ELECTRONIC FILING STATUS REPORT

TAXING AUTHORITY	RETURN STATUS	ELECTRONIC FILING STATUS	DATE EXPORTED
Federal Form 990	Qualified		
Federal 8868 (Form 990)	Prev Exported	Accepted	10/18/2019
Federal 8868 (Form 990-T)	Prev Exported	Accepted	10/18/2019
Federal Form 990-T	Not Allowed		
Florida Extension	Prev Exported	Accepted	10/18/2019
Florida F-1120	Qualified		

828131 04-01-18

Draft 2020-07-15

PDF File Report

Unit	IRS Attachment Name	Description	Type
FL	FORM990T	FORM990T	Auto-generated
FL	FORM990T	FORM990T	Auto-generated

833011
04-01-18

Draft 2020-07-15

2018 Tax Return(s)

Prepared for

Seagull Services
Client Code: 0580800

Account Number 784176
Release Number 2018.06000

Prepared by

Holyfield & Thomas, LLC
125 Butler Street
West Palm Beach, FL
33407

(561) 689-6000

Processing

Date: 07/15/2020
Time: 10:18:03

Special Instructions

Messages

Draft 2020-07-15

Return Information

CAUTION

- Florida. Form F-1120ES has not been produced since the Florida tax liability is less than $2500. If an estimate is desired, enter either code "2" or code "4" on Florida Worksheet, Estimate Preparation Section. (23581)

  Signed-off by JC6681 7/2/2020 10:31 AM EDT

INFORMATIONAL

- Form 990. Page 8, Part VII, line 2. The total number (1) of individuals who received more than $100,000 in reportable compensation from the organization has been calculated from the entries on the Form 990 worksheet, List of Officers, Directors, Trustees, Key Employees, etc., section. This should be reviewed. If there were any individuals who received more than $100,000 in reportable compensation from the organization that were not included on the Form 990 worksheet, List of Officers, Directors, Trustees, Key Employees, etc., section, this calculated number will be incorrect. An entry may be made on the Form 990 worksheet, Other Compensation Information section to override this item. (33424)

  Signed-off by JC6681 7/15/2020 11:38 AM EDT

- Form 990, Page 11, Line 11b. If the organization is reporting publicly traded stock for which the organization holds 5% or more of the outstanding shares of the same class or publicly traded stock in a corporation that comprises more than 5% of the organization's total assets it should be reported on line 12 of the balance sheet as "Other Securities." (32999)

  Signed-off by JC6681 7/15/2020 11:43 AM EDT

- Schedule A. Page 2, Part II. The entries to identify excess contributions on the Schedule A worksheet, Support Schedule section, Identification of Excess Contributors fields, contained 4 individual(s) whose contributions were not in excess of the amount calculated for line 5 and consequently has/have been excluded from the amount on line 5. (30002)

  Signed-off by JC6681 7/15/2020 11:43 AM EDT

- Form 990. Schedule D, Page 3, Part IX. The amount of Other Assets on Form 990, Page 11, Part X, line 15 does not equal or exceed 5 percent of the total assets on Form 990, Page 11, Part X, line 16, column b. Consequently in accordance with IRS instructions Schedule D, Part IX has been left blank. (36035)

  Signed-off by JC6681 7/2/2020 10:32 AM EDT

Draft 2020-07-15

Return Information

- Form 990-T, Page 1, Item H. The number of the organization's trades or businesses has been calculated from the corresponding information on Form 990-T and Schedule M (Form 990-T). If multiple trades or businesses have been reported on Form 990-T they may need to be separately reported on Schedule M instead. This should be reviewed and corrected as necessary. The number of trades or businesses on Form 990-T, Item H can be overridden by making an entry on the Form 990-T worksheet. General Information section. (30090)

  Signed-off by JC6681 7/2/2020 10:32 AM EDT

- Depreciation. Federal Form 4562 related to Rental Revenues, was not printed because there are no current year MACRS acquisitions, listed property assets or amortizable assets. Note that Form 4562 is never required to be filed for Form 990. However, if desired Form 4562 may be forced to print by making an entry on the Depreciation Options and Overrides worksheet, Prepare Form 4562 if not req'd field. (30144)

  Signed-off by JC6681 7/2/2020 10:32 AM EDT

- Form 990. Tax (SaaS) Sequencing numbers will be considered as '(X) - include in letter.' See Correspondence help for paragraph positioning. (34863)

  Signed-off by JC6681 7/2/2020 10:32 AM EDT

- Electronic Filing. The following EFIN 657677 is being used to electronically file Form 990. Be sure that this EFIN is listed in the IRS database and is in accepted status for processing of Exempt Organization returns. The IRS Ogden help desk (866 255-0654) may be contacted to update this EFIN for electronic filing of Exempt Organization returns if necessary. (37015)

  Signed-off by JC6681 7/15/2020 11:43 AM EDT

- Electronic Filing. The following Name Control SEAG has been computed and is being used to electronically file Form 990 for Seagull Services. This Name Control is used to match the organization's Name and EIN with the IRS e-File database. If this information does not match the IRS database the return will be rejected and must be corrected before being resubmitted. The IRS help desk (800 829-4933) may be contacted to verify the information in the e-File database. If the Name Control cannot be computed correctly because the organization's name shown on Form 990 does not match the IRS database it can be overridden on the Electronic Filing worksheet, General Information section, Organization name control - override field. (37026)

  Signed-off by JC6681 7/15/2020 11:43 AM EDT

Draft 2020-07-15

Return Information

- Electronic Filing. Form 990 has been selected for electronic filing. If a printed copy of the return is generated and electronic processing of the return is completed, do not mail the printed copy of the return to the IRS. Form 8879-EO must be retained by the electronic return originator for three years. Please note that Form 990-T is also present and must be filed by conventional paper filing. (39495)

  Signed-off by JC6681 7/15/2020 11:43 AM EDT

- Form 8868 Extension Information. Form 990 is allowed one 6-month extension. The extension for Form 990 is automatic and must be requested by filing Form 8868 on or before November 15, 2019. Form 990-T is being prepared as a corporation and is also allowed one automatic 6-month extension. The extension for Form 990-T must be requested by filing Form 8868 on or before November 15, 2019. (34478)

  Signed-off by JC6681 7/2/2020 10:31 AM EDT

- Federal Form 990-T. Form 990-T has been prepared but is not available for electronic filing with the IRS. Form 990-T has been included in the printed government copy; please separately mail this form and all corresponding supporting forms and attachments to:

  Department of the Treasury
  Internal Revenue Service Center
  Ogden, UT 84201-0027 (37200)

  Signed-off by JC6681 7/2/2020 10:31 AM EDT

- The return contains Form F-1120D, return data Pages 1 and 2. The data on this form is a continuous summary of the information from Form F-1120, Pages 1 through 6, in a two-page machine-readable format that is to be included with the forms sent to the Florida Department of Revenue. Please ensure that all pages of Florida F-1120, Pages 1 through 6 and these two pages are filed in their entirety. (33569)

  Signed-off by JC6681 7/2/2020 10:31 AM EDT

Draft 2020-07-15

Form	Description	Amount\Text
F-1120 Pg1,2	JC6681 - 07/02/20 10:23 AM	Carol O'Neil
F-1120 Pg1,2	JC6681 - 07/02/20 10:23 AM	(561) 842-5814

Draft 2020-07-15

Form

990 Page 9
990 Page 10

Draft 2020-07-15

Worksheet: Form 990 Return of Organization Exempt from Income Tax
Section: Statement of Functional Expenses
Depreciation - prog services.....181,009
Depreciation - mgmt & general.....11,555
Depreciation - fundraising.....3,935
Officer comp - program service.....60,783
Officer comp - mgmt & general.....3,896
Officer comp - fundraising.....1,321
Worksheet: State and City Common Data
Section: General Information
Where incorporated - override.....FLORIDA
Phone number - override.....(561) 842-5814

Draft 2020-07-15

Adjust to Audit

Basis
Adjustments

DP-1 Adjust to AUdit Report

Basis

DP-1 Adjust to Audit Report

Basis

jc - 01/16/13 03:52PM Interview Form DP-1

Basis
Adjust TO Audit Report
Adjust TO Audit Report

jc - 01/16/13 04:00PM Interview Form DP-1

Adjust TO Audit Report

jc - 01/16/13 04:00PM Interview Form DP-1

Adjust TO Audit Report

Draft 2020-07-15

2018 Return Summary

Seagull Services	59-1879968

Form 990:

Total Revenue	3,913,389.
Total Expenses	3,461,537.
Excess <Deficit>	451,852.
Beginning Net Assets	1,800,965.
Changes in Net Assets	0.
Ending Net Assets	2,252,817.

Balance Sheet Analysis

Ending Total Assets	3,515,687.
Ending Total Liabilities	1,262,870.
Ending Total Net Assets or Fund Balances	2,252,817.
Ending Total Assets Minus Liabilities and Net Assets	0.
Ending Net Assets Difference Between Page 1 and Page 11	0.

Form 990-T:

Taxable Income	0.
Tax	0.
Credits	0.
Other Credits and Payments	0.
Total Due <Refund>	0.

Draft 2020-07-15

2018 Return Summary

Seagull Services 59-1879968

Florida Form F-1120:

Taxable Income	0.
Total Tax	0.

826310 04-01-18

Draft 2020-07-15

2018 Return Summary

Seagull Services 59-1879968

	Federal	Federal
Form Name	990	990-T
E-file Requested	Yes	No **
Due Date	11/15/19	11/15/19
Extended Due Date		
Direct Deposit	N/A	N/A
Electronic Withdrawal	N/A	N/A
Date Calculated	07/15/20	07/15/20
Time Calculated	10:17:39	10:17:39
Release Version	2018.06000	2018.06000

** Not Available for E-file

826310 04-01-18

Draft 2020-07-15

2018 Return Summary

Seagull Services 59-1879968

	Florida
Form Name	Form F-1120
E-file Requested	Yes
Due Date	12/02/19
Extended Due Date	
Direct Deposit	N/A
Electronic Withdrawal	N/A
Date Calculated	07/15/20
Time Calculated	10:17:39
Release Version	2018.06000

** Not Available for E-file

826310 04-01-18

Draft 2020-07-15

Holyfield & Thomas, LLC
Certified Public Accountants & Advisors
125 Butler Street • West Palm Beach, FL 33407
(561) 689-6000 • Fax (561) 689-6001 • www.holyfieldandthomas.com

CLIENT: 0580800
July 15, 2020

SEAGULL SERVICES
3879 BYRON DRIVE
WEST PALM BEACH, FL 33404

PROFESSIONAL SERVICES RENDERED IN THE PREPARATION OF YOUR 2018 EXEMPT ORGANIZATION TAX RETURNS, INCLUDING:

FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX
SCHEDULE A, PUBLIC CHARITY STATUS AND PUBLIC SUPPORT
SCHEDULE B, SCHEDULE OF CONTRIBUTORS
SCHEDULE D, SUPPLEMENTAL FINANCIAL STATEMENT
SCHEDULE G, SUPPL INFO FUNDRAISING/GAMING ACT
SCHEDULE J, COMPENSATION INFORMATION
SCHEDULE O, SUPPLEMENTAL INFORMATION
FORM 4562, DEPRECIATION AND AMORTIZATION
FORM 8879-EO, E-FILE SIGNATURE AUTHORIZATION
FORM 990-T, UNRELATED BUSINESS INCOME RETURN
CURRENT YEAR DEPRECIATION REPORT
NEXT YEAR DEPRECIATION REPORT
FL F-1120, INCOME TAX RETURN

TAX PREPARATION FEE

Draft 2020-07-15

Holyfield & Thomas, LLC
Certified Public Accountants & Advisors
125 Butler Street • West Palm Beach, FL 33407
(561) 689-6000 • Fax (561) 689-6001 • www.holyfieldandthomas.com

Seagull Services
3879 Byron Drive
West Palm Beach, FL 33404
Attention: Barbara Nurenberg, President and CEO

Dear Ms. Nurenberg,

Enclosed is the organization's 2018 Exempt Organization returns. The state Exempt Organization return is also enclosed. These should be signed, dated, and mailed, as indicated.

Specific filing instructions are as follows.

FORM 990 RETURN:

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-EO to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS. Return Form 8879-EO to us as soon as possible.

FORM 990-T RETURN:

No amount is due on Form 990-T.

Please sign and mail as soon as possible.

Mail to:
Department of the Treasury
Internal Revenue Service Center
Ogden, UT 84201-0027

FLORIDA FORM F-1120 RETURN:

The Florida Form F-1120 return has been prepared for electronic filing. If you wish to have it transmitted electronically to the Florida DOR, please contact our office. We will then submit the electronic return to the Florida DOR. Do not mail the paper copy of the return to the Florida DOR.

No payment is required.

We sincerely appreciate the opportunity to serve you. Please contact us if you have any questions concerning the tax returns.

Sincerely,

Draft 2020-07-15

Holyfield & Thomas, LLC

Draft 2020-07-15

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

June 30, 2019

Prepared For:

Seagull Services
3879 Byron Drive
West Palm Beach, FL 33404

Prepared By:

Holyfield & Thomas, LLC
125 Butler Street
West Palm Beach, FL 33407

Amount Due or Refund:

Not applicable

Make Check Payable To:

Not applicable

Mail Tax Return and Check (if applicable) To:

Not applicable

Return Must be Mailed On or Before:

Not applicable

Special Instructions:

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-EO to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS. Return Form 8879-EO to us as soon as possible.

Draft 2020-07-15

TAX RETURN FILING INSTRUCTIONS

FORM 990-T

FOR THE YEAR ENDING
June 30, 2019

Prepared For:

Seagull Services
3879 Byron Drive
West Palm Beach, FL 33404

Prepared By:

Holyfield & Thomas, LLC
125 Butler Street
West Palm Beach, FL 33407

Amount Due or Refund:

No amount is due.

Make Check Payable To:

No amount is due.

Mail Tax Return and Check (if applicable) To:

Department of the Treasury
Internal Revenue Service Center
Ogden, UT 84201-0027

Return Must be Mailed On or Before:

As soon as possible.

Special Instructions:

The return should be signed and dated.

Draft 2020-07-15

FEDERAL INFORMATIONAL FORMS

Draft 2020-07-15

Schedule A — Identification of Excess Contributions Included on Part II, Line 5 — 2018

** Do Not File **
*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
Lillian and Joseph Schwarz Foundation	412,500.	224,050.

Total Excess Contributions to Schedule A, Part II, Line 5 .... 224,050.

Draft 2020-07-15

DEPRECIATION VARIANCE REPORT

ASSET NUMBER	DESCRIPTION	ACCOUNTANT'S CALCULATED DEPRECIATION	SYSTEM CALCULATED DEPRECIATION	VARIANCE
65	Building	4,006.	2,942.	1,064.
341	Vehicle	1,458.		1,458.

828141 04-01-18

Draft 2020-07-15

2018 DEPRECIATION AND AMORTIZATION REPORT

Rental Revenues RENT 1

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	Buildings														
321	BUILDING (RENTAL ALLOCATION)	07/01/09	SL	40.00		16	10,000.				10,000.	2,224.		250.	2,474.
	* 990 Rental Total Buildings						10,000.				10,000.	2,224.		250.	2,474.
	* 990 Rental Total -						10,000.				10,000.	2,224.		250.	2,474.
	* Grand Total 990 Rental Depr & Amort						10,000.				10,000.	2,224.		250.	2,474.

828111 04-01-18

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Draft 2020-07-15

2018 DEPRECIATION AND AMORTIZATION REPORT

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	Machinery and Equipment			.000	HY	16									
	Machinery and Equipment			.000	HY	16									
	Machinery & Equipment														
2	Machinery and Equipment	01/01/95	SL	5.00	HY	17	229,565.				229,565.	229,565.		0.	229,565.
38	Machinery and Equipment	09/01/02	SL	5.00	HY	17	3,256.				3,256.	3,256.		0.	3,256.
39	Machinery and Equipment	09/01/02	SL	5.00	HY	17	4,175.				4,175.	4,175.		0.	4,175.
40	Machinery and Equipment	09/01/02	SL	5.00	HY	17	6,327.				6,327.	6,327.		0.	6,327.
41	Machinery and Equipment	09/01/02	SL	5.00	HY	17	1,155.				1,155.	1,155.		0.	1,155.
43	Machinery and Equipment	07/01/03	SL	5.00	HY	17	9,500.				9,500.	9,500.		0.	9,500.
46	Machinery and Equipment	09/01/03	SL	5.00	HY	17	3,556.				3,556.	3,556.		0.	3,556.
48	Machinery and Equipment	10/01/01	SL	5.00	HY	17	1,541.				1,541.	1,541.		0.	1,541.
62	Machinery and Equipment	01/01/00	SL	10.00		16	15,186.				15,186.	15,186.		0.	15,186.
110	Machinery and Equipment	07/03/12	SL	5.00		16	2,892.				2,892.	2,892.		0.	2,892.
113	Machinery and Equipment	09/01/03	SL	5.00	HY	17	1,750.				1,750.	1,750.		0.	1,750.
114	Machinery and Equipment	12/20/12	SL	5.00		16	1,454.				1,454.	1,454.		0.	1,454.
117	Machinery and Equipment	02/15/13	SL	5.00		16	1,500.				1,500.	1,500.		0.	1,500.
120	Machinery and Equipment	06/30/13	SL	5.00		16	2,382.				2,382.	2,382.		0.	2,382.
125	Machinery and Equipment	03/16/05	SL	7.00	HY	17	1,390.				1,390.	1,390.		0.	1,390.

