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

2017

Open to Public Inspection

A For the 2017 calendar year, or tax year beginning January 1 **, 2017, and ending** December 31 **, 20** 17

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☑ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☑ Application pending

C Name of organization: Ocean and Coastal Observing-Virgin Islands, Inc.

Doing business as: OCOVI, Inc.

Number and street (or P.O. box if mail is not delivered to street address): P.O. Box 308036 | Room/suite:

City or town, state or province, country, and ZIP or foreign postal code: St. Thomas, VI 00803

D Employer identification number: 66-0869183

E Telephone number: 340 643 8183

G Gross receipts $ $80,977.11

F Name and address of principal officer: Roy A. Watlington, P.O. Box 302321, St. Thomas, VI 00803

H(a) Is this a group return for subordinates? ☑ **Yes** ☐ **No**

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

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

J Website: ▶ www.ocovi.org

H(c) Group exemption number ▶ applied/pending

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 2017

M State of legal domicile: VI

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
OCOVI, Inc. initiates and facilitates activities in the USVI region that monitor, manage, protect, sustainably utilize and foster appreciation of the region's marine and coastal resources by providing data, advisement, education supporting the goals of the US Integrated Ocean Observing System

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	5
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	5
5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	0
6	Total number of volunteers (estimate if necessary)	6	2
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	
b	Net unrelated business taxable income from Form 990-T, line 34	7b	

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	0.00	$80,908.46
	9	Program service revenue (Part VIII, line 2g)		
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.00	$68.70
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0.00	$80,977.16
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0.00
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.00
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		0.00
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.00
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.00		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)		
	19	Revenue less expenses. Subtract line 18 from line 12		

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	0.00	$43,224.53
	21	Total liabilities (Part X, line 26)	0.00	$11,124.07
	22	Net assets or fund balances. Subtract line 21 from line 20	0.00	$32,100.46

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: June 13, 2018

Roy A. Watlington, OCOVI Project Director
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN

Firm's name ▶ | Firm's EIN ▶

Firm's address ▶ | Phone no.

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

Part III **Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission:

Ocean and Coastal Observing-Virgin Islands, Inc. (OCOVI) is dedicated to activities in the USVI region that monitor, manage, protect, sustainably utilize and foster appreciation of the region's marine and coastal environments by providing data, information, products, services and advisement. OCOVI's activities are organized in four areas of accountability: (1) Education and Outreach; (2) Observations and Observational Assets; (3) Stakeholder service; and (4) Assisting CARICOOS Headquarters. For 2017 these areas are ranked in order by amount of effort and expenditures as (1), (3), and (

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☑ Yes ☐ No

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ approx $20,000 including grants of $) (Revenue $)

EDUCATION and OUTREACH -Imediately after establishing goovernance structure OCOV I resumed outreach and education efforts that had been pre-positioned for top priority. These included developing web and social media presence ; extending O&E to the VI Children's Museum in the form of a H CARICOOS exhibit and when the venue was damaged by hurricanes CARICOOS computer tables programs for the Mobile Museum. OCOVI also . supported STEM activities in activities related to ocean-observing at the University of the Virgin Islands (UVI). OCOVI's Hands-on ROV project was introduced to student robotics and technology clubs as a means of promoting ocean-observations skills and appreciations in students and their teachers. Equipment from OCOVI's inventory of fixed assets were loaned to qualified organizations . The hurricanes added urgency to OCOVI's on-going program to educate about coastal hazards and how to access and understand data and information from CARICOOS observational assets about storms.

4b (Code:) (Expenses $ approx $15,000 including grants of $) (Revenue $)

OBSERVATIONS & OBSERVATIONAL ASSETS -- Early in 2017 OCOVI focused its effort to improve observations and enhance the inventory of observational assets by seeking funding for precipitation gausges, by facilitating the establishment of High-frequency radar in the USVI, and by assisting decision-making on best siting and use of data buoys in USVI waters. Inasmuch as the 2017 hurricanes destroyed 5 of 6 weatherstations and silenced its buoys, OCOVI's effort was then shifted to evaluating he status of the system and recovering the capabilities of these assets.

