

Form **990-EZ**Department of the Treasury  
Internal Revenue Service**Short Form****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/Form990EZ](http://www.irs.gov/Form990EZ) for instructions and the latest information.

OMB No. 1545-1150

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

<b>A</b> For the 2018 calendar year, or tax year beginning , 2018, and ending , 20	
<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>Veterans' Council of St. Johns County, Inc.</b> Number and street (or P.O. box, if mail is not delivered to street address) Room/suite <b>PO Box 2117</b> City or town, state or province, country, and ZIP or foreign postal code <b>St Augustine, FL 32085-2117</b>
<b>D</b> Employer identification number <b>27-1971825</b>	<b>E</b> Telephone number <b>(904) 687-5668</b>
<b>F</b> Group Exemption Number ▶	
<b>G</b> Accounting Method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ▶	
<b>I</b> Website: ▶ <a href="http://www.veteranscouncilsjc.org/">http://www.veteranscouncilsjc.org/</a>	
<b>J</b> Tax-exempt status (check only one) — <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other	
<b>L</b> Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ . . . . . ▶ \$ <b>64,233</b>	

<b>Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances</b> (see the instructions for Part I)	
Check if the organization used Schedule O to respond to any question in this Part I . . . . . <input checked="" type="checkbox"/>	
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received . . . . . <b>1</b> <b>62,764</b>
	<b>2</b> Program service revenue including government fees and contracts . . . . . <b>2</b> <b>0</b>
	<b>3</b> Membership dues and assessments . . . . . <b>3</b> <b>0</b>
	<b>4</b> Investment income . . . . . <b>4</b> <b>0</b>
	<b>5a</b> Gross amount from sale of assets other than inventory . . . . . <b>5a</b> <b>0</b>
	<b>b</b> Less: cost or other basis and sales expenses . . . . . <b>5b</b> <b>0</b>
	<b>c</b> Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . . . <b>5c</b> <b>0</b>
	<b>6</b> Gaming and fundraising events:
	<b>a</b> Gross income from gaming (attach Schedule G if greater than \$15,000) . . . . . <b>6a</b> <b>422</b>
<b>b</b> Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . . . <b>6b</b> <b>1,142</b>	
<b>c</b> Less: direct expenses from gaming and fundraising events . . . . . <b>6c</b> <b>145</b>	
<b>d</b> Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) . . . . . <b>6d</b> <b>1,419</b>	
<b>7a</b> Gross sales of inventory, less returns and allowances . . . . . <b>7a</b> <b>0</b>	
<b>b</b> Less: cost of goods sold . . . . . <b>7b</b> <b>0</b>	
<b>c</b> Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . . <b>7c</b> <b>0</b>	
<b>8</b> Other revenue (describe in Schedule O) . . . . . <b>8</b> <b>200</b>	
<b>9</b> <b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 . . . . . ▶ <b>9</b> <b>64,383</b>	
<b>Expenses</b>	<b>10</b> Grants and similar amounts paid (list in Schedule O) . . . . . <b>10</b> <b>31,953</b>
	<b>11</b> Benefits paid to or for members . . . . . <b>11</b> <b>0</b>
	<b>12</b> Salaries, other compensation, and employee benefits . . . . . <b>12</b> <b>0</b>
	<b>13</b> Professional fees and other payments to independent contractors . . . . . <b>13</b> <b>0</b>
	<b>14</b> Occupancy, rent, utilities, and maintenance . . . . . <b>14</b> <b>142</b>
	<b>15</b> Printing, publications, postage, and shipping . . . . . <b>15</b> <b>1,262</b>
	<b>16</b> Other expenses (describe in Schedule O) . . . . . <b>16</b> <b>13,748</b>
<b>17</b> <b>Total expenses.</b> Add lines 10 through 16 . . . . . ▶ <b>17</b> <b>47,105</b>	
<b>Net Assets</b>	<b>18</b> Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . . <b>18</b> <b>17,278</b>
	<b>19</b> Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . . . . <b>19</b> <b>18,050</b>
	<b>20</b> Other changes in net assets or fund balances (explain in Schedule O) . . . . . <b>20</b> <b>-1</b>
	<b>21</b> Net assets or fund balances at end of year. Combine lines 18 through 20 . . . . . ▶ <b>21</b> <b>35,327</b>