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Draft 2020-07-15

2018 DEPRECIATION AND AMORTIZATION REPORT

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
126	Machinery and Equipment	04/25/05	SL	7.00	HY	17	4,325.				4,325.	4,325.		0.	4,325.
151	Machinery and Equipment	05/15/05	SL	5.00	HY	17	2,152.				2,152.	2,152.		0.	2,152.
161	Machinery and Equipment	11/24/04	SL	5.00	HY	17	3,374.				3,374.	3,374.		0.	3,374.
162	Machinery and Equipment	06/30/04	SL	5.00	HY	17	16,000.				16,000.	16,000.		0.	16,000.
166	Machinery and Equipment	08/19/05	SL	5.00	MQ	17	612.				612.	612.		0.	612.
169	Machinery and Equipment	01/31/06	SL	5.00	MQ	17	1,250.				1,250.	1,250.		0.	1,250.
170	Machinery and Equipment	05/15/06	SL	5.00	MQ	17	5,000.				5,000.	5,000.		0.	5,000.
192	Machinery and Equipment	06/30/07	SL	5.00	HY	17	28,487.				28,487.	28,487.		0.	28,487.
193	Machinery and Equipment	07/27/06	SL	5.00	HY	17	2,262.				2,262.	2,262.		0.	2,262.
194	Machinery and Equipment	08/10/06	SL	5.00	HY	17	5,939.				5,939.	5,939.		0.	5,939.
195	Machinery and Equipment	04/24/07	SL	5.00	HY	17	4,194.				4,194.	4,194.		0.	4,194.
205	Machinery and Equipment	07/18/07	SL	5.00	MQ	16	7,609.				7,609.	7,609.		0.	7,609.
208	Machinery and Equipment	08/08/07	SL	5.00		16	1,327.				1,327.	1,327.		0.	1,327.
209	Machinery and Equipment	12/18/07	SL	5.00		16	3,200.				3,200.	3,200.		0.	3,200.
211	Machinery and Equipment	12/21/07	SL	5.00		16	1,550.				1,550.	1,550.		0.	1,550.
212	Machinery and Equipment	06/06/08	SL	5.00		16	5,660.				5,660.	5,660.		0.	5,660.
230	Machinery and Equipment	10/01/08	SL	3.00		16	1,303.				1,303.	1,303.		0.	1,303.
231	Machinery and Equipment	05/01/09	SL	5.00		16	3,000.				3,000.	3,000.		0.	3,000.

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Draft 2020-07-15

2018 DEPRECIATION AND AMORTIZATION REPORT

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
246	Machinery and Equipment	08/01/09	SL	5.00		16	3,852.				3,852.	3,852.		0.	3,852.
247	Machinery and Equipment	02/11/10	SL	5.00		16	1,887.				1,887.	1,887.		0.	1,887.
248	Machinery and Equipment	02/11/10	SL	1.00		16	24,950.				24,950.	24,950.		0.	24,950.
249	Machinery and Equipment	04/19/10	SL	5.00		16	3,812.				3,812.	3,812.		0.	3,812.
250	Machinery and Equipment	04/22/10	SL	5.00		16	8,960.				8,960.	8,960.		0.	8,960.
252	Machinery and Equipment	10/12/12	SL	10.00		16	1,250.				1,250.	708.		125.	833.
255	Machinery and Equipment	12/18/07	SL	5.00		16	3,000.				3,000.	3,000.		0.	3,000.
256	Machinery and Equipment	11/15/10	SL	5.00		16	3,946.				3,946.	3,946.		0.	3,946.
257	Machinery and Equipment	11/15/10	SL	5.00		16	6,021.				6,021.	6,021.		0.	6,021.
258	Machinery and Equipment	11/15/10	SL	5.00		16	1,900.				1,900.	1,900.		0.	1,900.
259	Machinery and Equipment	11/15/10	SL	5.00		16	6,105.				6,105.	6,072.		0.	6,072.
260	Machinery and Equipment	11/01/10	SL	5.00		16	2,199.				2,199.	2,199.		0.	2,199.
261	Machinery and Equipment	11/12/10	SL	5.00		16	1,414.				1,414.	1,414.		0.	1,414.
262	Machinery and Equipment	05/23/11	SL	5.00		16	2,426.				2,426.	2,426.		0.	2,426.
263	Machinery and Equipment	06/15/11	SL	5.00		16	3,588.				3,588.	3,588.		0.	3,588.
264	Machinery and Equipment	05/23/11	SL	7.00		16	41,880.				41,880.	41,880.		0.	41,880.
265	Machinery and Equipment	07/13/10	SL	5.00		16	2,000.				2,000.	2,000.		0.	2,000.
266	Machinery and Equipment	07/13/10	SL	5.00		16	2,700.				2,700.	2,700.		0.	2,700.

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Draft 2020-07-15

2018 DEPRECIATION AND AMORTIZATION REPORT

Form 990 Page 10 990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
267	Machinery and Equipment	07/27/10	SL	5.00		16	8,067.				8,067.	8,067.		0.	8,067.
268	Machinery and Equipment	08/18/10	SL	5.00		16	1,350.				1,350.	1,350.		0.	1,350.
269	Machinery and Equipment	10/01/10	SL	5.00		16	3,541.				3,541.	3,541.		0.	3,541.
270	Machinery and Equipment	11/13/10	SL	5.00		16	3,330.				3,330.	3,330.		0.	3,330.
271	Machinery and Equipment	03/17/11	SL	5.00		16	4,953.				4,953.	4,953.		0.	4,953.
272	Machinery and Equipment	01/17/11	SL	5.00		16	4,099.				4,099.	4,099.		0.	4,099.
273	Machinery and Equipment	01/19/11	SL	5.00		16	8,000.				8,000.	8,000.		0.	8,000.
274	Machinery and Equipment	02/24/11	SL	5.00		16	1,095.				1,095.	1,095.		0.	1,095.
275	Machinery and Equipment	05/19/11	SL	5.00		16	1,600.				1,600.	1,600.		0.	1,600.
276	Machinery and Equipment	06/16/11	SL	5.00		16	1,800.				1,800.	1,800.		0.	1,800.
290	Machinery and Equipment	01/21/11	SL	5.00		16	899.				899.	899.		0.	899.
294	Machinery and Equipment	07/16/11	SL	5.00		16	1,458.				1,458.	1,458.		0.	1,458.
295	Machinery and Equipment	07/19/11	SL	5.00		16	3,815.				3,815.	3,571.		0.	3,571.
296	Machinery and Equipment	07/22/11	SL	5.00		16	1,140.				1,140.	1,140.		0.	1,140.
297	Machinery and Equipment	08/04/11	SL	5.00		16	2,025.				2,025.	2,025.		0.	2,025.
298	Machinery and Equipment	08/20/11	SL	5.00		16	1,150.				1,150.	1,150.		0.	1,150.
300	Machinery and Equipment	08/29/11	SL	5.00		16	1,273.				1,273.	1,273.		0.	1,273.
301	Machinery and Equipment	09/06/11	SL	5.00		16	1,706.				1,706.	1,706.		0.	1,706.

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(D) - Asset disposed

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
302	Machinery and Equipment	10/20/11	SL	5.00		16	2,815.				2,815.	2,721.		0.	2,721.
309	Machinery and Equipment	07/01/11	SL	5.00		16	4,184.				4,184.	4,184.		0.	4,184.
310	Machinery and Equipment	08/31/11	SL	5.00		16	2,199.				2,199.	2,199.		0.	2,199.
311	Machinery and Equipment	09/30/11	SL	5.00		16	1,661.				1,661.	1,661.		0.	1,661.
312	Machinery and Equipment	01/24/12	SL	5.00		16	1,222.				1,222.	1,222.		0.	1,222.
313	Machinery and Equipment	07/01/11	SL	5.00		16	1,140.				1,140.	1,140.		0.	1,140.
314	Machinery and Equipment	06/30/12	SL	5.00		16	1,443.				1,443.	1,443.		0.	1,443.
315	Machinery and Equipment	06/30/12	SL	5.00		16	989.				989.	989.		0.	989.
316	Machinery and Equipment	09/23/11	SL	5.00		16	1,750.				1,750.	1,750.		0.	1,750.
317	Machinery and Equipment	09/09/11	SL	5.00		16	1,330.				1,330.	1,086.		0.	1,086.
322	Machinery and Equipment	07/03/12	SL	5.00		16	5,833.				5,833.	5,833.		0.	5,833.
323	Machinery and Equipment	07/18/12	SL	5.00		16	4,850.				4,850.	4,850.		0.	4,850.
324	Machinery and Equipment	06/30/13	SL	5.00		16	3,634.				3,634.	3,634.		0.	3,634.
325	Machinery and Equipment	06/30/13	SL	5.00		16	8,319.				8,319.	8,319.		0.	8,319.
326	Machinery and Equipment	06/30/13	SL	5.00		16	1,240.				1,240.	1,240.		0.	1,240.
327	Machinery and Equipment	10/30/12	SL	5.00		16	7,250.				7,250.	7,250.		0.	7,250.
328	Machinery and Equipment	12/11/12	SL	5.00		16	3,040.				3,040.	3,040.		0.	3,040.
329	Machinery and Equipment	12/13/12	SL	5.00		16	1,435.				1,435.	1,435.		0.	1,435.

(D) - Asset disposed

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
330	Machinery and Equipment	12/18/12	SL	5.00		16	5,094.				5,094.	5,094.		0.	5,094.
331	Machinery and Equipment	12/27/12	SL	5.00		16	1,640.				1,640.	1,640.		0.	1,640.
332	Machinery and Equipment	01/28/13	SL	5.00		16	1,238.				1,238.	1,238.		0.	1,238.
333	Machinery and Equipment	02/07/13	SL	5.00		16	6,220.				6,220.	6,220.		0.	6,220.
334	Machinery and Equipment	05/01/13	SL	5.00		16	1,926.				1,926.	1,926.		0.	1,926.
335	Machinery and Equipment	05/03/13	SL	5.00		16	15,689.				15,689.	15,689.		0.	15,689.
336	Machinery and Equipment	06/30/13	SL	5.00		16	7,570.				7,570.	7,570.		0.	7,570.
337	Machinery and Equipment	02/14/13	SL	5.00		16	2,399.				2,399.	2,399.		0.	2,399.
344	Machinery and Equipment	08/21/13	SL	5.00		16	1,350.				1,350.	1,305.		45.	1,350.
345	Machinery and Equipment	06/30/14	SL	3.00		16	2,394.				2,394.	2,394.		0.	2,394.
346	Machinery and Equipment	07/28/13	SL	3.00		16	3,798.				3,798.	3,798.		0.	3,798.
347	Machinery and Equipment	02/08/14	SL	3.00		16	3,800.				3,800.	3,800.		0.	3,800.
348	Machinery and Equipment	05/30/14	SL	5.00		16	5,780.				5,780.	4,720.		1,060.	5,780.
349	Machinery and Equipment	06/30/13	SL	5.00		16	1,450.				1,450.	1,450.		0.	1,450.
350	Machinery and Equipment	03/07/14	SL	5.00		16	1,848.				1,848.	1,603.		245.	1,848.
383	Machinery and Equipment	01/28/16	SL	5.00		16	2,921.				2,921.	1,411.		584.	1,995.
385	Machinery and Equipment	06/30/17	SL	5.00		16	8,012.				8,012.	1,602.		1,602.	3,204.
390	(D)Machinery and Equipment	01/01/95	SL	5.00		16	37,111.				37,111.	37,111.		0.	37,111.

(D) - Asset disposed

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	* 990 Page 10 Total Machinery & Equipment						720,638.				720,638.	710,211.		3,661.	713,872.
	* 990 Page 10 Total -						720,638.				720,638.	710,211.		3,661.	713,872.
	Land			.000	HY	16									
	Land														
50	Land	01/01/95	L				150,000.				150,000.			0.	
52	(D)Land	01/01/95	L				200,000.				200,000.			0.	
	* 990 Page 10 Total Land						350,000.				350,000.	0.		0.	0.
	* 990 Page 10 Total -						350,000.				350,000.	0.		0.	0.
	Buildings														
65	Building	11/01/97	ADS	40.00	HY	17	117,690.				117,690.	85,622.		2,942.	88,564.
88	Building	08/01/97	SL	10.00	HY	17	5,408.				5,408.	5,408.		0.	5,408.
91	Building	04/01/02	SL	10.00	HY	17	4,150.				4,150.	4,150.		0.	4,150.
92	Building	01/01/03	SL	5.00	HY	17	4,720.				4,720.	4,720.		0.	4,720.
93	Building	04/01/03	SL	5.00	HY	17	6,556.				6,556.	6,556.		0.	6,556.
94	Building	05/01/03	SL	5.00	HY	17	3,452.				3,452.	3,452.		0.	3,452.
118	Building	01/01/03	ADS	40.00	HY	17	150,409.				150,409.	45,230.		3,760.	48,990.
119	Building	01/01/03	ADS	40.00	HY	17	338,643.				338,643.	118,524.		11,524.	130,048.
123	Building	06/30/05	ADS	40.00	HY	17	69,350.				69,350.	15,500.		1,734.	17,234.

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127	Building	03/11/05	SL	7.00	HY	17	2,443.				2,443.	2,443.		0.	2,443.
163	Building	06/15/03	SL	5.00	HY	17	605.				605.	605.		0.	605.
164	Building	06/15/03	SL	5.00	HY	17	1,017.				1,017.	1,017.		0.	1,017.
165	Building	07/21/05	SL	5.00	MQ	17	4,500.				4,500.	4,500.		0.	4,500.
167	Building	11/03/05	SL	5.00	MQ	17	1,466.				1,466.	1,466.		0.	1,466.
168	Building	01/26/06	SL	5.00	MQ	17	1,056.				1,056.	1,056.		0.	1,056.
172	Building	06/30/06	SL	15.00	MQ	17	40,768.				40,768.	32,617.		2,718.	35,335.
173	Building	08/12/05	SL	10.00	MQ	17	2,815.				2,815.	2,815.		0.	2,815.
174	Building	09/14/05	SL	5.00	MQ	17	1,000.				1,000.	1,000.		0.	1,000.
176	Building	03/09/06	SL	10.00	MQ	17	4,500.				4,500.	4,500.		0.	4,500.
177	Building	08/01/06	SL	5.00	MQ	17	5,400.				5,400.	5,400.		0.	5,400.
184	Building	08/22/06	SL	5.00	HY	17	6,305.				6,305.	6,305.		0.	6,305.
185	Building	04/13/07	SL	5.00	HY	17	3,260.				3,260.	3,260.		0.	3,260.
186	Building	04/13/07	SL	5.00	HY	17	8,437.				8,437.	8,437.		0.	8,437.
187	Building	12/01/06	SL	5.00	HY	17	8,560.				8,560.	8,560.		0.	8,560.
188	Building	11/14/06	SL	5.00	HY	17	6,500.				6,500.	6,500.		0.	6,500.
189	Building	06/12/07	SL	5.00	HY	17	1,802.				1,802.	1,802.		0.	1,802.
198	Building	06/30/07	SL	40.00		16	6,733.				6,733.	1,848.		168.	2,016.

(D) - Asset disposed

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207	Building	08/08/07	SL	5.00		16	677.				677.	677.		0.	677.
213	Building	04/08/08	SL	10.00		16	87,555.				87,555.	86,369.		0.	86,369.
214	Building	02/25/81	SL	5.00		16	2,268.				2,268.	2,268.		0.	2,268.
215	Building	08/24/07	SL	5.00		16	13,034.				13,034.	13,034.		0.	13,034.
216	Building	03/19/08	SL	5.00		16	10,442.				10,442.	10,442.		0.	10,442.
217	Building	03/03/08	SL	5.00		16	1,110.				1,110.	1,110.		0.	1,110.
218	Building	02/28/08	SL	5.00		16	4,938.				4,938.	4,938.		0.	4,938.
219	Building	02/29/08	SL	10.00		16	6,973.				6,973.	6,970.		0.	6,970.
220	Building	04/04/08	SL	5.00		16	2,258.				2,258.	2,258.		0.	2,258.
221	Building	06/02/08	SL	5.00		16	1,395.				1,395.	1,395.		0.	1,395.
222	Building	06/30/08	SL	5.00		16	7,476.				7,476.	7,476.		0.	7,476.
227	Building	06/30/09	SL	5.00		16	1,800.				1,800.	1,800.		0.	1,800.
228	Building	06/30/09	SL	5.00		16	4,725.				4,725.	4,725.		0.	4,725.
229	Building	06/30/09	SL	5.00		16	5,108.				5,108.	5,108.		0.	5,108.
233	Building	01/01/95	ADS	40.00	HY	17	3,058.				3,058.	3,058.		0.	3,058.
234	Building	01/01/10	SL	10.00		16	3,806.				3,806.	3,238.		381.	3,619.
235	Building	10/30/09	SL	10.00		16	7,860.				7,860.	6,812.		786.	7,598.
236	Building	06/15/10	SL	10.00		16	15,505.				15,505.	12,537.		1,551.	14,088.

(D) - Asset disposed

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237	Building	10/19/09	SL	10.00		16	4,489.				4,489.	3,891.		449.	4,340.
238	Building	12/07/09	SL	5.00		16	5,000.				5,000.	5,000.		0.	5,000.
239	Building	06/30/10	SL	5.00		16	3,800.				3,800.	3,800.		0.	3,800.
240	Building	05/24/10	SL	10.00		16	7,451.				7,451.	6,022.		745.	6,767.
241	Building	05/28/10	SL	10.00		16	1,726.				1,726.	1,398.		173.	1,571.
242	Building	10/30/09	SL	40.00		16	450,000.				450,000.	175,520.		11,250.	186,770.
280	Building	06/28/11	SL	5.00		16	3,536.				3,536.	3,536.		0.	3,536.
281	Building	05/16/11	SL	5.00		16	3,457.				3,457.	3,457.		0.	3,457.
282	Building	10/04/10	SL	5.00		16	2,400.				2,400.	2,400.		0.	2,400.
283	Building	08/30/10	SL	5.00		16	5,390.				5,390.	5,390.		0.	5,390.
284	Building	06/30/11	SL	5.00		16	5,750.				5,750.	5,750.		0.	5,750.
285	Building	08/10/10	SL	5.00		16	1,647.				1,647.	1,647.		0.	1,647.
286	Building	06/03/11	SL	5.00		16	3,036.				3,036.	3,036.		0.	3,036.
287	Building	06/30/11	SL	40.00		16	324,046.				324,046.	56,707.		8,101.	64,808.
288	Building	06/30/13	SL	40.00		16	45,299.				45,299.	5,660.		1,132.	6,792.
303	Building	06/20/12	SL	40.00		16	257,577.				257,577.	38,634.		6,439.	45,073.
304	Building	03/09/12	SL	40.00		16	4,216.				4,216.	665.		105.	770.
305	Building	06/30/12	SL	40.00		16	5,250.				5,250.	786.		131.	917.