4c (Code:) (Expenses $ approx $5000 including grants of $) (Revenue $)

STAKEHOLDER SERVICE -- Before the stroms this coinsisted of introducing stakeholders to available CARICOOS data and resources and showing how to access resources that particular users need and assisting the fishing community in identifying the data they need as well as their preferred siting of buoys. After the storms as assets were damaged and unavailable, OCOVI worked with emergency managers, fishers, coastal hazards educators, and institutions trying to respond to their needs to build on the hurricane experience to eliminate superstition and fear with proactive opreparation for. both the next hgurricane season and the likelihood of damaging outcomes of weather and climate extremes.

4d Other program services (Describe in Schedule O.)
(Expenses $ approx $5,000 including grants of $ 0) (Revenue $)

4e Total program service expenses ▶ approx $47,000

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	✓	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2		✓
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		✓
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		✓
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		✓
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		✓
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		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		✓
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		✓
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		✓
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		✓
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		✓
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		✓
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		✓
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		✓
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		✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		✓
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		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		✓
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
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		✓
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		✓
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		✓
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions)	17		✓
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		✓
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		✓

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
20 a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		✓
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		✓
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		✓
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		✓
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		✓
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		✓
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		✓
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		✓
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		✓
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		✓
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		✓
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		✓
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		✓
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		✓
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		✓
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		✓
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
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		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O.	38	✓	

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** 6			
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**	✓	
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** 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		**2b**		
	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**		✓
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**		
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**		✓
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**		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		**5b**		✓
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**		✓
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**		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		**7b**		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		**7c**		✓
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**		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		**7f**		✓
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** 0.00			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	**10b** 0.00			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	**11a** 0.00			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	**11b** 0.00			
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**		✓
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*		**14b**		

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

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

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . . **1a** 5 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** 5			
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**		✓
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**		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	**4**		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	**5**		✓
6	Did the organization have members or stockholders?	**6**		✓
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	**7a**		✓
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**		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	**8a**	✓	
b	Each committee with authority to act on behalf of the governing body?	**8b**		✓
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**		✓

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**		✓
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**	✓	
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**	✓	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**		✓
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	**12c**	✓	
13	Did the organization have a written whistleblower policy?	**13**		✓
14	Did the organization have a written document retention and destruction policy?	**14**		
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**	✓	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	**15b**	✓	
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**		✓
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 ▶ Virgin Islands of the United States of America

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☑ Own website ☐ Another's website ☐ Upon request ☐ Other *(explain in Schedule O)*

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶

Roy A. Watlington, P.O. Box 30231, St. Thomas, VI 00803, (340) 643-8183

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

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

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

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: 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) Henry H. Smith, Chairperson of Board of Directors	0.25	✓						0.00	0.00	0.00
(2) Jennifer Nugent-Hill, Vice-chairperson	0.25	✓						0.00	0.00	0.00
(3) Luis A. Sylvester, Treasurer	1.00	✓						0.00	0.00	0.00
(4) Lorraine M. Buckley, Secretary	0.25	✓						0.00	0.00	0.00
(5) Kemit-Amon Lewis	0.25	✓						0.00	0.00	0.00
(6) Roy A. Watlington, Project Director	30.00			✓				$8,000.00	0.00	0.00
(7) William Douglas Wilson, Chief Science Officer	10.00			✓				$8,000.00	0.00	0.00
(8) Andy Breton, Webmaster	3.00			✓				$5,700.00	0.00	0.00
(9) Amber McCammon, Outreach&Educ Coordinator	2.00			✓				$5,000.00	0.00	0.00
(10) Marc Boumedine, Computational Consultant	3.00			✓				$1,500.00	0.00	0.00
(11) Marjorie Smith, Liaison to Student Organizations	2.00			✓				$1,150.00	0.00	0.00
(12)									0.00	0.00
(13)									0.00	0.00
(14)									0.00	0.00

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): 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
(15)								0.00	0.00	0.00
(16)								0.00	0.00	0.00
(17)								0.00	0.00	0.00
(18)								0.00	0.00	0.00
(19)								0.00	0.00	0.00
(20)								0.00	0.00	0.00
(21)								0.00	0.00	0.00
(22)								0.00	0.00	0.00
(23)								0.00	0.00	0.00
(24)								0.00	0.00	0.00
(25)								0.00	0.00	0.00
1b Sub-total ▶								$29,350.00	0.00	0.00
c Total from continuation sheets to Part VII, Section A ▶								0.00	0.00	0.00
d Total (add lines 1b and 1c) ▶								$29,350.00	0.00	0.00