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 106421

Form **990-EZ** (2018)



**Part V Other Information** (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V ☒

	Yes	No
<b>33</b> Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O . . . . .	<b>33</b>	<input checked="" type="checkbox"/>
<b>34</b> Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions . . . . .	<b>34</b>	<input checked="" type="checkbox"/>
<b>35a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? . . . . .	<b>35a</b>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O . . . . .	<b>35b</b>	
<b>c</b> Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III . . . . .	<b>35c</b>	<input checked="" type="checkbox"/>
<b>36</b> Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . .	<b>36</b>	<input checked="" type="checkbox"/>
<b>37a</b> Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ <b>37a</b> 0		
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year? . . . . .	<b>37b</b>	<input checked="" type="checkbox"/>
<b>38a</b> Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? . . . . .	<b>38a</b>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . .	<b>38b</b> 0	
<b>39</b> Section 501(c)(7) organizations. Enter:		
<b>a</b> Initiation fees and capital contributions included on line 9 . . . . .	<b>39a</b> 0	
<b>b</b> Gross receipts, included on line 9, for public use of club facilities . . . . .	<b>39b</b> 0	
<b>40a</b> Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0		
<b>b</b> Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I . . . . .	<b>40b</b>	<input checked="" type="checkbox"/>
<b>c</b> Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ▶ 0		
<b>d</b> Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶ 0		
<b>e</b> All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T . . . . .	<b>40e</b>	<input checked="" type="checkbox"/>
<b>41</b> List the states with which a copy of this return is filed ▶ Florida		
<b>42a</b> The organization's books are in care of ▶ John Mountcastle Telephone no. ▶ (904) 687-5668 Located at ▶ 16 Marshview Drive, St. Augustine, FL ZIP + 4 ▶ 32080-9182		
<b>b</b> At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	<b>42b</b>	<input checked="" type="checkbox"/>
<b>c</b> At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country ▶	<b>42c</b>	<input checked="" type="checkbox"/>
<b>43</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ▶ <b>43</b>		<input type="checkbox"/>
<b>44a</b> Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	<b>44a</b>	<input checked="" type="checkbox"/>
<b>b</b> Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	<b>44b</b>	<input checked="" type="checkbox"/>
<b>c</b> Did the organization receive any payments for indoor tanning services during the year? . . . . .	<b>44c</b>	<input checked="" type="checkbox"/>
<b>d</b> If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . .	<b>44d</b>	
<b>45a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .	<b>45a</b>	<input checked="" type="checkbox"/>
<b>b</b> 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions . . . . .	<b>45b</b>	<input checked="" type="checkbox"/>

	Yes	No
<b>46</b> Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I . . . . .	<b>46</b>	<input checked="" type="checkbox"/>

**Part VI Section 501(c)(3) Organizations Only**

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI ☐

	Yes	No
<b>47</b> Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II . . . . .	<b>47</b>	<input checked="" type="checkbox"/>
<b>48</b> Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	<b>48</b>	<input checked="" type="checkbox"/>
<b>49a</b> Did the organization make any transfers to an exempt non-charitable related organization? . . . . .	<b>49a</b>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes," was the related organization a section 527 organization? . . . . .	<b>49b</b>	<input type="checkbox"/>

**50** Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
None				

**f** Total number of other employees paid over \$100,000 . . . . . **0**

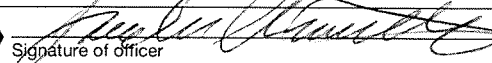
**51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
None		

**d** Total number of other independent contractors each receiving over \$100,000 . . . . . **0**

**52** Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A . . . . . ☒ **Yes** ☐ **No**

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.

<b>Sign Here</b>	Signature of officer 	Date <b>3/22/19</b>
	John Mountcastle, Treasurer Type or print name and title	

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> 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**

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

► **Attach to Form 990 or Form 990-EZ.**

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

OMB No. 1545-0047

**2018**

**Open to Public  
Inspection**

Name of the organization

Veterans' Council of St. Johns County, Inc.