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(D) - Asset disposed

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351	Building	02/01/14	SL	20.00		16	118,704.				118,704.	24,971.		5,935.	30,906.
352	Building	05/30/14	SL	5.00		16	4,225.				4,225.	3,450.		775.	4,225.
353	Building	07/16/13	SL	5.00		16	3,650.				3,650.	3,589.		61.	3,650.
354	Building	07/19/13	SL	5.00		16	9,750.				9,750.	9,588.		162.	9,750.
355	Building	11/20/13	SL	5.00		16	5,701.				5,701.	5,225.		476.	5,701.
356	Building	05/14/14	SL	10.00		16	18,329.				18,329.	7,637.		1,833.	9,470.
357	Building	06/30/14	SL	10.00		16	32,832.				32,832.	13,132.		3,283.	16,415.
358	Building	07/15/14	SL	5.00		16	2,700.				2,700.	2,160.		540.	2,700.
359	Building	11/21/14	SL	5.00		16	2,500.				2,500.	1,792.		500.	2,292.
360	Building	01/17/15	SL	5.00		16	2,470.				2,470.	1,688.		494.	2,182.
361	Building	06/28/15	SL	5.00		16	7,900.				7,900.	4,740.		1,580.	6,320.
363	Building	09/30/14	SL	5.00		16	3,863.				3,863.	2,898.		773.	3,671.
364	Building	11/24/00	SL	5.00		16	1,460.				1,460.	1,460.		0.	1,460.
365	Building	01/23/15	SL	5.00		16	2,400.				2,400.	1,640.		480.	2,120.
381	Building	01/04/16	SL	20.00		16	15,196.				15,196.	1,900.		760.	2,660.
382	Building	03/28/16	SL	5.00		16	1,679.				1,679.	756.		336.	1,092.
387	Building	07/01/16	SL	15.00		16	249,444.				249,444.	33,260.		16,630.	49,890.
391	(D)Building	01/01/95	SL	15.00		16	133,177.				133,177.	133,177.		0.	133,177.

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(D) - Asset disposed

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	* 990 Page 10 Total Buildings						2,737,583.				2,737,583.	1,133,870.		88,707.	1,222,577.
	* 990 Page 10 Total -						2,737,583.				2,737,583.	1,133,870.		88,707.	1,222,577.
	Transportation Equipment														
100	Vehicle	09/01/01	SL	5.00	HY	17	20,070.				20,070.	20,070.		0.	20,070.
102	Vehicle	12/01/02	SL	5.00	HY	17	16,000.				16,000.	16,000.		0.	16,000.
171	Vehicle	01/08/06	SL	5.00	MQ	17	20,000.				20,000.	20,000.		0.	20,000.
201	Vehicle	04/17/08	SL	5.00	MQ	16	17,021.				17,021.	17,021.		0.	17,021.
203	Vehicle	06/25/08	SL	5.00	MQ	16	19,719.				19,719.	19,719.		0.	19,719.
204	Vehicle	06/25/08	SL	5.00	MQ	16	19,719.				19,719.	19,719.		0.	19,719.
225	Vehicle	12/22/08	SL	5.00		16	24,286.				24,286.	24,286.		0.	24,286.
226	Vehicle	12/22/08	SL	5.00		16	24,286.				24,286.	24,286.		0.	24,286.
245	Vehicle	01/08/10	SL	5.00		16	21,259.				21,259.	21,250.		0.	21,250.
277	Vehicle	10/08/10	SL	5.00		16	3,403.				3,403.	3,403.		0.	3,403.
278	Vehicle	01/05/11	SL	5.00		16	21,379.				21,379.	21,379.		0.	21,379.
279	Vehicle	01/06/11	SL	5.00		16	21,621.				21,621.	21,596.		0.	21,596.
291	Vehicle	04/29/13	SL	5.00		16	2,723.				2,723.	2,723.		0.	2,723.
299	Vehicle	01/20/01	SL	5.00		16	20,026.				20,026.	20,026.		0.	20,026.
338	Vehicle	11/13/12	SL	5.00		16	14,950.				14,950.	14,950.		0.	14,950.

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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2018 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
341	Vehicle	07/09/13	SL	5.00		16	25,393.				25,393.	23,935.		0.	23,935.
342	Vehicle	07/09/13	SL	5.00		16	22,417.				22,417.	22,417.		0.	22,417.
343	Vehicle	07/09/13	SL	5.00		16	22,417.				22,417.	22,417.		0.	22,417.
366	Vehicle	10/31/14	SL	5.00		16	22,381.				22,381.	16,412.		4,476.	20,888.
367	Vehicle	10/31/14	SL	5.00		16	22,381.				22,381.	16,412.		4,476.	20,888.
368	Vehicle	10/31/14	SL	5.00		16	22,381.				22,381.	16,412.		4,476.	20,888.
374	Vehicle	08/25/15	SL	5.00		16	24,247.				24,247.	13,739.		4,849.	18,588.
375	Vehicle	08/25/15	SL	5.00		16	24,247.				24,247.	13,739.		4,849.	18,588.
376	Vehicle	08/25/15	SL	5.00		16	24,247.				24,247.	13,739.		4,849.	18,588.
377	Vehicle	08/25/15	SL	5.00		16	24,247.				24,247.	13,739.		4,849.	18,588.
378	Vehicle	08/25/15	SL	5.00		16	78,680.				78,680.	44,585.		15,736.	60,321.
384	Vehicle	08/25/15	SL	5.00		16	24,247.				24,247.	13,739.		4,849.	18,588.
386	Vehicle	07/01/16	SL	5.00		16	59,577.				59,577.	23,830.		11,915.	35,745.
389	Vehicle	06/30/18	SL	5.00		16	84,832.				84,832.			16,966.	16,966.
392	Vehicles	07/01/18	SL	5.00		16	99,986.				99,986.			19,997.	19,997.
	* 990 Page 10 Total Transportation Equipment						848,142.				848,142.	521,543.		102,287.	623,830.
	* 990 Page 10 Total -						848,142.				848,142.	521,543.		102,287.	623,830.
	Construction in Progress														

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(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	Other														
393	Construction in Progress	07/01/18	NC	.000	HY		10,000.				10,000.			0.	
	* 990 Page 10 Total Other						10,000.				10,000.	0.		0.	0.
	* 990 Page 10 Total - Construction in Progress						10,000.				10,000.	0.		0.	0.
	Other														
144	Loan Closing Costs	01/21/00		180M	HY	43	22,738.				22,738.	22,738.		0.	22,738.
145	Loan Closing Costs	03/31/03		140M	HY	43	6,000.				6,000.	6,000.		0.	6,000.
146	Loan Closing Costs	04/24/03		136M	HY	43	2,053.				2,053.	2,053.		0.	2,053.
196	Loan Closing Costs	09/25/06		150M	HY	43	19,098.				19,098.	17,954.		1,144.	19,098.
253	Loan Closing Costs	10/30/09		84M	HY	43	8,321.				8,321.	8,321.		0.	8,321.
380	Loan Closing Costs	09/03/15		300M	HY	43	23,753.				23,753.	2,692.		950.	3,642.
	* 990 Page 10 Total Other						81,963.				81,963.	59,758.		2,094.	61,852.
	* 990 Page 10 Total - Construction in Progress						81,963.				81,963.	59,758.		2,094.	61,852.
	* Grand Total 990 Page 10 Depr & Amort						4,748,326.				4,748,326.	2,425,382.		196,749.	2,622,131.
	Current Year Activity														
	Beginning balance						4,638,340.			0.	4,638,340.	2,425,382.			2,602,134.
	Acquisitions						109,986.			0.	109,986.	0.			19,997.

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(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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2018 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	Dispositions						370,288.			0.	370,288.	170,288.			170,288.
	Ending balance						4,378,038.			0.	4,378,038.	2,255,094.			2,451,843.
	Ending accum depr less dispositions											2,451,843.			
	Ending book value											1,926,195.			

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(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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2018 DEPRECIATION AND AMORTIZATION REPORT

Rental by non-profit E- 1

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	Buildings														
388	Building	07/09/09	SL	40.00		16	10,000.				10,000.	2,224.		250.	2,474.
	* 990-T Sch E Total Buildings						10,000.				10,000.	2,224.		250.	2,474.
	* 990-T Sch E Total -						10,000.				10,000.	2,224.		250.	2,474.
	* Grand Total 990-T Sch E Depr & Amort						10,000.				10,000.	2,224.		250.	2,474.

828111 04-01-18

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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- CURRENT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	Buildings											
321	BUILDING (RENTAL ALLOCATION)	070109	SL	40.00	16	10,000.			10,000.	2,224.		250.
	* 990 Rental Total Buildings					10,000.		0.	10,000.	2,224.		250.
	* 990 Rental Total -					10,000.		0.	10,000.	2,224.		250.
	* Grand Total 990 Rental Depr & Amort					10,000.		0.	10,000.	2,224.		250.
	Machinery and Equipment											
	Machinery and Equipment											
	Machinery & Equipment											
2	Machinery and Equipment	010195	SL	5.00	17	229,565.			229,565.	229,565.		0.
38	Machinery and Equipment	090102	SL	5.00	17	3,256.			3,256.	3,256.		0.
39	Machinery and Equipment	090102	SL	5.00	17	4,175.			4,175.	4,175.		0.
40	Machinery and Equipment	090102	SL	5.00	17	6,327.			6,327.	6,327.		0.
41	Machinery and Equipment	090102	SL	5.00	17	1,155.			1,155.	1,155.		0.
43	Machinery and Equipment	070103	SL	5.00	17	9,500.			9,500.	9,500.		0.
46	Machinery and Equipment	090103	SL	5.00	17	3,556.			3,556.	3,556.		0.
48	Machinery and Equipment	100101	SL	5.00	17	1,541.			1,541.	1,541.		0.
62	Machinery and Equipment	010100	SL	10.00	16	15,186.			15,186.	15,186.		0.
110	Machinery and Equipment	070312	SL	5.00	16	2,892.			2,892.	2,892.		0.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

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- CURRENT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
113	Machinery and Equipment	090103	SL	5.00	17	1,750.			1,750.	1,750.		0.
114	Machinery and Equipment	122012	SL	5.00	16	1,454.			1,454.	1,454.		0.
117	Machinery and Equipment	021513	SL	5.00	16	1,500.			1,500.	1,500.		0.
120	Machinery and Equipment	063013	SL	5.00	16	2,382.			2,382.	2,382.		0.
125	Machinery and Equipment	031605	SL	7.00	17	1,390.			1,390.	1,390.		0.
126	Machinery and Equipment	042505	SL	7.00	17	4,325.			4,325.	4,325.		0.
151	Machinery and Equipment	051505	SL	5.00	17	2,152.			2,152.	2,152.		0.
161	Machinery and Equipment	112404	SL	5.00	17	3,374.			3,374.	3,374.		0.
162	Machinery and Equipment	063004	SL	5.00	17	16,000.			16,000.	16,000.		0.
166	Machinery and Equipment	081905	SL	5.00	17	612.			612.	612.		0.
169	Machinery and Equipment	013106	SL	5.00	17	1,250.			1,250.	1,250.		0.
170	Machinery and Equipment	051506	SL	5.00	17	5,000.			5,000.	5,000.		0.
192	Machinery and Equipment	063007	SL	5.00	17	28,487.			28,487.	28,487.		0.
193	Machinery and Equipment	072706	SL	5.00	17	2,262.			2,262.	2,262.		0.
194	Machinery and Equipment	081006	SL	5.00	17	5,939.			5,939.	5,939.		0.
195	Machinery and Equipment	042407	SL	5.00	17	4,194.			4,194.	4,194.		0.
205	Machinery and Equipment	071807	SL	5.00	16	7,609.			7,609.	7,609.		0.
208	Machinery and Equipment	080807	SL	5.00	16	1,327.			1,327.	1,327.		0.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

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- CURRENT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
209	Machinery and Equipment	121807	SL	5.00	16	3,200.			3,200.	3,200.		0.
211	Machinery and Equipment	122107	SL	5.00	16	1,550.			1,550.	1,550.		0.
212	Machinery and Equipment	060608	SL	5.00	16	5,660.			5,660.	5,660.		0.
230	Machinery and Equipment	100108	SL	3.00	16	1,303.			1,303.	1,303.		0.
231	Machinery and Equipment	050109	SL	5.00	16	3,000.			3,000.	3,000.		0.
246	Machinery and Equipment	080109	SL	5.00	16	3,852.			3,852.	3,852.		0.
247	Machinery and Equipment	021110	SL	5.00	16	1,887.			1,887.	1,887.		0.
248	Machinery and Equipment	021110	SL	1.00	16	24,950.			24,950.	24,950.		0.
249	Machinery and Equipment	041910	SL	5.00	16	3,812.			3,812.	3,812.		0.
250	Machinery and Equipment	042210	SL	5.00	16	8,960.			8,960.	8,960.		0.
252	Machinery and Equipment	101212	SL	10.00	16	1,250.			1,250.	708.		125.
255	Machinery and Equipment	121807	SL	5.00	16	3,000.			3,000.	3,000.		0.
256	Machinery and Equipment	111510	SL	5.00	16	3,946.			3,946.	3,946.		0.
257	Machinery and Equipment	111510	SL	5.00	16	6,021.			6,021.	6,021.		0.
258	Machinery and Equipment	111510	SL	5.00	16	1,900.			1,900.	1,900.		0.
259	Machinery and Equipment	111510	SL	5.00	16	6,105.			6,105.	6,072.		0.
260	Machinery and Equipment	110110	SL	5.00	16	2,199.			2,199.	2,199.		0.
261	Machinery and Equipment	111210	SL	5.00	16	1,414.			1,414.	1,414.		0.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

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- CURRENT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
262	Machinery and Equipment	052311	SL	5.00	16	2,426.			2,426.	2,426.		0.
263	Machinery and Equipment	061511	SL	5.00	16	3,588.			3,588.	3,588.		0.
264	Machinery and Equipment	052311	SL	7.00	16	41,880.			41,880.	41,880.		0.
265	Machinery and Equipment	071310	SL	5.00	16	2,000.			2,000.	2,000.		0.
266	Machinery and Equipment	071310	SL	5.00	16	2,700.			2,700.	2,700.		0.
267	Machinery and Equipment	072710	SL	5.00	16	8,067.			8,067.	8,067.		0.
268	Machinery and Equipment	081810	SL	5.00	16	1,350.			1,350.	1,350.		0.
269	Machinery and Equipment	100110	SL	5.00	16	3,541.			3,541.	3,541.		0.
270	Machinery and Equipment	111310	SL	5.00	16	3,330.			3,330.	3,330.		0.
271	Machinery and Equipment	031711	SL	5.00	16	4,953.			4,953.	4,953.		0.
272	Machinery and Equipment	011711	SL	5.00	16	4,099.			4,099.	4,099.		0.
273	Machinery and Equipment	011911	SL	5.00	16	8,000.			8,000.	8,000.		0.
274	Machinery and Equipment	022411	SL	5.00	16	1,095.			1,095.	1,095.		0.
275	Machinery and Equipment	051911	SL	5.00	16	1,600.			1,600.	1,600.		0.
276	Machinery and Equipment	061611	SL	5.00	16	1,800.			1,800.	1,800.		0.
290	Machinery and Equipment	012111	SL	5.00	16	899.			899.	899.		0.
294	Machinery and Equipment	071611	SL	5.00	16	1,458.			1,458.	1,458.		0.
295	Machinery and Equipment	071911	SL	5.00	16	3,815.			3,815.	3,571.		0.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

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- CURRENT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
296	Machinery and Equipment	072211	SL	5.00	16	1,140.			1,140.	1,140.		0.
297	Machinery and Equipment	080411	SL	5.00	16	2,025.			2,025.	2,025.		0.
298	Machinery and Equipment	082011	SL	5.00	16	1,150.			1,150.	1,150.		0.
300	Machinery and Equipment	082911	SL	5.00	16	1,273.			1,273.	1,273.		0.
301	Machinery and Equipment	090611	SL	5.00	16	1,706.			1,706.	1,706.		0.
302	Machinery and Equipment	102011	SL	5.00	16	2,815.			2,815.	2,721.		0.
309	Machinery and Equipment	070111	SL	5.00	16	4,184.			4,184.	4,184.		0.
310	Machinery and Equipment	083111	SL	5.00	16	2,199.			2,199.	2,199.		0.
311	Machinery and Equipment	093011	SL	5.00	16	1,661.			1,661.	1,661.		0.
312	Machinery and Equipment	012412	SL	5.00	16	1,222.			1,222.	1,222.		0.
313	Machinery and Equipment	070111	SL	5.00	16	1,140.			1,140.	1,140.		0.
314	Machinery and Equipment	063012	SL	5.00	16	1,443.			1,443.	1,443.		0.
315	Machinery and Equipment	063012	SL	5.00	16	989.			989.	989.		0.
316	Machinery and Equipment	092311	SL	5.00	16	1,750.			1,750.	1,750.		0.
317	Machinery and Equipment	090911	SL	5.00	16	1,330.			1,330.	1,086.		0.
322	Machinery and Equipment	070312	SL	5.00	16	5,833.			5,833.	5,833.		0.
323	Machinery and Equipment	071812	SL	5.00	16	4,850.			4,850.	4,850.		0.
324	Machinery and Equipment	063013	SL	5.00	16	3,634.			3,634.	3,634.		0.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

