S/L	1,481	0
173	GPS	1/29/10	2,098				2,098	5 MO S/L	2,098	0
174	Sea horse TCM	3/29/10	4,320				4,320	5 MO S/L	4,320	0
175	Plankton sampler	1/29/10	1,057				1,057	5 MO S/L	1,057	0
176	Emergency locator beacon	6/08/10	833				833	5 MO S/L	833	0
177	Clutch - bluefin	5/31/10	8,276				8,276	5 MO S/L	8,276	0
178	Microscope	8/02/10	3,000				3,000	5 MO S/L	3,000	0
179	Probe	9/15/10	2,603				2,603	5 MO S/L	2,603	0
180	Seacat profiler	12/16/10	21,655				21,655	5 MO S/L	21,655	0
181	Microscope	12/28/10	690				690	5 MO S/L	690	0
182	Underwater camera	7/01/10	919				919	5 MO S/L	919	0
183	Data storage	7/12/10	884				884	5 MO S/L	884	0
184	Diving gear	3/20/10	804				804	5 MO S/L	804	0
185	GPS for Seaway	7/11/11	1,400				1,400	5 MO S/L	1,400	0
186	Generator	8/31/11	780				780	5 MO S/L	780	0
187	Night vision binoculars	3/04/11	732				732	5 MO S/L	732	0
188	Digital camera	7/07/11	1,664				1,664	5 MO S/L	1,664	0
189	Aircrew dry suit	7/29/11	1,847				1,847	5 MO S/L	1,847	0
190	10 meter DMS cable	4/08/11	1,704				1,704	5 MO S/L	1,704	0
191	Altimeter	11/02/11	4,970				4,970	5 MO S/L	4,970	0
192	20 satellite tags	5/24/11	42,000				42,000	5 MO S/L	42,000	0
	Sold/Scrapped: 12/31/18									
193	Camcorder	8/15/11	1,298				1,298	5 MO S/L	1,298	0
	Sold/Scrapped: 12/31/18									
194	Laser range finder	8/19/11	821				821	5 MO S/L	821	0
195	Analyzer & silicate cartridge	3/17/11	8,827				8,827	5 MO S/L	8,827	0
196	Refrigerator	12/31/11	759				759	5 MO S/L	759	0
198	Silver Ships	12/12/12	24,009				24,009	10 MO S/L	12,205	2,401
199	Turtle bag	6/22/12	608				608	5 MO S/L	608	0
200	Staples - wireless n-nsa	3/23/12	975				975	5 MO S/L	975	0
201	Frigidaire freezer upright	7/28/12	759				759	5 MO S/L	759	0
202	Hypack survey software	1/23/12	850				850	5 MO S/L	850	0
203	Australian style darts	1/01/12	18,600				18,600	5 MO S/L	18,600	0
	Sold/Scrapped: 12/31/18									
204	Wildlife computers Spot 200 implant	3/16/12	42,000				42,000	5 MO S/L	42,000	0
	Sold/Scrapped: 12/31/18									
205	Load bearing data cable wet pluggable	1/13/12	1,491				1,491	5 MO S/L	1,491	0
206	QSR-2100 sensor #10544	2/17/12	1,540				1,540	5 MO S/L	1,540	0
207	Heatbath 4ml. 110v	4/09/12	541				541	7 MO S/L	445	77
208	HP printer P7-1206 PC	7/31/12	770				770	5 MO S/L	770	0
209	Mackay Iridium Extreme 9575 Hand Held U	7/31/12	1,425				1,425	7 MO S/L	1,103	203
210	Pelican #1550 Pro Case w/Dividers	9/19/12	510				510	5 MO S/L	510	0
211	Tactical Aircrew Dry Suit MSF 300M	11/13/12	2,000				2,000	5 MO S/L	2,000	0