Employer identification number

27-1971825

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

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

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

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

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .	7,340	44,538	35,494	28,812	62,764	178,948
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .	0	0	0	0	0	0
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .	500	250	250	250	250	1,500
<b>4 Total.</b> Add lines 1 through 3 . . . . .	7,840	44,788	35,744	29,062	63,014	180,448
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . .						76,328
<b>6 Public support.</b> Subtract line 5 from line 4 . . . . .						104,120

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>7</b> Amounts from line 4 . . . . .	7,840	44,788	35,744	29,062	63,014	180,448
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . .	0	0	0	0	0	0
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .	0	500	500	800	200	2,000
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .	254	170	226	215	277	1,142
<b>11 Total support.</b> Add lines 7 through 10 . . . . .						183,590
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .				12		0
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . <input type="checkbox"/>						

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

<b>14</b> Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) . . . . .	<b>14</b>	56.7 %
<b>15</b> Public support percentage from 2017 Schedule A, Part II, line 14 . . . . .	<b>15</b>	79.3 %
<b>16a 33<sup>1</sup>/<sub>3</sub>% support test—2018.</b> If the organization did not check the box on line 13, and line 14 is 33 <sup>1</sup> / <sub>3</sub> % or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . <input checked="" type="checkbox"/>		
<b>b 33<sup>1</sup>/<sub>3</sub>% support test—2017.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 <sup>1</sup> / <sub>3</sub> % or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
<b>17a 10%-facts-and-circumstances test—2018.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
<b>b 10%-facts-and-circumstances test—2017.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . <input type="checkbox"/>		

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.  
If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . . .						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . .						
<b>6 Total.</b> Add lines 1 through 5 . . . .						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . .						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year . . . .						
<b>c</b> Add lines 7a and 7b . . . .						
<b>8 Public support.</b> (Subtract line 7c from line 6.) . . . .						

**Section B. Total Support**

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

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

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

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

<b>17</b> Investment income percentage for <b>2018</b> (line 10c, column (f), divided by line 13, column (f)) . . . .	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2017</b> Schedule A, Part III, line 17 . . . .	<b>18</b>	%
<b>19a 33<sup>1</sup>/<sub>3</sub>% support tests—2018.</b> If the organization did not check the box on line 14, and line 15 is more than 33 <sup>1</sup> / <sub>3</sub> %, and line 17 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . <input type="checkbox"/>		
<b>b 33<sup>1</sup>/<sub>3</sub>% support tests—2017.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 <sup>1</sup> / <sub>3</sub> %, and line 18 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . <input type="checkbox"/>		
<b>20 Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . <input type="checkbox"/>		

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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



**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
<b>b</b> A family member of a person described in (a) above?		
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b> .		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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 <b>Part VI</b> 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.		
<b>2</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

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

	Yes	No
<b>1</b> 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?		
<b>2</b> 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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
<b>3</b> 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 <b>Part VI</b> the role the organization's supported organizations played in this regard.		

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

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions).		
<b>2</b> Activities Test. Answer (a) and (b) below.		
<b>a</b> 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 <b>Part VI</b> identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
<b>b</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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.		
<b>a</b> 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 <b>Part VI</b> .		
<b>b</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 <b>Part VI</b> the role played by the organization in this regard.		

**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.

<b>Section A—Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Net short-term capital gain	<b>1</b>		
<b>2</b> Recoveries of prior-year distributions	<b>2</b>		
<b>3</b> Other gross income (see instructions)	<b>3</b>		
<b>4</b> Add lines 1 through 3.	<b>4</b>		
<b>5</b> Depreciation and depletion	<b>5</b>		
<b>6</b> 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)	<b>6</b>		
<b>7</b> Other expenses (see instructions)	<b>7</b>		
<b>8 Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	<b>8</b>		
<b>Section B—Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
<b>a</b> Average monthly value of securities	<b>1a</b>		
<b>b</b> Average monthly cash balances	<b>1b</b>		
<b>c</b> Fair market value of other non-exempt-use assets	<b>1c</b>		
<b>d Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>		
<b>e Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
<b>2</b> Acquisition indebtedness applicable to non-exempt-use assets	<b>2</b>		
<b>3</b> Subtract line 2 from line 1d.	<b>3</b>		
<b>4</b> Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	<b>4</b>		
<b>5</b> Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>		
<b>6</b> Multiply line 5 by .035.	<b>6</b>		
<b>7</b> Recoveries of prior-year distributions	<b>7</b>		
<b>8 Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>		
<b>Section C—Distributable Amount</b>			Current Year
<b>1</b> Adjusted net income for prior year (from Section A, line 8, Column A)	<b>1</b>		
<b>2</b> Enter 85% of line 1.	<b>2</b>		
<b>3</b> Minimum asset amount for prior year (from Section B, line 8, Column A)	<b>3</b>		
<b>4</b> Enter greater of line 2 or line 3.	<b>4</b>		
<b>5</b> Income tax imposed in prior year	<b>5</b>		
<b>6 Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	<b>6</b>		
<b>7</b> <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).			