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- CURRENT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
325	Machinery and Equipment	063013	SL	5.00	16	8,319.			8,319.	8,319.		0.
326	Machinery and Equipment	063013	SL	5.00	16	1,240.			1,240.	1,240.		0.
327	Machinery and Equipment	103012	SL	5.00	16	7,250.			7,250.	7,250.		0.
328	Machinery and Equipment	121112	SL	5.00	16	3,040.			3,040.	3,040.		0.
329	Machinery and Equipment	121312	SL	5.00	16	1,435.			1,435.	1,435.		0.
330	Machinery and Equipment	121812	SL	5.00	16	5,094.			5,094.	5,094.		0.
331	Machinery and Equipment	122712	SL	5.00	16	1,640.			1,640.	1,640.		0.
332	Machinery and Equipment	012813	SL	5.00	16	1,238.			1,238.	1,238.		0.
333	Machinery and Equipment	020713	SL	5.00	16	6,220.			6,220.	6,220.		0.
334	Machinery and Equipment	050113	SL	5.00	16	1,926.			1,926.	1,926.		0.
335	Machinery and Equipment	050313	SL	5.00	16	15,689.			15,689.	15,689.		0.
336	Machinery and Equipment	063013	SL	5.00	16	7,570.			7,570.	7,570.		0.
337	Machinery and Equipment	021413	SL	5.00	16	2,399.			2,399.	2,399.		0.
344	Machinery and Equipment	082113	SL	5.00	16	1,350.			1,350.	1,305.		45.
345	Machinery and Equipment	063014	SL	3.00	16	2,394.			2,394.	2,394.		0.
346	Machinery and Equipment	072813	SL	3.00	16	3,798.			3,798.	3,798.		0.
347	Machinery and Equipment	020814	SL	3.00	16	3,800.			3,800.	3,800.		0.
348	Machinery and Equipment	053014	SL	5.00	16	5,780.			5,780.	4,720.		1,060.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

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- CURRENT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
349	Machinery and Equipment	063013	SL	5.00	16	1,450.			1,450.	1,450.		0.
350	Machinery and Equipment	030714	SL	5.00	16	1,848.			1,848.	1,603.		245.
383	Machinery and Equipment	012816	SL	5.00	16	2,921.			2,921.	1,411.		584.
385	Machinery and Equipment	063017	SL	5.00	16	8,012.			8,012.	1,602.		1,602.
390	(D)Machinery and Equipment	010195	SL	5.00	16	37,111.			37,111.	37,111.		0.
	* 990 Page 10 Total Machinery & Equipme					720,638.		0.	720,638.	710,211.		3,661.
	* 990 Page 10 Total -					720,638.		0.	720,638.	710,211.		3,661.
	Land											
	Land											
50	Land	010195	L			150,000.			150,000.			0.
52	(D)Land	010195	L			200,000.			200,000.			0.
	* 990 Page 10 Total Land					350,000.		0.	350,000.	0.		0.
	* 990 Page 10 Total -					350,000.		0.	350,000.	0.		0.
	Buildings											
65	Building	110197	ADS	40.00	17	117,690.			117,690.	85,622.		2,942.
88	Building	080197	SL	10.00	17	5,408.			5,408.	5,408.		0.
91	Building	040102	SL	10.00	17	4,150.			4,150.	4,150.		0.
92	Building	010103	SL	5.00	17	4,720.			4,720.	4,720.		0.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

Draft 2020-07-15

- CURRENT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
93	Building	040103	SL	5.00	17	6,556.			6,556.	6,556.		0.
94	Building	050103	SL	5.00	17	3,452.			3,452.	3,452.		0.
118	Building	010103	ADS	40.00	17	150,409.			150,409.	45,230.		3,760.
119	Building	010103	ADS	40.00	17	338,643.			338,643.	118,524.		11,524.
123	Building	063005	ADS	40.00	17	69,350.			69,350.	15,500.		1,734.
127	Building	031105	SL	7.00	17	2,443.			2,443.	2,443.		0.
163	Building	061503	SL	5.00	17	605.			605.	605.		0.
164	Building	061503	SL	5.00	17	1,017.			1,017.	1,017.		0.
165	Building	072105	SL	5.00	17	4,500.			4,500.	4,500.		0.
167	Building	110305	SL	5.00	17	1,466.			1,466.	1,466.		0.
168	Building	012606	SL	5.00	17	1,056.			1,056.	1,056.		0.
172	Building	063006	SL	15.00	17	40,768.			40,768.	32,617.		2,718.
173	Building	081205	SL	10.00	17	2,815.			2,815.	2,815.		0.
174	Building	091405	SL	5.00	17	1,000.			1,000.	1,000.		0.
176	Building	030906	SL	10.00	17	4,500.			4,500.	4,500.		0.
177	Building	080106	SL	5.00	17	5,400.			5,400.	5,400.		0.
184	Building	082206	SL	5.00	17	6,305.			6,305.	6,305.		0.
185	Building	041307	SL	5.00	17	3,260.			3,260.	3,260.		0.

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(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

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- CURRENT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
186	Building	041307	SL	5.00	17	8,437.			8,437.	8,437.		0.
187	Building	120106	SL	5.00	17	8,560.			8,560.	8,560.		0.
188	Building	111406	SL	5.00	17	6,500.			6,500.	6,500.		0.
189	Building	061207	SL	5.00	17	1,802.			1,802.	1,802.		0.
198	Building	063007	SL	40.00	16	6,733.			6,733.	1,848.		168.
207	Building	080807	SL	5.00	16	677.			677.	677.		0.
213	Building	040808	SL	10.00	16	87,555.			87,555.	86,369.		0.
214	Building	022581	SL	5.00	16	2,268.			2,268.	2,268.		0.
215	Building	082407	SL	5.00	16	13,034.			13,034.	13,034.		0.
216	Building	031908	SL	5.00	16	10,442.			10,442.	10,442.		0.
217	Building	030308	SL	5.00	16	1,110.			1,110.	1,110.		0.
218	Building	022808	SL	5.00	16	4,938.			4,938.	4,938.		0.
219	Building	022908	SL	10.00	16	6,973.			6,973.	6,970.		0.
220	Building	040408	SL	5.00	16	2,258.			2,258.	2,258.		0.
221	Building	060208	SL	5.00	16	1,395.			1,395.	1,395.		0.
222	Building	063008	SL	5.00	16	7,476.			7,476.	7,476.		0.
227	Building	063009	SL	5.00	16	1,800.			1,800.	1,800.		0.
228	Building	063009	SL	5.00	16	4,725.			4,725.	4,725.		0.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

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- CURRENT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
229	Building	063009	SL	5.00	16	5,108.			5,108.	5,108.		0.
233	Building	010195	ADS	40.00	17	3,058.			3,058.	3,058.		0.
234	Building	010110	SL	10.00	16	3,806.			3,806.	3,238.		381.
235	Building	103009	SL	10.00	16	7,860.			7,860.	6,812.		786.
236	Building	061510	SL	10.00	16	15,505.			15,505.	12,537.		1,551.
237	Building	101909	SL	10.00	16	4,489.			4,489.	3,891.		449.
238	Building	120709	SL	5.00	16	5,000.			5,000.	5,000.		0.
239	Building	063010	SL	5.00	16	3,800.			3,800.	3,800.		0.
240	Building	052410	SL	10.00	16	7,451.			7,451.	6,022.		745.
241	Building	052810	SL	10.00	16	1,726.			1,726.	1,398.		173.
242	Building	103009	SL	40.00	16	450,000.			450,000.	175,520.		11,250.
280	Building	062811	SL	5.00	16	3,536.			3,536.	3,536.		0.
281	Building	051611	SL	5.00	16	3,457.			3,457.	3,457.		0.
282	Building	100410	SL	5.00	16	2,400.			2,400.	2,400.		0.
283	Building	083010	SL	5.00	16	5,390.			5,390.	5,390.		0.
284	Building	063011	SL	5.00	16	5,750.			5,750.	5,750.		0.
285	Building	081010	SL	5.00	16	1,647.			1,647.	1,647.		0.
286	Building	060311	SL	5.00	16	3,036.			3,036.	3,036.		0.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

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- CURRENT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
287	Building	063011	SL	40.00	16	324,046.			324,046.	56,707.		8,101.
288	Building	063013	SL	40.00	16	45,299.			45,299.	5,660.		1,132.
303	Building	062012	SL	40.00	16	257,577.			257,577.	38,634.		6,439.
304	Building	030912	SL	40.00	16	4,216.			4,216.	665.		105.
305	Building	063012	SL	40.00	16	5,250.			5,250.	786.		131.
351	Building	020114	SL	20.00	16	118,704.			118,704.	24,971.		5,935.
352	Building	053014	SL	5.00	16	4,225.			4,225.	3,450.		775.
353	Building	071613	SL	5.00	16	3,650.			3,650.	3,589.		61.
354	Building	071913	SL	5.00	16	9,750.			9,750.	9,588.		162.
355	Building	112013	SL	5.00	16	5,701.			5,701.	5,225.		476.
356	Building	051414	SL	10.00	16	18,329.			18,329.	7,637.		1,833.
357	Building	063014	SL	10.00	16	32,832.			32,832.	13,132.		3,283.
358	Building	071514	SL	5.00	16	2,700.			2,700.	2,160.		540.
359	Building	112114	SL	5.00	16	2,500.			2,500.	1,792.		500.
360	Building	011715	SL	5.00	16	2,470.			2,470.	1,688.		494.
361	Building	062815	SL	5.00	16	7,900.			7,900.	4,740.		1,580.
363	Building	093014	SL	5.00	16	3,863.			3,863.	2,898.		773.
364	Building	112400	SL	5.00	16	1,460.			1,460.	1,460.		0.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

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- CURRENT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
365	Building	012315	SL	5.00	16	2,400.			2,400.	1,640.		480.
381	Building	010416	SL	20.00	16	15,196.			15,196.	1,900.		760.
382	Building	032816	SL	5.00	16	1,679.			1,679.	756.		336.
387	Building	070116	SL	15.00	16	249,444.			249,444.	33,260.		16,630.
391	(D)Building	010195	SL	15.00	16	133,177.			133,177.	133,177.		0.
	* 990 Page 10 Total Buildings					2737583.		0.	2737583.	1133870.		88,707.
	* 990 Page 10 Total - Transportation Equipment					2737583.		0.	2737583.	1133870.		88,707.
100	Vehicle	090101	SL	5.00	17	20,070.			20,070.	20,070.		0.
102	Vehicle	120102	SL	5.00	17	16,000.			16,000.	16,000.		0.
171	Vehicle	010806	SL	5.00	17	20,000.			20,000.	20,000.		0.
201	Vehicle	041708	SL	5.00	16	17,021.			17,021.	17,021.		0.
203	Vehicle	062508	SL	5.00	16	19,719.			19,719.	19,719.		0.
204	Vehicle	062508	SL	5.00	16	19,719.			19,719.	19,719.		0.
225	Vehicle	122208	SL	5.00	16	24,286.			24,286.	24,286.		0.
226	Vehicle	122208	SL	5.00	16	24,286.			24,286.	24,286.		0.
245	Vehicle	010810	SL	5.00	16	21,259.			21,259.	21,250.		0.
277	Vehicle	100810	SL	5.00	16	3,403.			3,403.	3,403.		0.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

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- CURRENT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
278	Vehicle	010511	SL	5.00	16	21,379.			21,379.	21,379.		0.
279	Vehicle	010611	SL	5.00	16	21,621.			21,621.	21,596.		0.
291	Vehicle	042913	SL	5.00	16	2,723.			2,723.	2,723.		0.
299	Vehicle	012001	SL	5.00	16	20,026.			20,026.	20,026.		0.
338	Vehicle	111312	SL	5.00	16	14,950.			14,950.	14,950.		0.
341	Vehicle	070913	SL	5.00	16	25,393.			25,393.	23,935.		0.
342	Vehicle	070913	SL	5.00	16	22,417.			22,417.	22,417.		0.
343	Vehicle	070913	SL	5.00	16	22,417.			22,417.	22,417.		0.
366	Vehicle	103114	SL	5.00	16	22,381.			22,381.	16,412.		4,476.
367	Vehicle	103114	SL	5.00	16	22,381.			22,381.	16,412.		4,476.
368	Vehicle	103114	SL	5.00	16	22,381.			22,381.	16,412.		4,476.
374	Vehicle	082515	SL	5.00	16	24,247.			24,247.	13,739.		4,849.
375	Vehicle	082515	SL	5.00	16	24,247.			24,247.	13,739.		4,849.
376	Vehicle	082515	SL	5.00	16	24,247.			24,247.	13,739.		4,849.
377	Vehicle	082515	SL	5.00	16	24,247.			24,247.	13,739.		4,849.
378	Vehicle	082515	SL	5.00	16	78,680.			78,680.	44,585.		15,736.
384	Vehicle	082515	SL	5.00	16	24,247.			24,247.	13,739.		4,849.
386	Vehicle	070116	SL	5.00	16	59,577.			59,577.	23,830.		11,915.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

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- CURRENT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
389	Vehicle	063018	SL	5.00	16	84,832.			84,832.			16,966.
392	Vehicles	070118	SL	5.00	16	99,986.			99,986.			19,997.
	* 990 Page 10 Total Transportation Equi					848,142.		0.	848,142.	521,543.		102,287.
	* 990 Page 10 Total -					848,142.		0.	848,142.	521,543.		102,287.
	Construction in Progress											
	Other											
393	Construction in Progress	070118	NC	.000		10,000.			10,000.			0.
	* 990 Page 10 Total Other					10,000.		0.	10,000.	0.		0.
	* 990 Page 10 Total - Construction in P					10,000.		0.	10,000.	0.		0.
	Other											
144	Loan Closing Costs	012100		180M	43	22,738.			22,738.	22,738.		0.
145	Loan Closing Costs	033103		140M	43	6,000.			6,000.	6,000.		0.
146	Loan Closing Costs	042403		136M	43	2,053.			2,053.	2,053.		0.
196	Loan Closing Costs	092506		150M	43	19,098.			19,098.	17,954.		1,144.
253	Loan Closing Costs	103009		84M	43	8,321.			8,321.	8,321.		0.
380	Loan Closing Costs	090315		300M	43	23,753.			23,753.	2,692.		950.
	* 990 Page 10 Total Other					81,963.		0.	81,963.	59,758.		2,094.
	* 990 Page 10 Total - Construction in P					81,963.		0.	81,963.	59,758.		2,094.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

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2018 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	* Grand Total 990 Page 10 Depr & Amor					4748326.		0.	4748326.	2425382.		196,749.
	Buildings											
388	Building	070909	SL	40.00	16	10,000.			10,000.	2,224.		250.
	* 990-T Sch E Total Buildings					10,000.		0.	10,000.	2,224.		250.
	* 990-T Sch E Total -					10,000.		0.	10,000.	2,224.		250.
	* Grand Total 990-T Sch E Depr & Amort					10,000.		0.	10,000.	2,224.		250.
	Current Year Activity											
	Beginning balance					4658340.		0.	4658340.	2429830.		
	Acquisitions					109,986.		0.	109,986.	0.		
	Dispositions					370,288.		0.	370,288.	170,288.		
	Ending balance					4398038.		0.	4398038.	2259542.		