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## Federal Asset Report

FYE: 12/31/2018

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179B	Bonus	Basis for Depr	PerConv Meth	Prior	Current
212	Tactical Aircrew Dry Suit MSF-300	10/17/12	2,000				2,000	5 MO S/L	2,000	0
213	Keystone trimble	10/26/12	4,700				4,700	5 MO S/L	4,700	0
214	ASM, C3D-LPM Pod w/tritech mod	10/02/12	2,090				2,090	5 MO S/L	2,090	0
215	CastAway-CTD conductivity temperature &	10/12/12	5,111				5,111	5 MO S/L	5,111	0
216	Side scan Sonar	11/05/12	7,195				7,195	5 MO S/L	7,195	0
217	Xterra MS C18 Column 3.5	8/06/12	559				559	5 MO S/L	559	0
218	Pump - auxilliary 2	12/13/12	1,233				1,233	5 MO S/L	1,233	0
219	Tactical Aircrew Dry Suit	10/17/12	2,000				2,000	5 MO S/L	2,000	0
221	Dual frequency side scan	5/02/13	43,843				43,843	5 MO S/L	40,920	2,923
222	Conference phone	5/15/13	667				667	5 MO S/L	622	45
223	Camcorder and case	1/31/13	727				727	5 MO S/L	715	12
224	Cabinet for flammables	3/27/13	1,479				1,479	5 MO S/L	1,405	74
225	GPS antenna cable	8/30/13	527				527	5 MO S/L	457	70
226	Pro plus instrument & probe	8/19/13	3,076				3,076	5 MO S/L	2,666	410
227	Tide gauge	5/14/13	648				648	5 MO S/L	605	43
230	6205 System 50/1600 side scan sonar	5/19/14	92,000				92,000	5 MO S/L	65,933	18,400
231	Castaway CTD	6/03/14	5,345				5,345	5 MO S/L	3,831	1,069
232	Cabinet for flammables	7/22/14	625				625	5 MO S/L	427	125
233	Storage shed	9/09/14	2,123				2,123	7 MO S/L	1,011	303
234	Build & Improv adjustment to financial	1/01/16	-179,558				-179,558	39 -- Memo	0	0
235	Land adjustment to match financials	1/01/16	-29,179				-29,179	0 -- Memo	0	0
236	Equipment adjustment to match financials	1/01/16	114,279				114,279	10 -- Memo	0	0
237	Renovation of annex building	5/31/17	1,905,738				1,905,738	39 MO S/L	28,505	48,865
238	Ford-truck	6/01/16	38,886				38,886	5 MO S/L	12,314	7,777
239	Seacam	3/31/16	2,158				2,158	5 MO S/L	755	432
Sold/Scrapped: 12/31/18										
240	Sentile V, 5 Beam ADCP	8/05/16	23,150				23,150	5 MO S/L	6,559	4,630
241	Furnace	6/09/16	2,536				2,536	7 MO S/L	574	362
242	Amstonscale	6/14/16	1,520				1,520	5 MO S/L	481	304
243	Boat - Norma C not in use in 2016 -deposit	5/09/16	16,000				16,000	10 -- Memo	0	0
Sold/Scrapped: 12/31/18										
244	Boat - Marindin	4/30/16	11,220				11,220	10 MO S/L	1,870	1,122
245	See floor mapping-sonar sold	11/02/09	54,338				54,338	5 -- Memo	54,338	0
246	Pine Harbor Wood improvement	11/30/17	9,224				9,224	39 MO S/L	20	236
247	Boat R/V Sherwater improvement	11/30/17	104,769				104,769	10 MO S/L	873	10,477
248	Blue C Designs Inc. equipment	4/27/17	15,967				15,967	10 MO S/L	1,064	1,597
249	Portable Cable	6/30/17	1,535				1,535	10 MO S/L	77	153
250	Two tide staffs-marjolle	6/30/17	3,300				3,300	10 MO S/L	165	330
Sold/Scrapped: 12/31/18										
251	Drone-Birdseeview	6/30/17	19,661				19,661	10 MO S/L	983	1,966
252	See Spider Bottom Mount	6/30/17	5,600				5,600	10 MO S/L	280	560
253	Computer equipment	6/30/17	7,622				7,622	5 MO S/L	1,122	1,525
254	Shed electrical improvements	12/31/18	5,101				5,101	10 MO S/L	0	0
255	Landscaping improvements	6/11/18	12,194				12,194	39 MO S/L	0	182
256	Media room project	11/08/18	43,229				43,229	10 MO S/L	0	720
257	Float space	4/30/18	21,275				21,275	30 MO S/L	0	473
258	Shearwater renovation	5/04/18	150,795				150,795	10 MO S/L	0	10,053
259	Boat- McKee Craft	6/17/18	4,500				4,500	10 MO S/L	0	225
260	Dell server-capital lease	12/31/18	25,015				25,015	5 MO S/L	0	0
261	Phone system Marlin capital lease	12/31/18	11,798				11,798	5 MO S/L	0	0
262	Surface Pro laptop computer-for boat MWR	1/11/18	1,338				1,338	5 MO S/L	0	268
263	HP Pavilion laptop - accounting	1/12/18	630				630	5 MO S/L	0	126
264	HP Pavilion laptop - development	4/08/18	630				630	5 MO S/L	0	95
265	microscope	5/16/18	3,327				3,327	5 MO S/L	0	388
266	sonar data viewer	5/11/18	4,264				4,264	5 MO S/L	0	569
267	Beta kit	5/24/18	604				604	5 MO S/L	0	70
268	Freezer	6/26/18	775				775	5 MO S/L	0	77
269	laptop-McNerney	6/27/18	650				650	5 MO S/L	0	65
270	laptop-Costa, Amy	7/02/16	701				701	5 MO S/L	0	140
271	flam cabinets	6/22/18	1,225				1,225	5 MO S/L	0	123
272	Sensor	7/03/18	563				563	5 MO S/L	0	56
273	Flow meter	7/02/18	727				727	5 MO S/L	0	73
274	san disk cards	7/05/18	1,500				1,500	5 MO S/L	0	150
275	laptops (1-Macort/1-Nickerson)	8/28/18	1,738				1,738	5 MO S/L	0	116
276	generator for onboard computer/sonar	9/28/18	1,061				1,061	5 MO S/L	0	53
277	HP Procurve computer for media room	9/05/18	2,362				2,362	5 MO S/L	0	157
278	laptop for marketing/outreach (Lowe)	10/01/18	869				869	5 MO S/L	0	43
279	computer for water quality	11/03/18	4,151				4,151	5 MO S/L	0	138
280	Marindin renovation	5/04/18	31,005				31,005	10 MO S/L	0	2,067