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

Section D—Distributions		Current Year	
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes		
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity		
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations		
<b>4</b>	Amounts paid to acquire exempt-use assets		
<b>5</b>	Qualified set-aside amounts (prior IRS approval required)		
<b>6</b>	Other distributions (describe in <b>Part VI</b> ). See instructions.		
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.		
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.		
<b>9</b>	Distributable amount for 2018 from Section C, line 6		
<b>10</b>	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
<b>1</b> Distributable amount for 2018 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in <b>Part VI</b> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2018			
<b>a</b> From 2013 . . . . .			
<b>b</b> From 2014 . . . . .			
<b>c</b> From 2015 . . . . .			
<b>d</b> From 2016 . . . . .			
<b>e</b> From 2017 . . . . .			
<b>f</b> <b>Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2018 distributable amount			
<b>i</b> Carryover from 2013 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b> Distributions for 2018 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2018 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from 4.			
<b>5</b> Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>6</b> Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>7</b> <b>Excess distributions carryover to 2019.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2014 . . . . .			
<b>b</b> Excess from 2015 . . . . .			
<b>c</b> Excess from 2016 . . . . .			
<b>d</b> Excess from 2017 . . . . .			
<b>e</b> Excess from 2018 . . . . .			

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

Please see Schedule O for details.

<b>SCHEDULE O</b> (Form 990 or 990-EZ)  Department of the Treasury Internal Revenue Service	<b>Supplemental Information to Form 990 or 990-EZ</b>  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. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a> .	OMB No. 1545-0047 <div style="background-color: black; color: white; padding: 5px; text-align: center;"> <b>2018</b>  <b>Open to Public</b>  <b>Inspection</b> </div> Employer Identification Number <b>27-1971825</b>
Name of the Organization <b>The Veterans' Council of St. Johns County, Inc.</b>		