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(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

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- NEXT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
	Buildings								
321	BUILDING (RENTAL ALLOCATION)	070109	SL	40.00	10,000.		10,000.	2,474.	250.
	* 990 Rental Total Buildings				10,000.		10,000.	2,474.	250.
	* 990 Rental Total -				10,000.		10,000.	2,474.	250.
	* Grand Total 990 Rental Depr & Amort				10,000.		10,000.	2,474.	250.
	Machinery and Equipment			.000					0.
	Machinery and Equipment			.000					0.
	Machinery & Equipment								
2	Machinery and Equipment	010195	SL	5.00	229,565.		229,565.	229,565.	0.
38	Machinery and Equipment	090102	SL	5.00	3,256.		3,256.	3,256.	0.
39	Machinery and Equipment	090102	SL	5.00	4,175.		4,175.	4,175.	0.
40	Machinery and Equipment	090102	SL	5.00	6,327.		6,327.	6,327.	0.
41	Machinery and Equipment	090102	SL	5.00	1,155.		1,155.	1,155.	0.
43	Machinery and Equipment	070103	SL	5.00	9,500.		9,500.	9,500.	0.
46	Machinery and Equipment	090103	SL	5.00	3,556.		3,556.	3,556.	0.
48	Machinery and Equipment	100101	SL	5.00	1,541.		1,541.	1,541.	0.
62	Machinery and Equipment	010100	SL	10.00	15,186.		15,186.	15,186.	0.
110	Machinery and Equipment	070312	SL	5.00	2,892.		2,892.	2,892.	0.
113	Machinery and Equipment	090103	SL	5.00	1,750.		1,750.	1,750.	0.
114	Machinery and Equipment	122012	SL	5.00	1,454.		1,454.	1,454.	0.
117	Machinery and Equipment	021513	SL	5.00	1,500.		1,500.	1,500.	0.
120	Machinery and Equipment	063013	SL	5.00	2,382.		2,382.	2,382.	0.
125	Machinery and Equipment	031605	SL	7.00	1,390.		1,390.	1,390.	0.
126	Machinery and Equipment	042505	SL	7.00	4,325.		4,325.	4,325.	0.
151	Machinery and Equipment	051505	SL	5.00	2,152.		2,152.	2,152.	0.
161	Machinery and Equipment	112404	SL	5.00	3,374.		3,374.	3,374.	0.
162	Machinery and Equipment	063004	SL	5.00	16,000.		16,000.	16,000.	0.
166	Machinery and Equipment	081905	SL	5.00	612.		612.	612.	0.
169	Machinery and Equipment	013106	SL	5.00	1,250.		1,250.	1,250.	0.
170	Machinery and Equipment	051506	SL	5.00	5,000.		5,000.	5,000.	0.
192	Machinery and Equipment	063007	SL	5.00	28,487.		28,487.	28,487.	0.
193	Machinery and Equipment	072706	SL	5.00	2,262.		2,262.	2,262.	0.
194	Machinery and Equipment	081006	SL	5.00	5,939.		5,939.	5,939.	0.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

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- NEXT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
195	Machinery and Equipment	042407	SL	5.00	4,194.		4,194.	4,194.	0.
205	Machinery and Equipment	071807	SL	5.00	7,609.		7,609.	7,609.	0.
208	Machinery and Equipment	080807	SL	5.00	1,327.		1,327.	1,327.	0.
209	Machinery and Equipment	121807	SL	5.00	3,200.		3,200.	3,200.	0.
211	Machinery and Equipment	122107	SL	5.00	1,550.		1,550.	1,550.	0.
212	Machinery and Equipment	060608	SL	5.00	5,660.		5,660.	5,660.	0.
230	Machinery and Equipment	100108	SL	3.00	1,303.		1,303.	1,303.	0.
231	Machinery and Equipment	050109	SL	5.00	3,000.		3,000.	3,000.	0.
246	Machinery and Equipment	080109	SL	5.00	3,852.		3,852.	3,852.	0.
247	Machinery and Equipment	021110	SL	5.00	1,887.		1,887.	1,887.	0.
248	Machinery and Equipment	021110	SL	1.00	24,950.		24,950.	24,950.	0.
249	Machinery and Equipment	041910	SL	5.00	3,812.		3,812.	3,812.	0.
250	Machinery and Equipment	042210	SL	5.00	8,960.		8,960.	8,960.	0.
252	Machinery and Equipment	101212	SL	10.00	1,250.		1,250.	833.	125.
255	Machinery and Equipment	121807	SL	5.00	3,000.		3,000.	3,000.	0.
256	Machinery and Equipment	111510	SL	5.00	3,946.		3,946.	3,946.	0.
257	Machinery and Equipment	111510	SL	5.00	6,021.		6,021.	6,021.	0.
258	Machinery and Equipment	111510	SL	5.00	1,900.		1,900.	1,900.	0.
259	Machinery and Equipment	111510	SL	5.00	6,105.		6,105.	6,072.	0.
260	Machinery and Equipment	110110	SL	5.00	2,199.		2,199.	2,199.	0.
261	Machinery and Equipment	111210	SL	5.00	1,414.		1,414.	1,414.	0.
262	Machinery and Equipment	052311	SL	5.00	2,426.		2,426.	2,426.	0.
263	Machinery and Equipment	061511	SL	5.00	3,588.		3,588.	3,588.	0.
264	Machinery and Equipment	052311	SL	7.00	41,880.		41,880.	41,880.	0.
265	Machinery and Equipment	071310	SL	5.00	2,000.		2,000.	2,000.	0.
266	Machinery and Equipment	071310	SL	5.00	2,700.		2,700.	2,700.	0.
267	Machinery and Equipment	072710	SL	5.00	8,067.		8,067.	8,067.	0.
268	Machinery and Equipment	081810	SL	5.00	1,350.		1,350.	1,350.	0.
269	Machinery and Equipment	100110	SL	5.00	3,541.		3,541.	3,541.	0.
270	Machinery and Equipment	111310	SL	5.00	3,330.		3,330.	3,330.	0.
271	Machinery and Equipment	031711	SL	5.00	4,953.		4,953.	4,953.	0.
272	Machinery and Equipment	011711	SL	5.00	4,099.		4,099.	4,099.	0.
273	Machinery and Equipment	011911	SL	5.00	8,000.		8,000.	8,000.	0.
274	Machinery and Equipment	022411	SL	5.00	1,095.		1,095.	1,095.	0.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

Draft 2020-07-15

- NEXT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
275	Machinery and Equipment	051911	SL	5.00	1,600.		1,600.	1,600.	0.
276	Machinery and Equipment	061611	SL	5.00	1,800.		1,800.	1,800.	0.
290	Machinery and Equipment	012111	SL	5.00	899.		899.	899.	0.
294	Machinery and Equipment	071611	SL	5.00	1,458.		1,458.	1,458.	0.
295	Machinery and Equipment	071911	SL	5.00	3,815.		3,815.	3,571.	0.
296	Machinery and Equipment	072211	SL	5.00	1,140.		1,140.	1,140.	0.
297	Machinery and Equipment	080411	SL	5.00	2,025.		2,025.	2,025.	0.
298	Machinery and Equipment	082011	SL	5.00	1,150.		1,150.	1,150.	0.
300	Machinery and Equipment	082911	SL	5.00	1,273.		1,273.	1,273.	0.
301	Machinery and Equipment	090611	SL	5.00	1,706.		1,706.	1,706.	0.
302	Machinery and Equipment	102011	SL	5.00	2,815.		2,815.	2,721.	0.
309	Machinery and Equipment	070111	SL	5.00	4,184.		4,184.	4,184.	0.
310	Machinery and Equipment	083111	SL	5.00	2,199.		2,199.	2,199.	0.
311	Machinery and Equipment	093011	SL	5.00	1,661.		1,661.	1,661.	0.
312	Machinery and Equipment	012412	SL	5.00	1,222.		1,222.	1,222.	0.
313	Machinery and Equipment	070111	SL	5.00	1,140.		1,140.	1,140.	0.
314	Machinery and Equipment	063012	SL	5.00	1,443.		1,443.	1,443.	0.
315	Machinery and Equipment	063012	SL	5.00	989.		989.	989.	0.
316	Machinery and Equipment	092311	SL	5.00	1,750.		1,750.	1,750.	0.
317	Machinery and Equipment	090911	SL	5.00	1,330.		1,330.	1,086.	0.
322	Machinery and Equipment	070312	SL	5.00	5,833.		5,833.	5,833.	0.
323	Machinery and Equipment	071812	SL	5.00	4,850.		4,850.	4,850.	0.
324	Machinery and Equipment	063013	SL	5.00	3,634.		3,634.	3,634.	0.
325	Machinery and Equipment	063013	SL	5.00	8,319.		8,319.	8,319.	0.
326	Machinery and Equipment	063013	SL	5.00	1,240.		1,240.	1,240.	0.
327	Machinery and Equipment	103012	SL	5.00	7,250.		7,250.	7,250.	0.
328	Machinery and Equipment	121112	SL	5.00	3,040.		3,040.	3,040.	0.
329	Machinery and Equipment	121312	SL	5.00	1,435.		1,435.	1,435.	0.
330	Machinery and Equipment	121812	SL	5.00	5,094.		5,094.	5,094.	0.
331	Machinery and Equipment	122712	SL	5.00	1,640.		1,640.	1,640.	0.
332	Machinery and Equipment	012813	SL	5.00	1,238.		1,238.	1,238.	0.
333	Machinery and Equipment	020713	SL	5.00	6,220.		6,220.	6,220.	0.
334	Machinery and Equipment	050113	SL	5.00	1,926.		1,926.	1,926.	0.
335	Machinery and Equipment	050313	SL	5.00	15,689.		15,689.	15,689.	0.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

Draft 2020-07-15

- NEXT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
336	Machinery and Equipment	063013	SL	5.00	7,570.		7,570.	7,570.	0.
337	Machinery and Equipment	021413	SL	5.00	2,399.		2,399.	2,399.	0.
344	Machinery and Equipment	082113	SL	5.00	1,350.		1,350.	1,350.	0.
345	Machinery and Equipment	063014	SL	3.00	2,394.		2,394.	2,394.	0.
346	Machinery and Equipment	072813	SL	3.00	3,798.		3,798.	3,798.	0.
347	Machinery and Equipment	020814	SL	3.00	3,800.		3,800.	3,800.	0.
348	Machinery and Equipment	053014	SL	5.00	5,780.		5,780.	5,780.	0.
349	Machinery and Equipment	063013	SL	5.00	1,450.		1,450.	1,450.	0.
350	Machinery and Equipment	030714	SL	5.00	1,848.		1,848.	1,848.	0.
383	Machinery and Equipment	012816	SL	5.00	2,921.		2,921.	1,995.	584.
385	Machinery and Equipment	063017	SL	5.00	8,012.		8,012.	3,204.	1,602.
	* 990 Page 10 Total Machinery &								
	Equipment				683,527.		683,527.	676,761.	2,311.
	* 990 Page 10 Total -				683,527.		683,527.	676,761.	2,311.
	Land			.000					0.
	Land								
50	Land	010195	L		150,000.		150,000.		0.
	* 990 Page 10 Total Land				150,000.		150,000.	0.	0.
	* 990 Page 10 Total -				150,000.		150,000.	0.	0.
	Buildings								
65	Building	110197	ADS	40.00	117,690.		117,690.	88,564.	2,942.
88	Building	080197	SL	10.00	5,408.		5,408.	5,408.	0.
91	Building	040102	SL	10.00	4,150.		4,150.	4,150.	0.
92	Building	010103	SL	5.00	4,720.		4,720.	4,720.	0.
93	Building	040103	SL	5.00	6,556.		6,556.	6,556.	0.
94	Building	050103	SL	5.00	3,452.		3,452.	3,452.	0.
118	Building	010103	ADS	40.00	150,409.		150,409.	48,990.	3,760.
119	Building	010103	ADS	40.00	338,643.		338,643.	130,048.	8,466.
123	Building	063005	ADS	40.00	69,350.		69,350.	17,234.	1,734.
127	Building	031105	SL	7.00	2,443.		2,443.	2,443.	0.
163	Building	061503	SL	5.00	605.		605.	605.	0.
164	Building	061503	SL	5.00	1,017.		1,017.	1,017.	0.
165	Building	072105	SL	5.00	4,500.		4,500.	4,500.	0.
167	Building	110305	SL	5.00	1,466.		1,466.	1,466.	0.

(D) - Asset disposed * ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

Draft 2020-07-15

- NEXT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
168	Building	012606	SL	5.00	1,056.		1,056.	1,056.	0.
172	Building	063006	SL	15.00	40,768.		40,768.	35,335.	2,718.
173	Building	081205	SL	10.00	2,815.		2,815.	2,815.	0.
174	Building	091405	SL	5.00	1,000.		1,000.	1,000.	0.
176	Building	030906	SL	10.00	4,500.		4,500.	4,500.	0.
177	Building	080106	SL	5.00	5,400.		5,400.	5,400.	0.
184	Building	082206	SL	5.00	6,305.		6,305.	6,305.	0.
185	Building	041307	SL	5.00	3,260.		3,260.	3,260.	0.
186	Building	041307	SL	5.00	8,437.		8,437.	8,437.	0.
187	Building	120106	SL	5.00	8,560.		8,560.	8,560.	0.
188	Building	111406	SL	5.00	6,500.		6,500.	6,500.	0.
189	Building	061207	SL	5.00	1,802.		1,802.	1,802.	0.
198	Building	063007	SL	40.00	6,733.		6,733.	2,016.	168.
207	Building	080807	SL	5.00	677.		677.	677.	0.
213	Building	040808	SL	10.00	87,555.		87,555.	86,369.	0.
214	Building	022581	SL	5.00	2,268.		2,268.	2,268.	0.
215	Building	082407	SL	5.00	13,034.		13,034.	13,034.	0.
216	Building	031908	SL	5.00	10,442.		10,442.	10,442.	0.
217	Building	030308	SL	5.00	1,110.		1,110.	1,110.	0.
218	Building	022808	SL	5.00	4,938.		4,938.	4,938.	0.
219	Building	022908	SL	10.00	6,973.		6,973.	6,970.	0.
220	Building	040408	SL	5.00	2,258.		2,258.	2,258.	0.
221	Building	060208	SL	5.00	1,395.		1,395.	1,395.	0.
222	Building	063008	SL	5.00	7,476.		7,476.	7,476.	0.
227	Building	063009	SL	5.00	1,800.		1,800.	1,800.	0.
228	Building	063009	SL	5.00	4,725.		4,725.	4,725.	0.
229	Building	063009	SL	5.00	5,108.		5,108.	5,108.	0.
233	Building	010195	ADS	40.00	3,058.		3,058.	3,058.	0.
234	Building	010110	SL	10.00	3,806.		3,806.	3,619.	187.
235	Building	103009	SL	10.00	7,860.		7,860.	7,598.	262.
236	Building	061510	SL	10.00	15,505.		15,505.	14,088.	1,417.
237	Building	101909	SL	10.00	4,489.		4,489.	4,340.	149.
238	Building	120709	SL	5.00	5,000.		5,000.	5,000.	0.
239	Building	063010	SL	5.00	3,800.		3,800.	3,800.	0.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

Draft 2020-07-15

- NEXT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
240	Building	052410	SL	10.00	7,451.		7,451.	6,767.	684.
241	Building	052810	SL	10.00	1,726.		1,726.	1,571.	155.
242	Building	103009	SL	40.00	450,000.		450,000.	186,770.	11,250.
280	Building	062811	SL	5.00	3,536.		3,536.	3,536.	0.
281	Building	051611	SL	5.00	3,457.		3,457.	3,457.	0.
282	Building	100410	SL	5.00	2,400.		2,400.	2,400.	0.
283	Building	083010	SL	5.00	5,390.		5,390.	5,390.	0.
284	Building	063011	SL	5.00	5,750.		5,750.	5,750.	0.
285	Building	081010	SL	5.00	1,647.		1,647.	1,647.	0.
286	Building	060311	SL	5.00	3,036.		3,036.	3,036.	0.
287	Building	063011	SL	40.00	324,046.		324,046.	64,808.	8,101.
288	Building	063013	SL	40.00	45,299.		45,299.	6,792.	1,132.
303	Building	062012	SL	40.00	257,577.		257,577.	45,073.	6,439.
304	Building	030912	SL	40.00	4,216.		4,216.	770.	105.
305	Building	063012	SL	40.00	5,250.		5,250.	917.	131.
351	Building	020114	SL	20.00	118,704.		118,704.	30,906.	5,935.
352	Building	053014	SL	5.00	4,225.		4,225.	4,225.	0.
353	Building	071613	SL	5.00	3,650.		3,650.	3,650.	0.
354	Building	071913	SL	5.00	9,750.		9,750.	9,750.	0.
355	Building	112013	SL	5.00	5,701.		5,701.	5,701.	0.
356	Building	051414	SL	10.00	18,329.		18,329.	9,470.	1,833.
357	Building	063014	SL	10.00	32,832.		32,832.	16,415.	3,283.
358	Building	071514	SL	5.00	2,700.		2,700.	2,700.	0.
359	Building	112114	SL	5.00	2,500.		2,500.	2,292.	208.
360	Building	011715	SL	5.00	2,470.		2,470.	2,182.	288.
361	Building	062815	SL	5.00	7,900.		7,900.	6,320.	1,580.
363	Building	093014	SL	5.00	3,863.		3,863.	3,671.	192.
364	Building	112400	SL	5.00	1,460.		1,460.	1,460.	0.
365	Building	012315	SL	5.00	2,400.		2,400.	2,120.	280.
381	Building	010416	SL	20.00	15,196.		15,196.	2,660.	760.
382	Building	032816	SL	5.00	1,679.		1,679.	1,092.	336.
387	Building	070116	SL	15.00	249,444.		249,444.	49,890.	16,630.
	* 990 Page 10 Total Buildings				2604406.		2604406.	1089400.	81,125.
	* 990 Page 10 Total -				2604406.		2604406.	1089400.	81,125.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

Draft 2020-07-15

- NEXT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
	Transportation Equipment								
100	Vehicle	090101	SL	5.00	20,070.		20,070.	20,070.	0.
102	Vehicle	120102	SL	5.00	16,000.		16,000.	16,000.	0.
171	Vehicle	010806	SL	5.00	20,000.		20,000.	20,000.	0.
201	Vehicle	041708	SL	5.00	17,021.		17,021.	17,021.	0.
203	Vehicle	062508	SL	5.00	19,719.		19,719.	19,719.	0.
204	Vehicle	062508	SL	5.00	19,719.		19,719.	19,719.	0.
225	Vehicle	122208	SL	5.00	24,286.		24,286.	24,286.	0.
226	Vehicle	122208	SL	5.00	24,286.		24,286.	24,286.	0.
245	Vehicle	010810	SL	5.00	21,259.		21,259.	21,250.	0.
277	Vehicle	100810	SL	5.00	3,403.		3,403.	3,403.	0.
278	Vehicle	010511	SL	5.00	21,379.		21,379.	21,379.	0.
279	Vehicle	010611	SL	5.00	21,621.		21,621.	21,596.	0.
291	Vehicle	042913	SL	5.00	2,723.		2,723.	2,723.	0.
299	Vehicle	012001	SL	5.00	20,026.		20,026.	20,026.	0.
338	Vehicle	111312	SL	5.00	14,950.		14,950.	14,950.	0.
341	Vehicle	070913	SL	5.00	25,393.		25,393.	23,935.	0.
342	Vehicle	070913	SL	5.00	22,417.		22,417.	22,417.	0.
343	Vehicle	070913	SL	5.00	22,417.		22,417.	22,417.	0.
366	Vehicle	103114	SL	5.00	22,381.		22,381.	20,888.	1,493.
367	Vehicle	103114	SL	5.00	22,381.		22,381.	20,888.	1,493.
368	Vehicle	103114	SL	5.00	22,381.		22,381.	20,888.	1,493.
374	Vehicle	082515	SL	5.00	24,247.		24,247.	18,588.	4,849.
375	Vehicle	082515	SL	5.00	24,247.		24,247.	18,588.	4,849.
376	Vehicle	082515	SL	5.00	24,247.		24,247.	18,588.	4,849.
377	Vehicle	082515	SL	5.00	24,247.		24,247.	18,588.	4,849.
378	Vehicle	082515	SL	5.00	78,680.		78,680.	60,321.	15,736.
384	Vehicle	082515	SL	5.00	24,247.		24,247.	18,588.	4,849.
386	Vehicle	070116	SL	5.00	59,577.		59,577.	35,745.	11,915.
389	Vehicle	063018	SL	5.00	84,832.		84,832.	16,966.	16,966.
392	Vehicles	070118	SL	5.00	99,986.		99,986.	19,997.	19,997.
	* 990 Page 10 Total Transportation Equipment				848,142.		848,142.	623,830.	93,338.
	* 990 Page 10 Total -				848,142.		848,142.	623,830.	93,338.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