**Federal Asset Report****Form 990, Page 1**

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Bus %</u>	<u>Sec 179</u>	<u>Bonus</u>	<u>Basis for Depr</u>	<u>PerConv Meth</u>	<u>Prior</u>	<u>Current</u>
	<b>Total Other Depreciation</b>		<u>6,655,445</u>				<u>6,655,445</u>		<u>2,481,504</u>	<u>197,658</u>
	<b>Total ACRS and Other Depreciation</b>		<u>6,655,445</u>				<u>6,655,445</u>		<u>2,481,504</u>	<u>197,658</u>
<b>Listed Property:</b>										
228	2014 Toyota Tacoma Pick Up Truck	5/30/14	<u>26,592</u>				<u>26,592</u>	5 MO S/L	<u>13,746</u>	<u>10,186</u>
			<u>26,592</u>				<u>26,592</u>		<u>13,746</u>	<u>10,186</u>
	<b>Grand Totals</b>		<u>6,682,037</u>				<u>6,682,037</u>		<u>2,495,250</u>	<u>207,844</u>
	<b>Less: Dispositions and Transfers</b>		<u>125,356</u>				<u>125,356</u>		<u>104,818</u>	<u>762</u>
	<b>Less: Start-up/Org Expense</b>		<u>0</u>				<u>0</u>		<u>0</u>	<u>0</u>
	<b>Net Grand Totals</b>		<u>6,556,681</u>				<u>6,556,681</u>		<u>2,390,432</u>	<u>207,082</u>

**SCHEDULE G  
(Form 990 or  
990-EZ)****Fundraising Other Events****2018**

For calendar year 2018, or tax year beginning , and ending

Name

Employer Identification Number

**Center for Coastal Studies, Inc.****04-2609788**

		(a) Other event	(b) Other event	(c) Other event	(d) Total other events (add col. (a) through col. (c))
		<u>SSWW</u> (event type)	<u></u> (event type)	<u></u> (event type)	
Revenue	1 Gross receipts	15,400			15,400
	2 Less: Charitable contributions				
	3 Gross income (line 1 minus line 2)	15,400			15,400
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food/beverages	7,801			7,801
	8 Entertainment				
	9 Other expenses	86			86