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 ▶ 0

		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		✓
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		✓
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		✓

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

Part VIII Statement of Revenue

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

Contributions, Gifts, Grants and Other Similar Amounts

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a	Federated campaigns	1a	0.00				
b	Membership dues	1b	0.00				
c	Fundraising events	1c	0.00				
d	Related organizations	1d	0.00				
e	Government grants (contributions)	1e	$79,408.46				
f	All other contributions, gifts, grants, and similar amounts not included above	1f	$1,500.00				
g	Noncash contributions included in lines 1a-1f: $		0.00				
h	**Total.** Add lines 1a–1f ▶			$80,908.46			

Program Service Revenue

		Business Code	(A)	(B)	(C)	(D)
2a						
b						
c						
d						
e						
f	All other program service revenue					
g	**Total.** Add lines 2a–2f ▶		0.00			

Other Revenue

		(i)	(ii)	(A)	(B)	(C)	(D)
3	Investment income (including dividends, interest, and other similar amounts) ▶			$68.70	$68.70	0.00	0.00
4	Income from investment of tax-exempt bond proceeds ▶			0.00			
5	Royalties ▶						
		(i) Real	(ii) Personal				
6a	Gross rents	0.00	0.00				
b	Less: rental expenses	0.00	0.00				
c	Rental income or (loss)	0.00	0.00				
d	Net rental income or (loss) ▶			0.00	0.00	0.00	0.00
7a	Gross amount from sales of assets other than inventory	(i) Securities 0.00	(ii) Other 0.00				
b	Less: cost or other basis and sales expenses	0.00	0.00				
c	Gain or (loss)	0.00	0.00				
d	Net gain or (loss) ▶			0.00	0.00	0.00	0.00
8a	Gross income from fundraising events (not including $ 0.00 of contributions reported on line 1c). See Part IV, line 18	a	0.00				
b	Less: direct expenses	b	0.00				
c	Net income or (loss) from fundraising events ▶			0.00		0.00	0.00
9a	Gross income from gaming activities. See Part IV, line 19	a	0.00				
b	Less: direct expenses	b	0.00				
c	Net income or (loss) from gaming activities ▶			0.00	0.00	0.00	0.00
10a	Gross sales of inventory, less returns and allowances	a	0.00				
b	Less: cost of goods sold	b	0.00				
c	Net income or (loss) from sales of inventory ▶			0.00	0.00	0.00	0.00

	Miscellaneous Revenue	Business Code	(A)	(B)	(C)	(D)
11a	None					
b						
c						
d	All other revenue					
e	**Total.** Add lines 11a–11d ▶		0.00			
12	**Total revenue.** See instructions. ▶		$80,977.16	$80,977.16	0.00	0.00

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	0.00	0.00		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0.00	0.00		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0.00	0.00		
4	Benefits paid to or for members	0.00	0.00		
5	Compensation of current officers, directors, trustees, and key employees	0.00	0.00	0.00	0.00
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.00	0.00	0.00	0.00
7	Other salaries and wages	0.00	0.00	0.00	0.00
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0.00	0.00	0.00	0.00
9	Other employee benefits	0.00	0.00	0.00	0.00
10	Payroll taxes	0.00	0.00	0.00	0.00
11	Fees for services (non-employees):				
a	Management	$16,000.00	$16,000.00	0.00	0.00
b	Legal	$466.50	$466.50	0.00	0.00
c	Accounting	0.00	0.00	0.00	0.00
d	Lobbying	0.00	0.00	0.00	0.00
e	Professional fundraising services. See Part IV, line 17	0.00			0.00
f	Investment management fees	0.00	0.00	0.00	0.00
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	$6,650.00	$6,650.00	0.00	0.00
12	Advertising and promotion				
13	Office expenses	$238.51	$238.51		
14	Information technology	$7,320.52	$7,320.52		
15	Royalties				
16	Occupancy	$800.00	$800.00	0.00\	0.00
17	Travel	$3,323.28	$3,323.28		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	$90.14	$90.14	0.00	0.00
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	$76.21	$76.21		
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	IRS fee for filing 501(c)(3) application	$850.00	$850.00		
b	Equipment / Fixed assets	$14,813.98	$14,813.98		
c	Postage	$437.47	$437.47		
d	Repay loan	$1,500.00	$1,500.00		
e	All other expenses				
25	**Total functional expenses.** Add lines 1 through 24e	$52,566.61	$52,566.61	0.00	0.00
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)				