Draft 2020-07-15

- NEXT YEAR FEDERAL - Seagull Services

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
	Construction in Progress								
	Other								
393	Construction in Progress	070118	NC	.000	10,000.		10,000.		0.
	* 990 Page 10 Total Other				10,000.		10,000.	0.	0.
	* 990 Page 10 Total - Construction in Progress				10,000.		10,000.	0.	0.
	Other								
144	Loan Closing Costs	012100		180M	22,738.		22,738.	22,738.	0.
145	Loan Closing Costs	033103		140M	6,000.		6,000.	6,000.	0.
146	Loan Closing Costs	042403		136M	2,053.		2,053.	2,053.	0.
196	Loan Closing Costs	092506		150M	19,098.		19,098.	19,098.	0.
253	Loan Closing Costs	103009		84M	8,321.		8,321.	8,321.	0.
380	Loan Closing Costs	090315		300M	23,753.		23,753.	3,642.	950.
	* 990 Page 10 Total Other				81,963.		81,963.	61,852.	950.
	* 990 Page 10 Total - Construction in Progress				81,963.		81,963.	61,852.	950.
	* Grand Total 990 Page 10 Depr & Amort				4378038.		4378038.	2451843.	177,724.
	Buildings								
388	Building	070909	SL	40.00	10,000.		10,000.	2,474.	250.
	* 990-T Sch E Total Buildings				10,000.		10,000.	2,474.	250.
	* 990-T Sch E Total -				10,000.		10,000.	2,474.	250.
	* Grand Total 990-T Sch E Depr & Amort				10,000.		10,000.	2,474.	250.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

828103 04-01-18

Draft 2020-07-15

TAX RETURN FILING INSTRUCTIONS

FLORIDA FORM F-1120

FOR THE YEAR ENDING
June 30, 2019

Prepared For:

Seagull Services
3879 Byron Drive
West Palm Beach, FL 33404

Prepared By:

Holyfield & Thomas, LLC
125 Butler Street
West Palm Beach, FL 33407

To be Signed and Dated By:

Not applicable

Amount of Tax:

Total Tax	$	0
Less: payments and credits	$	0
Plus: other amount		0
Plus: nterest and penalties	$	0
No payment required	$	

Overpayment:

Credited to your estimated tax	$	0
Other amount	$	0
Refunded to you	$	0

Make Check Payable To:

Not applicable

Mail Tax Return and Check (if applicable) To:

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the Florida DOR, please contact our office. We will then submit your electronic return to the Florida DOR. Do not mail the paper copy of the return to the Florida DOR.

Return Must be Mailed On or Before:

Not applicable

Special Instructions:

Draft 2020-07-15

***** THIS IS NOT A FILEABLE COPY *****

Form **8879-EO**

Department of the Treasury
Internal Revenue Service

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2018, or fiscal year beginning JUL 1, 2018, and ending JUN 30, 2019

▶ **Do not send to the IRS. Keep for your records.**

▶ **Go to www.irs.gov/Form8879EO for the latest information.**

OMB No. 1545-1878

2018

Name of exempt organization: Seagull Services

Employer identification number: 59-1879968

Name and title of officer
Daniel Stanislawczyk
CEO

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a,** or **5a,** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b,** or **5b,** whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a Form 990 check here ▶ [X]	**b Total revenue,** if any (Form 990, Part VIII, column (A), line 12)	**1b**	3,913,389.
2a Form 990-EZ check here ▶ [ ]	**b Total revenue,** if any (Form 990-EZ, line 9)	**2b**	
3a Form 1120-POL check here ▶ [ ]	**b Total tax** (Form 1120-POL, line 22)	**3b**	
4a Form 990-PF check here ▶ [ ]	**b Tax based on investment income** (Form 990-PF, Part VI, line 5)	**4b**	
5a Form 8868 check here ▶ [ ]	**b Balance Due** (Form 8868, line 3c)	**5b**	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

[X] I authorize Holyfield & Thomas, LLC (**ERO firm name**) to enter my PIN 05808 (**Enter five numbers, but do not enter all zeros**)

as my signature on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

[ ] As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ ***** THIS IS NOT A FILEABLE COPY *** Date ▶

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 65767766363 (**Do not enter all zeros**)

I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163,** Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature ▶ Date ▶

ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

LHA **For Paperwork Reduction Act Notice, see instructions.**

Form **8879-EO** (2018)

823051 10-26-18

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FILEABLE FORMS

Draft 2020-07-15

Form **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 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 JUL 1, 2018 and ending JUN 30, 2019

B Check if applicable: [ ] Address change [ ] Name change [ ] Initial return [ ] Final return/terminated [ ] Amended return [ ] Application pending

C Name of organization: Seagull Services

Doing business as: Seagull Services, Inc.

Number and street (or P.O. box if mail is not delivered to street address): 3879 Byron Drive | Room/suite

City or town, state or province, country, and ZIP or foreign postal code: West Palm Beach, FL 33404

D Employer identification number: 59-1879968

E Telephone number: (561) 842-5814

G Gross receipts $ 4,295,451.

F Name and address of principal officer: Daniel Stanislawczyk same as C above

H(a) Is this a group return for subordinates? [ ] Yes [X] No

H(b) Are all subordinates included? [ ] Yes [ ] No — If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: [X] 501(c)(3) [ ] 501(c) ( ) ◀ (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: ▶ www.seagull.org

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ▶

L Year of formation: 1979 **M** State of legal domicile: FL

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: See Schedule O

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	11
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	11
5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	199
6	Total number of volunteers (estimate if necessary)	6	3
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	583.
b	Net unrelated business taxable income from Form 990-T, line 38	7b	0.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	1,892,980.	1,493,382.
	9	Program service revenue (Part VIII, line 2g)	1,818,602.	1,303,590.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-20,236.	1,103,791.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,120.	12,626.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,695,466.	3,913,389.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,430,278.	2,048,525.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 60,710.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,506,618.	1,413,012.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,936,896.	3,461,537.
	19	Revenue less expenses. Subtract line 18 from line 12	-241,430.	451,852.
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	3,225,759.	3,515,687.
	21	Total liabilities (Part X, line 26)	1,424,794.	1,262,870.
	22	Net assets or fund balances. Subtract line 21 from line 20	1,800,965.	2,252,817.

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 — Date

▶ Daniel Stanislawczyk, CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
Scott Y. Haynes				P01366363

Firm's name ▶ Holyfield & Thomas, LLC — Firm's EIN ▶ 65-1083521

Firm's address ▶ 125 Butler Street, West Palm Beach, FL 33407 — Phone no. (561) 689-6000

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [ ] No

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Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission:
Seagull Industries for the Disabled, is also known as Seagull Services, enriches lives through provision of quality special education, residential care, vocational training, employment services, advocacy and opportunities for social and community activities as well

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 [X] No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, 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 $ 1,469,906. including grants of $) (Revenue $ 801,325.)
Community and Facility-based Day Program:
Adults with significant disabilities, ages ranging from ages 22 to over 70, are offered life enhancing goal directed day programming, supported employment and/or shelter work to meet the needs and desires of the individuals served. Programming varies from paid work, basic education, vocational and pre-vocational activities in stimulating facility-based or community settings geared to maintaining and increasing their intellectual and physical well-being and improving the participant's quality of life. Examples of the activities include, but are not limited to, creative expression with emphasis on visual arts, physical activities, visiting museums, parties, life-skill training and social activities in the community, as well as special programs for

4b (Code:) (Expenses $ 702,999. including grants of $) (Revenue $ 421,162.)
Residential - Seagull provides residential services as a licensed ALF (Assisted Living Facility). Service includes medication management and oversight of health care to allow people with lifelong disabilities to live as independently as possible. In addition to room and board, these homes offer personal care and training that increases or maintains the level of independence of the residents and enhances their quality of life. Known as Seagull Place campus on Singer Island the group homes include family style living with 24-hour supervision, case coordination of health and wellness, activities, nutritious meals, and participation in social and community events. Transportation is provided to school, work, medical appointments or other day activities as well as evening and weekend activities.

4c (Code:) (Expenses $ 894,725. including grants of $) (Revenue $ 6,994.)
Education - Seagull operates a charter school known as SAIL (Seagull Academy for Independent Living). SAIL is organized to educate children with learning challenges as well as an array of developmental disabilities. Students age 11 to 22 are offered innovative educational programs designed to help each student transition successfully to adult living through an academic and vocational curriculum, internships, community-based training, and extracurricular activities with an emphasis on arts and sports as well as a job placement and supported employment programs that are integral to the mission and outcomes. The graduation rate is 93% compared to the Palm Beach area rate of 77%. Over 50% of the students are employed by the time they finish school. Students also participated in a curriculum developed to expand teaching

4d Other program services (Describe in Schedule O.)
(Expenses $ 127,818. including grants of $) (Revenue $ 74,109.)

4e Total program service expenses ▶ 3,195,448.

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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	X	
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*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		X

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Part IV Checklist of Required Schedules *(continued)*

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

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
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	7		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	X	

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

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 199			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)			
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a	X	
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
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).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	**Organizations that may receive deductible contributions under section 170(c).**			
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	**Sponsoring organizations maintaining donor advised funds.**			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	**Section 501(c)(7) organizations.** Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	**Section 501(c)(12) organizations.** Enter:			
a	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b			
c	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*	14b		
15	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.	15		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		X

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Part VI Governance, Management, and Disclosure *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI ..... [X]

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	11		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	11		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9			X

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ FL

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 [X] 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 ▶

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3879 Byron Drive, West Palm Beach, FL 33404

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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 line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
(1) Laura Fowler Pesident	1.00	X		X				0.	0.	0.
(2) Karen Rea Vice President	1.00	X		X				0.	0.	0.
(3) Gary Swick Treasurer	1.00	X		X				0.	0.	0.
(4) Matthew Kramer Secretary	1.00	X		X				0.	0.	0.
(5) Lou Delgado Member	1.00	X						0.	0.	0.
(6) Pierre Rodriguez Member	1.00	X						0.	0.	0.
(7) Dr. James Barnard Member	1.00	X						0.	0.	0.
(8) Mary Helen Johnson Member	1.00	X						0.	0.	0.
(9) Michael Cowan Member	1.00	X						0.	0.	0.
(10) Carlo del Portal, Jr. Member	1.00	X						0.	0.	0.
(11) Martin Zipern Member	1.00	X						0.	0.	0.
(12) Barbara Nurenberg President & CEO	50.00			X				141,338.	0.	0.

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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 line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
1b Sub-total ▶								141,338.	0.	0.
c Total from continuation sheets to Part VII, Section A ▶								0.	0.	0.
d Total (add lines 1b and 1c) ▶								141,338.	0.	0.

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

		Yes	No
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*	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*	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*	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
NONE		

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

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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
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a	79,122.				
	b Membership dues	1b					
	c Fundraising events	1c	18,678.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	1,039,841.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	355,741.				
	g Noncash contributions included in lines 1a-1f: $						
	h **Total.** Add lines 1a-1f ▶			1,493,382.			
Program Service Revenue			**Business Code**				
	2 a Medicaid Payments		900099	886,728.	886,728.		
	b Workshop Revenues		900099	187,404.	187,404.		
	c Supported Employement		900099	120,186.	120,186.		
	d Private Pay Clients		900099	108,485.	108,485.		
	e Retail Sales		900099	787.	787.		
	f All other program service revenue						
	g **Total.** Add lines 2a-2f ▶			1,303,590.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶			19,598.			19,598.
	4 Income from investment of tax-exempt bond proceeds ▶						
	5 Royalties ▶						
		(i) Real	(ii) Personal				
	6 a Gross rents	3,600.					
	b Less: rental expenses	3,017.					
	c Rental income or (loss)	583.					
	d Net rental income or (loss) ▶			583.		583.	
		(i) Securities	(ii) Other				
	7 a Gross amount from sales of assets other than inventory		1,454,481.				
	b Less: cost or other basis and sales expenses		370,288.				
	c Gain or (loss)		1,084,193.				
	d Net gain or (loss) ▶			1,084,193.			1,084,193.
	8 a Gross income from fundraising events (not including $ 18,678. of contributions reported on line 1c). See Part IV, line 18	a	7,995.				
	b Less: direct expenses	b	8,757.				
	c Net income or (loss) from fundraising events ▶			-762.			-762.
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities ▶						
	10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory ▶						
	Miscellaneous Revenue		**Business Code**				
	11 a Miscellaneous Revenue		900099	12,805.			12,805.
	b						
	c						
	d All other revenue						
	e **Total.** Add lines 11a-11d ▶			12,805.			
	12 **Total revenue.** See instructions ▶			3,913,389.	1,303,590.	583.	1,115,834.

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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	66,000.	60,783.	3,896.	1,321.
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	1,755,054.	1,616,317.	103,599.	35,138.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	122,578.	112,772.	7,355.	2,451.
10 Payroll taxes	104,893.	96,501.	6,294.	2,098.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	51,293.	47,189.	3,078.	1,026.
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 Sch O.)	209,344.	192,791.	12,362.	4,191.
12 Advertising and promotion	39,079.	35,953.	2,344.	782.
13 Office expenses	197,751.	182,070.	11,723.	3,958.
14 Information technology				
15 Royalties				
16 Occupancy	97,762.	90,024.	5,781.	1,957.
17 Travel	124,251.	114,311.	7,455.	2,485.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,041.	1,878.	122.	41.
20 Interest	67,193.	61,875.	3,973.	1,345.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	196,499.	181,009.	11,555.	3,935.
23 Insurance	225,305.	207,471.	13,324.	4,510.
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 Special Events to Pg 9	-8,757.			-8,757.
b Repairs & Maintenance	77,383.	71,258.	4,576.	1,549.
c Misc. Expenses	57,625.	53,064.	3,407.	1,154.
d Materials & Supplies	45,704.	42,086.	2,703.	915.
e All other expenses	30,539.	28,096.	1,832.	611.
25 **Total functional expenses.** Add lines 1 through 24e	3,461,537.	3,195,448.	205,379.	60,710.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

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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
Assets	1	Cash - non-interest-bearing	2,515.	1	1,000.
	2	Savings and temporary cash investments	372,504.	2	202,061.
	3	Pledges and grants receivable, net	153,421.	3	109,522.
	4	Accounts receivable, net	263,077.	4	99,626.
	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 instr). Complete Part II of Sch L		6	
	7	Notes and loans receivable, net	15,184.	7	8,836.
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	77,904.	9	49,759.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a 4,306,075.			
	b	Less: accumulated depreciation — 10b 2,392,465.	2,324,572.	10c	1,913,610.
	11	Investments - publicly traded securities		11	1,123,387.
	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	16,582.	15	7,886.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	3,225,759.	16	3,515,687.
Liabilities	17	Accounts payable and accrued expenses	235,275.	17	218,485.
	18	Grants payable		18	
	19	Deferred revenue		19	
	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	1,189,519.	23	1,044,385.
	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		25	
	26	**Total liabilities.** Add lines 17 through 25	1,424,794.	26	1,262,870.
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	1,628,717.	27	2,034,790.
	28	Temporarily restricted net assets	172,248.	28	0.
	29	Permanently restricted net assets		29	218,027.
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	1,800,965.	33	2,252,817.
	34	Total liabilities and net assets/fund balances	3,225,759.	34	3,515,687.

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Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,913,389.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,461,537.
3	Revenue less expenses. Subtract line 2 from line 1	3	451,852.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,800,965.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,252,817.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII ☒

			Yes	No
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?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate 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?	2c	X	
	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?	3a		X
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	3b		

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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 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization: Seagull Services

Employer identification number: 59-1879968

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 [X] 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? Yes	No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

LHA **For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.** 832021 10-11-18 **Schedule A (Form 990 or 990-EZ) 2018**

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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
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2117050.	1910749.	1892566.	1892980.	1493382.	9306727.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	2117050.	1910749.	1892566.	1892980.	1493382.	9306727.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						224,050.
6 **Public support.** Subtract line 5 from line 4.						9082677.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	2117050.	1910749.	1892566.	1892980.	1493382.	9306727.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	5,625.	10,857.	22,300.	8,719.	23,197.	70,698.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	12,437.	6,517.	7,224.	6,090.	12,805.	45,073.
11 **Total support.** Add lines 7 through 10						9422498.

12 Gross receipts from related activities, etc. (see instructions) ..... 12 8,540,892.

13 **First five years.** 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 **stop here** ..... ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) ..... 14 96.39 %

15 Public support percentage from 2017 Schedule A, Part II, line 14 ..... 15 95.65 %

16a **33 1/3% support test - 2018.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ..... ▶ ☒

b **33 1/3% support test - 2017.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ..... ▶ ☐

17a **10% -facts-and-circumstances test - 2018.** 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 **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ..... ▶ ☐

b **10% -facts-and-circumstances test - 2017.** 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 **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ..... ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ..... ▶ ☐

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

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

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 ▶ ☐

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

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Part IV **Supporting Organizations** *(continued)*

			Yes	No
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?	**11a**		
b	A family member of a person described in (a) above?	**11b**		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in* **Part VI.**	**11c**		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in* **Part VI** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	**1**		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* **Part VI** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	**2**		

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	**1**		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* **Part VI** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	**2**		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* **Part VI** *the role the organization's supported organizations played in this regard.*	**3**		

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).*

			Yes	No
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.*	**2a**		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* **Part VI** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	**2b**		
3	Parent of Supported Organizations. **Answer (a) and (b) below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* **Part VI.**	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.*	**3b**		

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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).