Form **990****Two Year Comparison Report****2017 & 2018**

For calendar year 2018, or tax year beginning

, ending

Name

Taxpayer Identification Number

**Center for Coastal Studies, Inc.****04-2609788**

		2017	2018	Differences
<b>Revenue</b>	1. Contributions, gifts, grants	1. 3,169,030	2,284,768	-884,262
	2. Membership dues and assessments	2. 92,278	72,337	-19,941
	3. Government contributions and grants	3.	868,062	868,062
	4. Program service revenue	4. 29,414	34,082	4,668
	5. Investment income	5. 4,685	4,408	-277
	6. Proceeds from tax exempt bonds	6.		
	7. Net gain or (loss) from sale of assets other than inventory	7. 5,000	-17,778	-22,778
	8. Net income or (loss) from fundraising events	8. 33,787	79,085	45,298
	9. Net income or (loss) from gaming	9.		
	10. Net gain or (loss) on sales of inventory	10. 139,621	76,318	-63,303
	11. Other revenue	11.		
	12. <b>Total revenue.</b> Add lines 1 through 11	12. 3,473,815	3,401,282	-72,533
<b>Expenses</b>	13. Grants and similar amounts paid	13.		
	14. Benefits paid to or for members	14.		
	15. Compensation of officers, directors, trustees, etc.	15.		
	16. Salaries, other compensation, and employee benefits	16. 2,252,536	2,273,111	20,575
	17. Professional fundraising fees	17.		
	18. Other professional fees	18.		
	19. Occupancy, rent, utilities, and maintenance	19. 14,309		-14,309
	20. Depreciation and Depletion	20. 165,170	207,445	42,275
	21. Other expenses	21. 1,154,485	959,652	-194,833
	22. <b>Total expenses.</b> Add lines 13 through 21	22. 3,586,500	3,440,208	-146,292
	23. <b>Excess or (Deficit).</b> Subtract line 22 from line 12	23. -112,685	-38,926	73,759
<b>Other Information</b>	24. Total exempt revenue	24. 3,473,815	3,401,282	-72,533
	25. Total unrelated revenue	25.		
	26. Total excludable revenue	26. 178,720	97,030	-81,690
	27. Total assets	27. 5,383,085	5,439,472	56,387
	28. Total liabilities	28. 529,079	637,118	108,039
	29. Retained earnings	29. 4,854,006	4,802,354	-51,652
	30. Number of voting members of governing body	30. 22	24	
	31. Number of independent voting members of governing body	31. 22	24	
	32. Number of employees	32. 45	50	
	33. Number of volunteers	33.		



<b>Form 990</b>	<b>Tax Return History</b>	<b>2018</b>
Name <b>Center for Coastal Studies, Inc.</b>		Employer Identification Number <b>04-2609788</b>

	2014	2015	2016	2017	2018	2019
Contributions, gifts, grants	2,753,750	2,933,244	3,894,124	3,169,030	3,152,830	3,152,830
Membership dues	84,763	71,015	80,589	92,278	72,337	72,337
Program service revenue	34,247	77,940	68,355	29,414	34,082	34,082
Capital gain or loss	11,583	501,706	18,466	5,000	-17,778	-17,778
Investment income	15,958	3,724	6,062	4,685	4,408	4,408
Fundraising revenue (income/loss)	26,408	50,486	43,603	33,787	79,085	79,085
Gaming revenue (income/loss)						
Other revenue	8,550	40,388	36,206	139,621	76,318	76,318
<b>Total revenue</b>	<b>2,935,259</b>	<b>3,678,503</b>	<b>4,147,405</b>	<b>3,473,815</b>	<b>3,401,282</b>	<b>3,401,282</b>
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.						
Other compensation	1,614,020	1,922,575	2,108,391	2,252,536	2,273,111	2,273,111
Professional fees						
Occupancy costs	12,184	14,401	14,692	14,309		
Depreciation and depletion	209,387	166,382	146,518	165,170	207,445	207,445
Other expenses	965,555	1,101,593	952,919	1,154,485	959,652	959,652
<b>Total expenses</b>	<b>2,801,146</b>	<b>3,204,951</b>	<b>3,222,520</b>	<b>3,586,500</b>	<b>3,440,208</b>	<b>3,440,208</b>
<b>Excess or (Deficit)</b>	<b>134,113</b>	<b>473,552</b>	<b>924,885</b>	<b>-112,685</b>	<b>-38,926</b>	<b>-38,926</b>
<b>Total exempt revenue</b>	<b>2,935,259</b>	<b>3,678,503</b>	<b>4,147,405</b>	<b>3,473,815</b>	<b>3,401,282</b>	<b>3,401,282</b>
<b>Total unrelated revenue</b>						
<b>Total excludable revenue</b>	<b>70,338</b>	<b>623,758</b>	<b>129,089</b>	<b>178,720</b>	<b>97,030</b>	<b>97,030</b>
<b>Total Assets</b>	<b>4,019,924</b>	<b>4,112,148</b>	<b>5,314,465</b>	<b>5,383,085</b>	<b>5,439,472</b>	<b>5,439,472</b>
<b>Total Liabilities</b>	<b>479,997</b>	<b>100,790</b>	<b>370,793</b>	<b>529,079</b>	<b>637,118</b>	<b>637,118</b>
<b>Net Fund Balances</b>	<b>3,539,927</b>	<b>4,011,358</b>	<b>4,943,672</b>	<b>4,854,006</b>	<b>4,802,354</b>	<b>4,802,354</b>