Form 990-EZ Part I Line 1	Some contributions were restricted to specific purposes. Funds received by purpose: <table style="width: 100%; border-collapse: collapse;"> <tr><td>2017 Veterans' Day Parade</td><td style="text-align: right;">\$910</td></tr> <tr><td>2018 Veterans' Stand Down</td><td style="text-align: right;">3,600</td></tr> <tr><td>2018 Veterans' Day Observances</td><td style="text-align: right;">4,470</td></tr> <tr><td>Disabled American Veterans Chapter 6 VA Van fund</td><td style="text-align: right;">5,000</td></tr> <tr><td>St. Augustine National Cemetery</td><td style="text-align: right;">5,000</td></tr> <tr><td>Vets 4 Vets of St. Augustine</td><td style="text-align: right;">5,000</td></tr> <tr><td>Wreaths Across America</td><td style="text-align: right;">5,300</td></tr> <tr><td>Veterans' Treatment Court</td><td style="text-align: right;">11,460</td></tr> <tr><td>Fund for Vets 4 Vets of St. Augustine, DAV 6 or Wreaths Across America, as future needs dictate</td><td style="text-align: right;">15,000</td></tr> <tr><td style="text-align: right;">Total Temporarily or Permanently Restricted Contributions</td><td style="text-align: right; border-top: 1px solid black;">\$55,740</td></tr> <tr><td style="text-align: right;">Unrestricted contributions</td><td style="text-align: right;">7,024</td></tr> <tr><td style="text-align: right;">Total Contributions</td><td style="text-align: right; border-top: 1px solid black; border-bottom: 3px double black;">\$62,764</td></tr> </table>	2017 Veterans' Day Parade	\$910	2018 Veterans' Stand Down	3,600	2018 Veterans' Day Observances	4,470	Disabled American Veterans Chapter 6 VA Van fund	5,000	St. Augustine National Cemetery	5,000	Vets 4 Vets of St. Augustine	5,000	Wreaths Across America	5,300	Veterans' Treatment Court	11,460	Fund for Vets 4 Vets of St. Augustine, DAV 6 or Wreaths Across America, as future needs dictate	15,000	Total Temporarily or Permanently Restricted Contributions	\$55,740	Unrestricted contributions	7,024	Total Contributions	\$62,764
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Form 990-EZ Part I Line 6b	On March 3, 2018, the Veterans' Council of St. Johns County, Inc. was the sole recipient of the raffle and silent auction at the third Annual Active Boomers and Seniors Expo held at the St. Augustine Outlets. Prizes were donated by various participating merchants and service vendors, at no cost to the Veterans' Council. This event was jointly sponsored by Lifestyle Events Management, the St. Augustine Outlets and the St. Augustine Record.																								
Form 990-EZ Part I Line 8	\$200 in website and newsletter advertising revenues were received during 2018. As this total is below the threshold requiring filing of IRS Form 990-T, that form has not been prepared and Form 990-EZ Part V Line 35 was answered as No.																								
Form 990-EZ Part I Line 10	Cash Grants and Similar Disbursements were made to and/or for the following: <table style="width: 100%; border-collapse: collapse;"> <tr><td>Agent Orange Victims &amp; Widows Support (Quilt of Tears rental for 2018 Veterans' Day Observance)</td><td style="text-align: right;">\$1,200</td></tr> <tr><td>Bringing Home the Wall (Replica of Viet Nam Wall rental) for 2018 Veterans' Day Observance</td><td style="text-align: right;">1,650</td></tr> <tr><td>Grant to Disabled American Veterans Chapter 6 VA Van fund</td><td style="text-align: right;">5,000</td></tr> <tr><td>Disabled American Veterans, 3725 Alexandria Pike, Cold Spring, KY 41076</td><td></td></tr> <tr><td>Grant to Vets 4 Vets of St. Augustine</td><td style="text-align: right;">5,000</td></tr> <tr><td>271 Hermosa Court, PO Box 144, St. Augustine, FL 32086</td><td></td></tr> <tr><td>Forward March, Inc. in support of the St. Augustine Military Ball</td><td style="text-align: right;">2,000</td></tr> <tr><td>Gary Sinise Foundation</td><td style="text-align: right;">500</td></tr> <tr><td>K9's for Warriors</td><td style="text-align: right;">250</td></tr> <tr><td>National POW/MIA Memorial &amp; Museum at Cecil Field</td><td style="text-align: right;">1,730</td></tr> <tr><td>St Augustine High School Choir at Veterans' Day Observances</td><td style="text-align: right;">300</td></tr> <tr><td>St. Johns County Veterans Service Office for Veterans' Stand Down</td><td style="text-align: right;">3,050</td></tr> </table>	Agent Orange Victims & Widows Support (Quilt of Tears rental for 2018 Veterans' Day Observance)	\$1,200	Bringing Home the Wall (Replica of Viet Nam Wall rental) for 2018 Veterans' Day Observance	1,650	Grant to Disabled American Veterans Chapter 6 VA Van fund	5,000	Disabled American Veterans, 3725 Alexandria Pike, Cold Spring, KY 41076		Grant to Vets 4 Vets of St. Augustine	5,000	271 Hermosa Court, PO Box 144, St. Augustine, FL 32086		Forward March, Inc. in support of the St. Augustine Military Ball	2,000	Gary Sinise Foundation	500	K9's for Warriors	250	National POW/MIA Memorial & Museum at Cecil Field	1,730	St Augustine High School Choir at Veterans' Day Observances	300	St. Johns County Veterans Service Office for Veterans' Stand Down	3,050
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<b>SCHEDULE O</b> (Form 990 or 990-EZ)  Department of the Treasury Internal Revenue Service	<b>Supplemental Information to Form 990 or 990-EZ</b>  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. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a> .	OMB No. 1545-0047
		<b>2018</b>
		<b>Open to Public Inspection</b>
Name of the Organization <b>The Veterans' Council of St. Johns County, Inc.</b>		Employer Identification Number <b>27-1971825</b>