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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	**Total annual distributions.** 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	**Total** of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in **Part VI.** See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in **Part VI**. See instructions.			
7	**Excess distributions carryover to 2019.** Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2014			
b	Excess from 2015			
c	Excess from 2016			
d	Excess from 2017			
e	Excess from 2018			

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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 A, Part II, Line 10, Explanation for Other Income:

Other Related Revenue

2014 Amount: $ 12,437.

2015 Amount: $ 6,517.

2016 Amount: $ 7,224.

2017 Amount: $ 6,090.

2018 Amount: $ 12,805.

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Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**
▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2018

Name of the organization	**Employer identification number**
Seagull Services	59-1879968

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	[X] 501(c)(3) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[ ] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year ..... ▶ $ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA **For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.**

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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Name of organization: Seagull Services

Employer identification number: 59-1879968

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Palm Tran 3201 Electronics Way West Palm Beach, FL 33407	$ 50,100.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2	Florida Department of Revenue 3400 W. Commercial Boulevard Ft. Lauderdale, FL 33409	$ 375,594.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3	Town of Palm Beach United Way 44 Cocoanut Row, M201 Palm Beach, FL 33480	$ 40,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
4	Uniter Way of Palm Beach County 2600 Quantum Blvd. Boynton Beach, FL 33435	$ 37,451.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
5	IDEA-Florida Department of Education 325 West Gaines Street Tallahassee, FL 32399	$ 55,454.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
6	Palm Beach County Community Services 810 Datura Street West Palm Beach, FL 33401	$ 278,393.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

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Name of organization: Seagull Services

Employer identification number: 59-1879968

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	The Jim Moran Foundation 100 Jim Moran Blvd. Deerfield Beach, FL 33422	$ 30,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
8	The Mary Alice Fortin Foundation 201 Chilean Way Palm Beach, FL 33480	$ 50,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

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Name of organization: Seagull Services

Employer identification number: 59-1879968

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

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Name of organization: Seagull Services

Employer identification number: 59-1879968

Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor.** Complete columns **(a)** through **(e) and** the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this info. once.) ▶ $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

Draft 2020-07-15

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 for instructions and the latest information.

OMB No. 1545-0047
2018
Open to Public Inspection

Name of the organization Seagull Services

Employer identification number 59-1879968

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? ☐ Yes ☐ 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? ☐ Yes ☐ 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).

☐ Preservation of land for public use (e.g., recreation or education)
☐ Preservation of a historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ 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 ▶ $ _____

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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:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

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
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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 ▶ _____%
c Temporarily restricted endowment ▶ _____%

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:

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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
1a Land		150,000.		150,000.
b Buildings		2,614,406.	1,091,874.	1,522,532.
c Leasehold improvements				
d Equipment		1,531,669.	1,300,591.	231,078.
e Other		10,000.		10,000.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				1,913,610.

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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)		
Total. (Col. (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)		
Total. (Col. (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)	
Total. *(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)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	

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 [X]

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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.

1	Total revenue, gains, and other support per audited financial statements			1	3,925,163.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	11,774.		
e	Add lines **2a** through **2d**			2e	11,774.
3	Subtract line **2e** from line **1**			3	3,913,389.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	3,913,389.

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.

1	Total expenses and losses per audited financial statements			1	3,473,311.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	11,774.		
e	Add lines **2a** through **2d**			2e	11,774.
3	Subtract line **2e** from line **1**			3	3,461,537.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	3,461,537.

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 X, Line 2:

Seagull follows FASB ASC 740-10, Accounting for Uncertainty in Income Taxes. This pronouncement seeks to reduce the diversity in practice associated with certain aspects of measurement and recognition in accounting for income taxes. It prescribes a recognition threshold and measurement attribute for financial statement recognition and measurement of a tax position that an entity takes or expects to take in a tax return. An entity may only recognize or continue to recognize tax positions that meet a "more likely than not" threshold. Seagull assesses its income tax positions based on management's evaluation of the facts, circumstances, and information available at the reporting date. Seagull uses the prescribed "more likely than" not threshold when making its assessment.

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Part XIII Supplemental Information *(continued)*

At adoption, Seagull did not record any cumulative effect adjustment, and Seagull did not accrue any interest expense or penalties related to tax positions. There are currently no open Federal or State tax years under audit.

Part XI, Line 2d - Other Adjustments:

Rental Expenses	3,017.
Special Events	8,757.
Total to Schedule D, Part XI, Line 2d	11,774.

Part XII, Line 2d - Other Adjustments:

Rental Expenses	3,017.
Special Events	8,757.
Total to Schedule D, Part XII, Line 2d	11,774.

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SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" 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 for instructions and the latest information.**

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization: Seagull Services

Employer identification number: 59-1879968

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

2 a 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? Yes	No	**(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
Total ▶						

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.

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

Schedule G (Form 990 or 990-EZ) 2018

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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 Honda Classic (event type)	(b) Event #2 (event type)	(c) Other events 2 (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	26,673.			26,673.
	2 Less: Contributions	18,678.			18,678.
	3 Gross income (line 1 minus line 2)	7,995.			7,995.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	8,757.			8,757.
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				8,757.
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-762.

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))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes_____ % ☐ No	☐ Yes_____ % ☐ No	☐ Yes_____ % ☐ 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: _____

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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.

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

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SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

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 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization: Seagull Services

Employer identification number: 59-1879968

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed 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 ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ 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	1b		
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?	2		
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 ☒ Written employment contract ☐ Independent compensation consultant ☒ Compensation survey or study ☐ Form 990 of other organizations ☐ 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?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	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?	5a		X
b	Any related organization?	5b		X
	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?	6a		X
b	Any related organization?	6b		X
	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	7		X
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	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2018

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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				
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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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.

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SCHEDULE O
(Form 990 or 990-EZ)
Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047
2018
Open to Public Inspection

Name of the organization: Seagull Services

Employer identification number: 59-1879968

Form 990, Part I, Line 1, Description of Organization Mission:

Seagull Industries for the Disabled, Inc. is also known as Seagull Services, helps adults and students with disabilities find success and fulfillment in their lives. As Seagull Services begins its 40th year, the mission remains true: to assist people to live in dignity and realize their life potential through education, training, employment, residential services, transportation and support services. People are assisted primarily throughout the greater Palm Beach and Martin County areas.

Form 990, Part III, Line 1, Description of Organization Mission:

as other supportive services designed to promote achievement, self reliance, economic independence and realization of their life potential.

Form 990, Part III, Line 4a, Program Service Accomplishments:

senior adults.

Form 990, Part III, Line 4c, Program Service Accomplishments:

and internship opportunities to include greenhouse growing and technology. A community-based summer day camp enrichment program is offered for 7 weeks each summer under the auspices of the school. The student to staff ratio is 7 to 1.

Form 990, Part III, Line 4d, Other Program Services:

Supported Employment - Seagull assisted 70 unemployed or underemployed

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Name of the organization: Seagull Services

Employer identification number: 59-1879968

adults with barriers to employment to obtain key work-related skills and find and maintain employment. This is accomplished through vocational assessment, job placement, introductory computer skills training, pre-employment skills training, counseling, job coaching, assessment and follow-along services.

Expenses $ 127,818. including grants of $ 0. Revenue $ 0.

Medicaid, Private Pay and other programs.

Expenses $ 0. including grants of $ 0. Revenue $ 74,109.

Form 990, Part VI, Section B, line 11b:

Prior to filing the form 990, the Organization provides a copy of the return to the members of the board via e-mail requesting commentary or any suggested changes. The return was then discussed at the annual meeting with the independent accountant.

Form 990, Part VI, Section B, Line 12c:

Board members are required to abstain from voting on related party transactions. No board member or their businesses may have any financial dealings with Seagull Services.

Form 990, Part VI, Section B, Line 15:

The CEO was under the last year of a five year contract that was negotiated with the board of directors and with the help of an executive search agency that provided information regarding comparable salary and benefits for future use to guide change in compensation. There was no increase in salary during this fiscal year, but the board studied current 990's of comparable organizations in the geographic area to assure that the compensation

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Name of the organization: Seagull Services

Employer identification number: 59-1879968

continued to be appropriate. Salaries of other top staff are reviewed by CEO using information from comparable non-profit organization's 990's.

Form 990, Part VI, Section C, Line 19:

The Organization makes its governing documents, conflict of interest policy, and financial statements and, form 990 available upon request. Requests are to be addressed to Seagull's administrative offices.

Part X11 Line 2C

The audit report is reviewed at the annual meeting with the independent audit firm and presented by the independent auditor. There is an opportunity for beard discussion prior to approving the audit. The process has not changed from prior years.

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Form **990-T**

Department of the Treasury
Internal Revenue Service

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

For calendar year 2018 or other tax year beginning JUL 1, 2018 , and ending JUN 30, 2019 .

▶ Go to www.irs.gov/Form990T for instructions and the latest information.
▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

OMB No. 1545-0687

2018

Open to Public Inspection for 501(c)(3) Organizations Only

A [ ] Check box if address changed

B Exempt under section
[X] 501(c)(3)
[ ] 408(e) [ ] 220(e)
[ ] 408A [ ] 530(a)
[ ] 529(a)

C Book value of all assets at end of year 1,913,610.

Print or Type

Name of organization ([ ] Check box if name changed and see instructions.)
Seagull Services

Number, street, and room or suite no. If a P.O. box, see instructions.
3879 Byron Drive

City or town, state or province, country, and ZIP or foreign postal code
West Palm Beach, FL 33404

D Employer identification number (Employees' trust, see instructions.)
59-1879968

E Unrelated business activity code (See instructions.)
531190

F Group exemption number (See instructions.) ▶

G Check organization type ▶ [X] 501(c) corporation [ ] 501(c) trust [ ] 401(a) trust [ ] Other trust

H Enter the number of the organization's unrelated trades or businesses. ▶ 1 Describe the only (or first) unrelated trade or business here ▶ See Statement 1 . If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ [ ] Yes [X] No
If "Yes," enter the name and identifying number of the parent corporation. ▶

J The books are in care of ▶ Carol O'Neil Telephone number ▶ (561) 842-5814

Part I Unrelated Trade or Business Income

			(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales				
b	Less returns and allowances c Balance ▶	1c			
2	Cost of goods sold (Schedule A, line 7)	2			
3	Gross profit. Subtract line 2 from line 1c	3			
4a	Capital gain net income (attach Schedule D)	4a			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
c	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach statement)	5			
6	Rent income (Schedule C)	6			
7	Unrelated debt-financed income (Schedule E)	7	1,551.	1,299.	252.
8	Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	8			
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9			
10	Exploited exempt activity income (Schedule I)	10			
11	Advertising income (Schedule J)	11			
12	Other income (See instructions; attach schedule)	12			
13	**Total.** Combine lines 3 through 12	13	1,551.	1,299.	252.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)
(Except for contributions, deductions must be directly connected with the unrelated business income.)

14	Compensation of officers, directors, and trustees (Schedule K)			14	
15	Salaries and wages			15	
16	Repairs and maintenance			16	
17	Bad debts			17	
18	Interest (attach schedule) (see instructions)			18	
19	Taxes and licenses			19	
20	Charitable contributions (See instructions for limitation rules)			20	
21	Depreciation (attach Form 4562)	21	250.		
22	Less depreciation claimed on Schedule A and elsewhere on return	22a	250.	22b	0.
23	Depletion			23	
24	Contributions to deferred compensation plans			24	
25	Employee benefit programs			25	
26	Excess exempt expenses (Schedule I)			26	
27	Excess readership costs (Schedule J)			27	
28	Other deductions (attach schedule)			28	
29	**Total deductions.** Add lines 14 through 28			29	0.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13			30	252.
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)			31	
32	Unrelated business taxable income. Subtract line 31 from line 30			32	252.

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Part III Total Unrelated Business Taxable Income

33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	252.
34	Amounts paid for disallowed fringes	34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of lines 33 and 34	36	252.
37	Specific deduction (Generally $1,000, but see line 37 instructions for exceptions)	37	1,000.
38	**Unrelated business taxable income.** Subtract line 37 from line 36. If line 37 is greater than line 36, enter the smaller of zero or line 36	38	0.

Part IV Tax Computation

39	**Organizations Taxable as Corporations.** Multiply line 38 by 21% (0.21) ▶	39	0.
40	**Trusts Taxable at Trust Rates.** See instructions for tax computation. Income tax on the amount on line 38 from: ☐ Tax rate schedule or ☐ Schedule D (Form 1041) ▶	40	
41	**Proxy tax.** See instructions ▶	41	
42	Alternative minimum tax (trusts only)	42	
43	**Tax on Noncompliant Facility Income.** See instructions	43	
44	**Total.** Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	0.

Part V Tax and Payments

45a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a			
b	Other credits (see instructions)	45b			
c	General business credit. Attach Form 3800	45c			
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d			
e	**Total credits.** Add lines 45a through 45d			45e	
46	Subtract line 45e from line 44			46	0.
47	Other taxes. Check if from: ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 ☐ Other (attach schedule)			47	
48	**Total tax.** Add lines 46 and 47 (see instructions)			48	0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2			49	0.
50 a	Payments: A 2017 overpayment credited to 2018	50a			
b	2018 estimated tax payments	50b			
c	Tax deposited with Form 8868	50c			
d	Foreign organizations: Tax paid or withheld at source (see instructions)	50d			
e	Backup withholding (see instructions)	50e			
f	Credit for small employer health insurance premiums (attach Form 8941)	50f			
g	Other credits, adjustments, and payments: ☐ Form 2439 ☐ Form 4136 ☐ Other Total ▶	50g			
51	**Total payments.** Add lines 50a through 50g			51	
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached ▶ ☐			52	
53	**Tax due.** If line 51 is less than the total of lines 48, 49, and 52, enter amount owed ▶			53	
54	**Overpayment.** If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid ▶			54	
55	Enter the amount of line 54 you want: **Credited to 2019 estimated tax** ▶ **Refunded** ▶			55	

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

		Yes	No
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here ▶		X
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
58	Enter the amount of tax-exempt interest received or accrued during the tax year ▶$		

Sign Here

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 taxpayer) is based on all information of which preparer has any knowledge.

▶ Signature of officer | Date | ▶ CEO Title

May the IRS discuss this return with the preparer shown below (see instructions)? X Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self- employed	PTIN
Scott Y. Haynes				P01366363

Firm's name ▶ Holyfield & Thomas, LLC — Firm's EIN ▶ 65-1083521

Firm's address ▶ 125 Butler Street West Palm Beach, FL 33407 — Phone no. (561) 689-6000

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Schedule A - Cost of Goods Sold. Enter method of inventory valuation ▶ N/A

1 Inventory at beginning of year	1		6 Inventory at end of year	6	
2 Purchases	2		7 **Cost of goods sold.** Subtract line 6 from line 5. Enter here and in Part I, line 2	7	
3 Cost of labor	3				
4a Additional section 263A costs (attach schedule)	4a		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
b Other costs (attach schedule)	4b				
5 **Total.** Add lines 1 through 4b	5				

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property

(1)
(2)
(3)
(4)

2. Rent received or accrued		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	
(1)		
(2)		
(3)		
(4)		
Total 0.	Total 0.	

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ▶ 0.

(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) ▶ 0.

Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property (a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
		Statement 4	Statement 5
(1) Rental by non-profit	3,600.	250.	2,766.
(2)			
(3)			
(4)			

4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
Statement 6	Statement 7			
(1) 1,045,550.	2,427,802.	43.07 %	1,551.	1,299.
(2)		%		
(3)		%		
(4)		%		
Statement 2	Statement 3		Enter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B).
Totals ▶			1,551.	1,299.
Total dividends-received deductions included in column 8 ▶				0.

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Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations: 3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
Totals ▶			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A). 0.	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B). 0.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
Totals ▶	Enter here and on page 1, Part I, line 9, column (A). 0.			Enter here and on page 1, Part I, line 9, column (B). 0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals ▶	Enter here and on page 1, Part I, line 10, col. (A). 0.	Enter here and on page 1, Part I, line 10, col. (B). 0.				Enter here and on page 1, Part II, line 26. 0.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5)) ▶	0.	0.				0.

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Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I ▶	0.	0.				0.
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5) ▶	0.	0.				0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14 ▶			0.

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Form 990-T	Description of Organization's Primary Unrelated Business Activity	Statement 1

Rental of Facilities to other non-profits.

To Form 990-T, Page 1

Form 990-T	Schedule E - Unrelated Debt-Financed Income Average Acquisition Debt	Statement 2

Description of Debt-Financed Property	Activity Number	Amount of Outstanding Debt
Rental by non-profit	1	
Beginning first month		1,046,715.
Beginning second month		1,046,503.
Beginning third month		1,046,292.
Beginning fourth month		1,046,080.
Beginning fifth month		1,045,868.
Beginning sixth month		1,045,656.
Beginning seventh month		1,045,444.
Beginning eighth month		1,045,232.
Beginning ninth month		1,045,021.
Beginning tenth month		1,044,809.
Beginning eleventh month		1,044,597.
Beginning twelfth month		1,044,385.
Total of All Months		12,546,602.
Number of Months in Year		12
Average Aquisition Debt		1,045,550.

Totals to Form 990-T, Schedule E, Column 4

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Form 990-T Schedule E - Unrelated Debt-Financed Income Average Adjusted Basis Statement 3

Description of Debt-Financed Property	Activity Number	Amount
Rental by non-profit	1	
Average adjusted basis of property first day of year		2,941,924.
Average adjusted basis of property last day of year		1,913,680.
Average adjusted basis of property for the year		2,427,802.

Total to Form 990-T, Schedule E, Column 5

Form 990-T Schedule E - Depreciation Deduction Statement 4

Description	Activity Number	Amount	Total
Depreciation		250.	
- SubTotal -	1		250.
Depreciation reported elsewhere			
Total of Form 990-T, Schedule E, Column 3(a)			250.