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	0.00	1	0.00
	2	Savings and temporary cash investments	0.00	2	$28,410.55
	3	Pledges and grants receivable, net	0.00	3	0.00
	4	Accounts receivable, net	0.00	4	0.00
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0.00	5	0.00
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0.00	6	0.00
	7	Notes and loans receivable, net	0.00	7	0.00
	8	Inventories for sale or use	0.00	8	$14,813.98
	9	Prepaid expenses and deferred charges	0.00	9	0.00
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 0.00			
	b	Less: accumulated depreciation — 10b: 0.00	0.00	10c	0.00
	11	Investments—publicly traded securities	0.00	11	0.00
	12	Investments—other securities. See Part IV, line 11	0.00	12	0.00
	13	Investments—program-related. See Part IV, line 11	0.00	13	0.00
	14	Intangible assets	0.00	14	0.00
	15	Other assets. See Part IV, line 11	0.00	15	0.00
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	0.00	16	$43,224.53
Liabilities	17	Accounts payable and accrued expenses	0.00	17	$11,124.07
	18	Grants payable	0.00	18	0.00
	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		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	0.00	26	$11,124.07
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	0.00	27	0.00
	28	Temporarily restricted net assets	0.00	28	$17,286.48
	29	Permanently restricted net assets	0.00	29	$14,813.98
		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	0.00	33	$32,100.46
	34	Total liabilities and net assets/fund balances	0.00	34	$43,224.53

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	$80,977.16
2	Total expenses (must equal Part IX, column (A), line 25)	2	$52,556.61
3	Revenue less expenses. Subtract line 2 from line 1	3	$28,410.55
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	0.00
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	

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	✓	
	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		✓
	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	✓	
	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		✓
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		

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

2017

Open to Public Inspection

Name of the organization	Employer identification number
Ocean and Coastal Observing-Virgin Islands, Inc. (OCOVI)	66-0869183

Part III Line 4d - The fourth area of OCOVI's focus is "Assisting CARICOOS Headquarters" -- OCOVI's efforts in this area in 2017 were maximal as CARICOOS

Headquarters sought to assess the impacts of the storms on CARICOOS' ocean observing assets. OCOVI surveyed all buoys, weater stations and other . Pa

instruments. Further OCOVI asisted in the presentations to NOAA/IOOS Headquarters with regard to applying for supplemental relief funds.

Part VI Line 11b - The 990 Form was submitted to all Board of Directors members by e-mail and responses were received.

Part VI, line 12c - All hiring and contracting require approval of two Board officers and are reported regularly to the Board as a whole. A checks require two

signatures,. one of which must be either the Treasurer or the Chairperson. -

Part VI, Line 15a - Approval of a Board Resilutuon was the menas by which compensation of the top officers was set.

Part VI, Line 19 - Some of these documents were made available on the organization's web page, There were no pevious-year financial statements.

Name of the organization	**Employer identification number**

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Schedule O (Form 990 or 990-EZ), such as legislation enacted after the schedule and its instructions were published, go to *www.irs.gov/Form990*.

Purpose of Schedule

An organization should use Schedule O (Form 990 or 990-EZ), rather than separate attachments, to provide the IRS with narrative information required for responses to specific questions on Form 990 or 990-EZ, and to explain the organization's operations or responses to various questions. It allows organizations to supplement information reported on Form 990 or 990-EZ.

Don't use Schedule O to supplement responses to questions in other schedules of the Form 990 or 990-EZ. Each of the other schedules includes a separate part for supplemental information.

Who Must File

All organizations that file Form 990 and certain organizations that file Form 990-EZ must file Schedule O (Form 990 or 990-EZ). At a minimum, the schedule must be used to answer Form 990, Part VI, lines 11b and 19. If an organization isn't required to file Form 990 or 990-EZ but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

Specific Instructions

Use as many continuation sheets of Schedule O (Form 990 or 990-EZ) as needed.

Complete the required information on the appropriate line of Form 990 or 990-EZ prior to using Schedule O (Form 990 or 990-EZ).

Identify clearly the specific part and line(s) of Form 990 or 990-EZ to which each response relates. Follow the part and line sequence of Form 990 or 990-EZ.