**Federal Statements****Taxable Dividends from Securities**

<u>Description</u>		<u>Amount</u>	<u>Unrelated</u>	<u>Exclusion</u>	<u>Postal</u>	<u>Acquired after</u>	<u>US</u>
			<u>Business</u>	<u>Code</u>	<u>Code</u>	<u>6/30/75</u>	<u>Obs (\$ or %)</u>
Interest, dividends, cap. gains		\$ 4,408		14			
Total		<u>\$ 4,408</u>					

## Federal Statements

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
Intern housing & stipend	\$ 22,571	\$ 22,571		\$
Telephone	21,742	14,481	7,261	
Miscellaneous	20,397	18,576	1,821	5,595
Computer expense	19,285	9,218	4,472	5,955
Fees and taxes	17,184	8,499	2,730	
Maintenance and repairs	15,873	14,735	1,138	3,630
Dues and Subscriptions	8,166	1,280	3,256	5,027
Premiums	6,770	1,089	654	
Auto expense	4,450	4,450		
Contributions	1,495	100	1,395	
Total	\$ 137,933	\$ 94,999	\$ 22,727	\$ 20,207

Federal Statements

Schedule A, Part II, Line 1(e)

Description	Amount
Memberships	\$ 72,337
Federal grants	868,062
Donated securities	19,938
Private grants and contributions	2,232,257
In kind	32,573
Total	<u>\$ 3,225,167</u>

**Federal Statements****Schedule A, Part II, Line 5 - Excess Gifts**

<u>Donor Name</u>	<u>Total</u>	<u>Excess</u>
MA Division of Marine Fisheries	\$ 639,530	\$ 312,754
National Park Service	184,411	
National Oceanic and Atmospheric Adm	44,121	
Herman Foundation	60,000	
Anonymous	185,000	
Anononymous	50,000	
Total	<u>\$ 1,163,062</u>	<u>\$ 312,754</u>

## Federal Statements

Schedule A, Part II, Line 8(e)

Description	Amount
Interest, dividends, cap.gains	\$ 4,408
Total	<u>\$ 4,408</u>

Schedule A, Part II, Line 12 - Current year

Description	Amount
Other earned income	\$ 34,082
Merchandise sales	191,825
Hiebert fellowship/Homeport	90,710
On-line auction	33,045
SSWW	15,400
Total	<u>\$ 365,062</u>

**Federal Statements****Hiebert fellowship/Homeport****Other Direct Fundraising or Gaming Expenses**

<u>Description</u>	<u>Amount</u>
Advertising	\$ 2,445
Scholarships/Fellowship	6,000
In-kind	4,190
Postage & Printing	956
Fees	3,025
Miscellaneous	32,765
Total	<u>\$ 49,381</u>

**Federal Statements****On-line auction****Other Direct Fundraising or Gaming Expenses**

<u>Description</u>	<u>Amount</u>
Auction fees	\$ <u>1,354</u>
Total	\$ <u><u>1,354</u></u>



**Form M-990T Return Summary**

For calendar year 2018, or taxable period beginning , and ending

**04-2609788****Center for Coastal Studies, Inc.****Income**

Federal unrelated business income  
 Deductions / adjustments  
 Income subject to apportionment  
 Income apportionment percentage **1.000000**  
 Apportioned income  
 Income not subject to apportionment  
 Certified Massachusetts solar or wind power deduction  
 Loss carryover deduction  
**Taxable income**

**Tax Computation**

Excise tax before credits  
 Total credits  
 Voluntary contribution - endangered wildlife  
**Total excise tax**

**Payments / Refundable Credits / Penalties**

Payments / refundable credits  
 M-2220 penalty  
 Late filing interest  
 Failure to file penalty  
 Failure to pay penalty  
**Total payments / penalties**

**Overpayment credited to next year's estimated tax****Refund****Tax due****Next Year's Estimates**

1st quarter  
 2nd quarter  
 3rd quarter  
 4th quarter  
**Total**

**Miscellaneous Information**

Amended return ☐  
 Return / extended due date **03/15/19**

**Form PC / Short Form PC - Annual Report**Filing fee **500**

Amended return ☐  
 Return / extended due date **05/15/19**