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Form 990-T Schedule E - Other Deductions Statement 5

Description	Activity Number	Amount	Total
Salaries		1,881.	
Benefits			
Fees		211.	
Advertising			
Rentals		4.	
Supplies		5.	
Interest Expenses		62.	
Insurance		207.	
Licenses and Taxes		9.	
Misc, Exp.		53.	
Office Supplies		16.	
Postage		97.	
Repairs		71.	
Occupancy		29.	
Materials		42.	
Taxes		4.	
Telephone		19.	
Utilities		56.	
- SubTotal -	1		2,766.
Interest Expenses			
Insurance			
Occupancy			
Administration			
Compensation			
Total of Form 990-T, Schedule E, Column 3(b)			2,766.

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Form 990-T | Average Acquisition Debt on or Allocable to Debt-Financed Property | Statement 6

Description	Activity Number	Amount	Total
Average Debt			
Average Debt			
Total of Form 990-T, Schedule E, Column 4			1,045,550.

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Form 990-T | Average Adjusted Basis of or Allocable to Debt-Financed Property | Statement 7

Description	Activity Number	Amount	Total
Average Fixed Assets			
Average Fixed Assets			
Total of Form 990-T, Schedule E, Column 5			2,427,802.

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Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property) 990

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2018

Attachment Sequence No. **179**

Name(s) shown on return	Business or activity to which this form relates	Identifying number
Seagull Services	Form 990 Page 10	59-1879968

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	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	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.**)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	171,977.

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	22,678.
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	
		/		27.5 yrs.	MM	S/L	
i	Nonresidential real property	/		39 yrs.	MM	S/L	
		/			MM	S/L	

Section C - Assets Placed in Service During 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	
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 instr.	22	194,655.
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	

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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.)

24a Do you have evidence to support the business/investment use claimed? ☐ **Yes** ☐ **No** **24b** If "Yes," is the evidence written? ☐ **Yes** ☐ **No**

(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
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use						**25**		
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1						**28**		
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							**29**	

Section B - Information on Use of Vehicles

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

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

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

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

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

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
42 Amortization of costs that begins during your 2018 tax year:					
43 Amortization of costs that began before your 2018 tax year				**43**	2,094.
44 **Total.** Add amounts in column (f). See the instructions for where to report				**44**	2,094.

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Florida Corporate Income/Franchise Tax Return

F-1120, R. 01/19 **1019**
Rule 12C-1.051
Florida Administrative Code
Effective 01/19

FEIN 59-1879968
For calendar year 2018 or tax year beginning JUL 1 , 2018 ending JUN 30, 2019

8933020190630000200503713591879968000005

Name Seagull Services
Address 3879 Byron Drive
City/State/ZIP West Palm Beach, FL 33404

☐ Check here if any changes have been made to name or address

Computation of Florida Net Income Tax

1.	Federal taxable income (see instructions) - **Attach pages 1-5 of federal return**	Check here if negative ___	0.00
2.	State income taxes deducted in computing federal taxable income (attach schedule)	Check here if negative ___	
3.	Additions to federal taxable income (from Schedule I)	Check here if negative ___	
4.	Total of Lines 1, 2 and 3	Check here if negative ___	0.00
5.	Subtractions from federal taxable income (from Schedule II)	Check here if negative ___	
6.	Adjusted federal income (Line 4 minus Line 5)	Check here if negative ___	
7.	Florida portion of adjusted federal income (see instructions)	Check here if negative ___	0.00
8.	Nonbusiness income allocated to Florida (from Schedule R)	Check here if negative ___	
9.	**Florida exemption**		0.00
10.	Florida net income (Line 7 plus Line 8 minus Line 9)		0.00
11.	Tax due: 5.5% of Line 10		0.00
12.	Credits against the tax (from Schedule V)		
13.	Total corporate income/franchise tax due (Line 11 minus Line 12)		0.00
14.	a) Penalty: F-2220 ___ b) Other ___ c) Interest: F-2220 ___ d) Other ___ Line 14 Total ▶		
15.	Total of Lines 13 and 14		
16.	Payment credits: Estimated tax payments 16a $ ___ Tentative tax payment 16b $ ___		
17.	Total amount due: Subtract Line 16 from Line 15. If positive, enter amount due here and on payment coupon. If the amount is negative (overpayment), enter on Line 18 and/or Line 19		**0.00**
18.	Credit: Enter amount of overpayment **credited** to next year's estimated tax here and on payment coupon		
19.	Refund: Enter amount of overpayment to be **refunded** here and on payment coupon		

844081 09-17-18

Payment Coupon for Florida Corporate Income Tax Return

1019
F-1120
R. 01/19

Do Not Detach YEAR ENDING 06/30/19

To ensure proper credit to your account, enclose your check with tax return when mailing.

Name Seagull Services
Address 3879 Byron Drive
City/State/ZIP West Palm Beach, FL 33404

If 6/30 year end, return is due 1st day of the 4th month after the close of the taxable year, otherwise return is due 1st day of the 5th month after the close of the taxable year.

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Seagull Services

FEIN 59-1879968 06/30/19

This return is considered incomplete unless a copy of the federal return is attached.

If your return is not signed, or improperly signed and verified, it will be subject to a penalty. The statute of limitations will not start until your return is properly signed and verified. Your return must be completed in its entirety.

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 taxpayer) is based on all information of which preparer has any knowledge.

Sign here	Signature of officer (must be an original signature) Date	Title	CEO
Paid preparers only	Preparer's signature Date	Preparer check if self-employed ☐	Preparer's PTIN P01366363
	Firm's name (or yours if self-employed) and address: Holyfield & Thomas, LLC 125 Butler Street West Palm Beach, FL	FEIN	65-1083521
		ZIP	33407

All Taxpayers Must Answer Questions **A** through **M** Below - See Instructions

A. State of incorporation: FLORIDA

B. Florida Secretary of State document number:

C. Florida consolidated return? YES ☐ NO ☒

D. ☐ Initial return ☐ Final return (final federal return filed)

E. Principal Business Activity Code (as pertains to Florida)

531190

T

F. A Florida extension of time was timely filed? YES ☒ NO ☐

G-1. Corporation is a member of a controlled group? YES ☐ NO ☒ If yes, attach list.

G-2. Part of a federal consolidated return? YES ☐ NO ☒ If yes, provide:

FEIN from federal consolidated return:

Name of corporation:

G-3. The federal common parent has sales, property, or payroll in Florida? YES ☐ NO ☒

H. Location of corporate books:

3879 Byron Drive

City, State, ZIP: West Palm Beach, FL 33404

I. Taxpayer is a member of a Florida partnership or joint venture? YES ☐ NO ☒

J. Enter date of latest IRS audit:

a) List years examined:

K. Contact person concerning this return: Carol O'Neil

a) Contact person telephone number: (561) 842-5814

b) Contact person e-mail address: coneil@seagull.org

L. Type of federal return filed ☐ 1120 ☐ 1120S or 990-T

L

Where to Send Payments and Returns

Make check payable to and mail with return to:

Florida Department of Revenue
5050 W Tennessee Street
Tallahassee FL 32399-0135

If you are requesting a **refund** (Line 19), send your return to:

Florida Department of Revenue
PO Box 6440
Tallahassee FL 32314-6440

Remember:

- **Make your check payable to the Florida Department of Revenue.**
- **Write your FEIN on your check.**
- **Sign your check and return.**
- **Attach a copy of your federal return.**
- **Attach a copy of your Florida Form F-7004 (extension of time) if applicable.**

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NAME Seagull Services FEIN 59-1879968 TAXABLE YEAR ENDING 06/30/19

Schedule I - Additions and/or Adjustments to Federal Taxable Income

1.	Interest excluded from federal taxable income (see instructions)	1.
2.	Undistributed net long-term capital gains (see instructions)	2.
3.	Net operating loss deduction (attach schedule)	3.
4.	Net capital loss carryover (attach schedule)	4.
5.	Excess charitable contribution carryover (attach schedule)	5.
6.	Employee benefit plan contribution carryover (attach schedule)	6.
7.	Enterprise zone jobs credit (Florida Form F-1156Z)	7.
8.	Ad valorem taxes allowable as enterprise zone property tax credit (Florida Form F-1158Z)	8.
9.	Guaranty association assessment(s) credit	9.
10.	Rural and/or urban high crime area job tax credits	10.
11.	State housing tax credit	11.
12.	Florida Tax Credit Scholarship Program Credits	12.
13.	Renewable energy tax credits	13.
14.	New markets tax credit	14.
15.	Entertainment industry tax credit	15.
16.	Research and Development tax credit	16.
17.	Energy Economic Zone tax credit	17.
18.	s. 168(k) IRC special bonus depreciation	18.
19.	Other additions (attach schedule)	19.
20.	Total Lines 1 through 19. Enter total on Line 20 and on Page 1, Line 3.	20.

Schedule II - Subtractions from Federal Taxable Income

1.	Gross foreign source income less attributable expenses (a) Enter s. 78, IRC income $ _____ (b) plus s. 862, IRC dividends $ _____ (c) less direct and indirect expenses $ _____ Total ▶	1.
2.	Gross subpart F income less attributable expenses (a) Enter s. 951, IRC subpart F income $ _____ (b) less direct and indirect expenses $ _____ Total ▶	2.
	Note: Taxpayers doing business outside Florida enter zero on Lines 3 through 6, and complete Schedule IV.	
3.	Florida net operating loss carryover deduction (see instructions)	3.
4.	Florida net capital loss carryover deduction (see instructions)	4.
5.	Florida excess charitable contribution carryover (see instructions)	5.
6.	Florida employee benefit plan contribution carryover (see instructions)	6.
7.	Nonbusiness income (from Schedule R, Line 3)	7.
8.	Eligible net income of an international banking facility (see instructions)	8.
9.	s. 179, IRC expense (see instructions)	9.
10.	s. 168(k), IRC special bonus depreciation (see instructions)	10.
11.	Other subtractions (attach statement)	11.
12.	Total Lines 1 through 11. Enter total on Line 12 and on Page 1, Line 5.	12.

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NAME Seagull Services FEIN 59-1879968 TAXABLE YEAR ENDING 06/30/19

Schedule III - Apportionment of Adjusted Federal Income

III-A For use by taxpayers doing business outside Florida, except those providing insurance or transportation services.

	(a) WITHIN FLORIDA (Numerator)	(b) TOTAL EVERYWHERE (Denominator)	(c) Col. (a) ÷ Col. (b) Rounded to Six Decimal Places	(d) Weight If any factor in Column (b) is zero, see note on Pg 9 of the instructions.	(e) Weighted Factors Rounded to Six Decimal Places
1. Property (Schedule III-B below)				X 25% or	
2. Payroll				X 25% or	
3. Sales (Schedule III-C below)				X 50% or	
4. Apportionment fraction (Sum of Lines 1, 2, and 3, Column [e]). Enter here and on Schedule IV, Line 2.					1.000000

III-B For use in computing average value of property (use original cost).	WITHIN FLORIDA		TOTAL EVERYWHERE	
	a. Beginning of year	b. End of year	c. Beginning of year	d. End of year
1. Inventories of raw material, work in process, finished goods				
2. Buildings and other depreciable assets				
3. Land owned				
4. Other tangible and intangible (financial org. only) assets (attach schedule)				
5. Total (Lines 1 through 4)				

6. Average value of property
   a. Add Line 5, Columns (a) and (b) and divide by 2 (for within Florida) ..... 6a. _____
   b. Add Line 5, Columns (c) and (d) and divide by 2 (for total everywhere) ..... 6b. _____
7. Rented property (8 times net annual rent)
   a. Rented property in Florida ..... 7a. _____
   b. Rented property Everywhere ..... 7b. _____
8. Total (Lines 6 and 7). Enter on Line 1, Schedule III-A, Columns (a) and (b).
   a. Enter Lines 6 a. plus 7 a. and also enter on Schedule III-A, Line 1, Column (a) for total average property in Florida ..... 8a. _____
   b. Enter Lines 6 b. plus 7 b. and also enter on Schedule III-A, Line 1, Column (b) for total average property Everywhere ..... 8b. _____

III-C Sales Factor	(a) TOTAL WITHIN FLORIDA (Numerator)	(b) TOTAL EVERYWHERE (Denominator)
1. Sales (gross receipts)	N/A	
2. Sales delivered or shipped to Florida purchasers		N/A
3. Other gross receipts (rents, royalties, interest, etc. when applicable)		
4. TOTAL SALES (Enter on Schedule III-A, Line 3, Columns [a] and [b])		

III-D Special Apportionment Fractions (see instructions)	(a) WITHIN FLORIDA	(b) TOTAL EVERYWHERE	(c) FLORIDA Fraction ([a] ÷ [b]) Rounded to Six Decimal Places
1. Insurance companies (attach copy of Schedule T - Annual Report)			
2. Transportation services			

Schedule IV - Computation of Florida Portion of Adjusted Federal Income

1. Apportionable adjusted federal income from Page 1, Line 6	1.
2. Florida apportionment fraction (Schedule III-A, Line 4)	2.
3. Tentative apportioned adjusted federal income (multiply Line 1 by Line 2)	3.
4. Net operating loss carryover apportioned to Florida (attach schedule; see instructions)	4.
5. Net capital loss carryover apportioned to Florida (attach schedule; see instructions)	5.
6. Excess charitable contribution carryover apportioned to Florida (attach schedule; see instructions)	6.
7. Employee benefit plan contribution carryover apportioned to Florida (attach schedule; see instructions)	7.
8. Total carryovers apportioned to Florida (add Lines 4 through 7)	8.
9. Adjusted federal income apportioned to Florida (Line 3 less Line 8; see instructions)	9.

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NAME Seagull Services FEIN 59-1879968 TAXABLE YEAR ENDING 06/30/19

Schedule V - Credits Against the Corporate Income/Franchise Tax

1.	Florida health maintenance organization credit (attach assessment notice)	1.
2.	Capital investment tax credit (attach certification letter)	2.
3.	Enterprise zone jobs credit (from Florida Form F-1156Z attached)	3.
4.	Community contribution tax credit (attach certification letter)	4.
5.	Enterprise zone property tax credit (from Florida Form F-1158Z attached)	5.
6.	Rural job tax credit (attach certification letter)	6.
7.	Urban high crime area job tax credit (attach certification letter)	7.
8.	Hazardous waste facility tax credit	8.
9.	Florida alternative minimum tax (AMT) credit	9.
10.	Contaminated site rehabilitation tax credit (attach tax credit certificate)	10.
11.	State housing tax credit (attach certification letter)	11.
12.	Florida Tax Credit: Scholarship Program Credits. (attach certificate)	12.
13.	Florida renewable energy technologies investment tax credit	13.
14.	Florida renewable energy production tax credit	14.
15.	New markets tax credit	15.
16.	Entertainment industry tax credit	16.
17.	Research and Development tax credit	17.
18.	Energy Economic Zone tax credit	18.
19.	Other credits (attach schedule)	19.
20.	Total credits against the tax (sum of Lines 1 through 19 not to exceed the amount on Page 1, Line 11). Enter total credits on Page 1, Line 12	20.

Schedule R - Nonbusiness Income

Line 1. Nonbusiness income (loss) allocated to Florida

Type	Amount

Total allocated to Florida ..... 1.
(Enter here and on Page 1, Line 8)

Line 2. Nonbusiness income (loss) allocated elsewhere

Type	State/country allocated to	Amount

Total allocated elsewhere ..... 2.

Line 3. Total nonbusiness income

Grand total. Total of Lines 1 and 2 ..... 3.
(Enter here and on Schedule II, Line 7)

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NAME Seagull Services FEIN 59-1879968 TAXABLE YEAR ENDING 06/30/19

Estimated Tax Worksheet
For Taxable Years Beginning On or After January 1, 2018

1. Florida income expected in taxable year ..... 1. $ _____
2. Florida exemption $50,000 (Members of a controlled group, see instructions on Page 14 of Florida Form F-1120N) ..... 2. $ _____
3. Estimated Florida net income (Line 1 less Line 2) ..... 3. $ _____
4. Total Estimated Florida tax (5.5% of Line 3) ..... $ _____
   Less: Credits against the tax ..... $ _____ 4. $ _____

5. Computation of installments:
   Payment due dates and payment amounts:
   If 6/30 year end, last day of 4th month, otherwise last day of 5th month - Enter 0.25 of Line 4 ..... 5a. _____
   Last day of 6th month - Enter 0.25 of Line 4 ..... 5b. _____
   Last day of 9th month - Enter 0.25 of Line 4 ..... 5c. _____
   Last day of fiscal year - Enter 0.25 of Line 4 ..... 5d. _____

NOTE: If your estimated tax should change during the year, you may use the amended computation below to determine the amended amounts to be entered on the declaration (Florida Form F-1120ES).

1. Amended estimated tax ..... 1. $ _____
2. Less:
   (a) Amount of overpayment from last year elected for credit to estimated tax and applied to date ..... 2a. -- $ _____
   (b) Payments made on estimated tax declaration (Florida Form F-1120ES) 2b. -- $ _____
   (c) Total of Lines 2(a) and 2(b) ..... 2c. $ _____
3. Unpaid balance (Line 1 less Line 2(c)) ..... 3. $ _____
4. Amount to be paid (Line 3 divided by number of remaining installments) ..... 4. $ _____

References

The following documents were mentioned in this form and are incorporated by reference in the rules indicated below. The forms are available online at floridarevenue.com/forms.

Form F-2220	Underpayment of Estimated Tax on Florida Corporate Income/Franchise Tax	Rule 12C-1.051, F.A.C.
Form F-7004	Florida Tentative Income/Franchise Tax Return and Application for Extension of Time to File Return	Rule 12C-1.051, F.A.C.
Form F-1156Z	Florida Enterprise Zone Jobs Credit Certificate of Eligibility for Corporate Income Tax	Rule 12C-1.051, F.A.C.
Form F-1158Z	Enterprise Zone Property Tax Credit	Rule 12C-1.051, F.A.C.
Form F-1120N	Instructions for Corporate Income/Franchise Tax Return	Rule 12C-1.051, F.A.C.
Form F-1120ES	Declaration/Installment of Florida Estimated	Rule 12C-1.051, F.A.C.

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Seagull Services

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