Late return. If the return isn't filed by the due date (including any extension granted), attach a separate statement giving the reasons for not filing on time. **Don't use** this schedule to provide the late-filing statement.

Amended return. If the organization checked the *Amended return* box on Form 990, *Heading*, item B, or Form 990-EZ, *Heading*, item B, use Schedule O (Form 990 or 990-EZ) to list each part or schedule and line item of the Form 990 or 990-EZ that was amended.

Group return. If the organization answered “Yes” to Form 990, line H(a), but “No” to line H(b), use a separate attachment to list the name, address, and EIN of each affiliated organization included in the group return. **Don't use** this schedule. See the Instructions for Form 990, *I. Group Return.*

Form 990, Parts III, V, VI, VII, IX, XI, and XII. Use Schedule O (Form 990 or 990-EZ) to provide any narrative information required for the following questions in the Form 990.

1. Part III, *Statement of Program Service Accomplishments.*

a. “Yes” response to line 2.

b. “Yes” response to line 3.

c. Other program services on line 4d.

2. Part V, *Statements Regarding Other IRS Filings and Tax Compliance*.

a. “No” response to line 3b.

b. “Yes” or “No” response to line 13a.

c. “No” response to line 14b.

3. Part VI, *Governance, Management, and Disclosure.*

a. Material differences in voting rights among members of the governing body in line 1a.

b. Delegation of governing board's authority to executive committee in line 1a.

c. “Yes” responses to lines 2 through 7b.

d. “No” responses to lines 8a, 8b, and 10b.

e. “Yes” response to line 9.

f. Description of process for review of Form 990, if any, in response to line 11b.

g. “Yes” response to line 12c.

h. Description of process for determining **compensation** in response to lines 15a and 15b.

i. If applicable, in response to line 18, an explanation as to why the organization checked the *Other* box or didn't make any of Forms 1023, 1024, 990, or 990-T publicly available.

j. Description of public disclosure of documents in response to line 19.

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

a. Explain if reporting of compensation paid by a related organization is provided only for the period during which the related organization was related, not the entire calendar year ending with or within the tax year, and state the period during which the related organization was related.

b. Description of reasonable efforts undertaken to obtain information on compensation paid by related organizations, if the organization is unable to obtain such information to report in column (E).

5. Explanation for Part IX, *Statement of Functional Expenses*, line 11g (other fees for services), including the type and amount of each expense included in line 11g, if the amount in Part IX, line 11g, exceeds 10% of the amount in Part IX, line 25 (total functional expenses).

6. Explanation for Part IX, *Statement of Functional Expenses*, line 24e (all other expenses), including the type and amount of each expense included in line 24e, if the amount on line 24e exceeds 10% of the amount in Part IX, line 25 (total functional expenses).

7. Part XI, *Reconciliation of Net Assets.* Explain any other changes in net assets or fund balances reported on line 9.

8. Part XII, *Financial Statements and Reporting.*

a. Change in accounting method or description of other accounting method used on line 1.

b. Change in committee oversight review from prior year on line 2c.

c. “No” response to line 3b.

Form 990-EZ, Parts I, II, III, and V. Use Schedule O (Form 990 or 990-EZ) to provide any narrative information required for the following questions.

1. Part I, *Revenue, Expenses, and Changes in Net Assets or Fund Balances*.

a. Description of other revenue, in response to line 8.

b. List of grants and similar amounts paid, in response to line 10.

c. Description of other expenses, in response to line 16.

d. Explanation of other changes in net assets or fund balances, in response to line 20.

2. Part II, *Balance Sheets*.

a. Description of other assets, in response to line 24.

b. Description of total liabilities, in response to line 26.

3. Description of other program services in response to Part III, *Statement of Program Service Accomplishments*, line 31.

4. Part V, *Other Information*.

a. “Yes” response to line 33.

b. “Yes” response to line 34.

c. Explanation of why organization didn't report unrelated business gross income of $1,000 or more to the IRS on Form 990-T, in response to line 35b.

d. “No” response to line 44d.

Other. Use Schedule O (Form 990 or 990-EZ) to provide narrative explanations and descriptions in response to other specific questions. The narrative provided should refer and relate to a particular line and response on the form.

CAUTION

Don't *include on Schedule O (Form 990 or 990-EZ) any social security number(s), because this schedule will be made available for public inspection.*