Line 10 (Continued)	Veterans Treatment Court Grants to Participants to allow them the ability to devote themselves fully to their prescribed treatment	2,531
	Veterans Victory Garden	150
	Viet Nam Veterans of America Chapter 1084	2,142
	Viet Nam Veterans of America Chapter 1046 (Purchase POW/MIA Flag)	170
	Grant to Wreaths Across America, Inc. PO Box 249, Columbia Falls, ME 04623	5,700
	<b>Total Contributions</b>	<b>\$31,953</b>
Form 990-EZ Part I Line 16	<b>Other Expenses:</b>	
	<b>Program Expenses:</b>	
	American Flags and Flagpoles for St. Augustine National Cemetery	6,835
	Depreciation	41
	Event Advertising	250
	Event Equipment Rental	60
	Event Food	696
	Event Permits and Security	1,438
	Event Printing	256
	Event Sound and Stage	450
	Event Miscellaneous	118
	Trophies, Awards and Plaques	607
	Video Reproduction (Distributed to Schools)	245
	Write-off of uncollectible advances made to VTC Participants	1,859
	<b>G &amp; A Expenses:</b>	
	Bank Charges	1
	Governmental Registrations	136
	Insurance	756
	<b>Total Other Expenses:</b>	<b>13,748</b>
Form 990-EZ Part I Line 20	\$1 Rounding Adjustment	
Form 990-EZ Part II Line 22	Cash balances are as of Dec. 31, and are different from the balanced reported in the periodic monthly Treasurer's Reports filed with the Veterans' Council.	
Form 990-EZ Part II Line 24	In January, 2016, the Veterans' Council was presented with the opportunity to purchase a public address system at a bargain price of \$213.82. The following depreciation was taken: 2016 \$42.76; 2017 \$68.42; 2018 \$41.05.	

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Form 990-EZ Part III Line 28	<p>\$5,700 Grant; \$12,660 Total</p> <p>St. Augustine National Cemetery Programs Improvements and Betterments involved two separate programs, separately described below.</p> <p>\$6,665 Expenses</p> <p>The Veterans' Council used a \$5,000 grant from All American Air Charitable Foundation and additional unrestricted funds to purchase twenty-two (22) anodized telescoping flag poles to be placed along the <b>St. Augustine National Cemetery's</b> walkways during events significant to the history of the only National Cemetery in the Nation's Oldest Continuously-Occupied City, St. Augustine, and for flag covers to properly store these when not displayed.</p> <p>\$5,700 Grant; \$5,995 Expenses</p> <p>As a primary participant contact for <b>Wreaths Across America</b>, collecting funds as agent for, and also organizing volunteers to assist in distribution at the St. Augustine National Cemetery, the Veterans' Council frequently receives funds intended for Wreaths Across America's national public charity (another §501(c)(3) exempt organization). Occasionally, checks are made payable to the Veterans' Council, rather than to Wreaths Across America. Such funds are deposited in the Council's restricted funds account and disbursements are made monthly to transfer these restricted funds to Wreaths Across America. \$5,300 was received during 2018 with \$5,700 disbursed (this fund had a balance of \$150 at the start of 2018; \$250 was a grant from the Veterans' Council's unrestricted funds).</p> <p>\$45 of Council funds were expended for reusable floral stands for the 2018 event and \$250 was expended to advertise and obtain volunteers to assist in the Saturday, Dec. 15, 2018 unpacking a distribution of wreaths before each headstone.</p>
Form 990-EZ Part III Line 29	<p>\$3,150 Grants; \$6,374 Expenses</p> <p>To commemorate Veterans' Day and the <b>100<sup>th</sup> Anniversary of the Armistice</b> ending World War I, in conjunction with the Ancient City Chapter, Military Officers' Association of America, Inc., the Veterans' Council presented a well-attended Veterans' Day Program on the grounds of Anastasia Baptist Church. For this 2018 event, the Veterans' Council rented a traveling replica of the Viet Nam Wall (\$1,650 Grant) and the Agent Orange Quilt of Tears (\$1,200 Grant). The Veterans' Council also gave a grant of \$300 the St. Augustine High School Choir, for their participation in this patriotic event, which featured guest speaker Admiral Sean Buck, Commander, US Naval Forces for the Southern Command.</p> <p>In addition, a 2019 Grant of \$300 to the Military Museum of North Florida reimbursed that exempt organization for the costs of providing authentic military vehicles. Other expenses incurred for this event include:</p> <ul style="list-style-type: none"> <li>• \$450 Technical and Stage Support</li> <li>• \$401 Event Liability Insurance</li> <li>• \$355 General Liability Insurance</li> <li>• \$292 Printing and Publicity</li> <li>• \$288 Plaques and Trophies presented to First Responders honored at the event</li> </ul>

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Form 990-EZ Part III Line 29 (continued)	<p>In early 2018, St. Johns County Sheriff David Shoar reimbursed the Veterans' Council \$910 for security expense imposed by the City of St. Augustine Police Department for the 2017 parade, as reported above in the Supplemental Information for Form 990-EZ Line 10.</p> <p>Also reportable for 2018 were cash disbursements to the City of St. Augustine for late-billed permit fee expenses relating to the 2017 Veterans' Day Parade, in the amount of \$1,438.</p>
Form 990-EZ Part III Line 30	<p>Other Program Services:          \$5,000 Grant, \$5,000 Expense  <b>Disabled American Veterans</b> for St. Augustine's Chapter 6 Van Fund, transferring the balance of the restricted grant from Forward March, Inc. to the intended recipient.</p> <p>The current van, operated by Volunteers from the St. Johns County Council on Aging, with insurance and repairs provided by the U.S. Department of Veterans' Affairs, makes daily trips from St. Augustine to the Veterans' Affairs Hospital Complex in Gainesville.</p>
Form 990-EZ Part III Line 31	<p>1) \$5,000 Grant, \$5,000 Expense  <b>Vets 4 Vets of St. Augustine, Inc.</b>, transferring the balance of the restricted grant from Forward March, Inc. to the intended recipient.</p> <p>2) \$2,531 Grants, \$3,944 Expense          In conjunction with the <b>St. Johns County Courts of Florida's Seventh Judicial District</b> and Chapter 1084, Viet Nam Veterans of America, the Veterans' Council provides Mentors to assist Veterans who opt to be entered into the Veterans' Treatment Court (VTC) program and, where appropriate and approved by the Court, financial assistance to allow those participants to meet their current obligations while undergoing prescribed treatment.</p> <p>Benefits to the community are best measured by the advantages inuring to those Veterans who have encountered the St. Johns County Criminal Justice System and who have chosen the more difficult path offered through the VTC with the goal of having their offense(s) reduced or expunged.</p> <p>Each Participant is paired with an unpaid Mentor, also a Veteran, who meets with the Participant frequently, and who serves as a confidant (Mentors do not share information shared by their Participant with the VTC).</p> <p>Following best practices standards for diversionary courts, the VTC uses a variety of sanctions when Participants fail to comply with program requirements. Since inception, the Court has sanctioned seven participants with writing essays, mostly for alcohol or drug use. Five participants have received a jail sanction, usually 24-48 hours, for repeated alcohol/drug use or other significant violations. The Court carefully considers work and child care responsibilities when scheduling jail sanctions.</p> <p>One of the many conditions for participation is that the Veterans' Treatment Court be able to contact the Participant upon demand. To meet this requirement, the Veterans' Council provides cell phones to those Participants who do not have, and could not afford, cell phones, which also allow them to move forward in their employment and community</p>



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Form 990-EZ Part III Line 31 (Continued)	<p>endeavors. In 2018, the Veterans' Council also provided:</p> <ul style="list-style-type: none"> <li>• program-related transportation of a low-income senior citizen participant.</li> <li>• participant incentives which are an integral part of the VTC program. These incentives include gift cards, for instance for food items and healthy recreational activities. The gift cards are awarded for achievement or given to participants to encourage them in their efforts. The incentives also include dog tags which commemorate phase promotions; and challenge coins awarded at graduation.</li> </ul> <p>As their lives change, of course, so does their impact on the community. Individuals who would very likely commit additional crimes, or continue to lead broken lives, burdening public resources, are set on the path to again becoming contributing members of society.</p> <p>This, the second year of the Veterans' Treatment Court, had several notable events.</p> <p>The first commencement (completion of prescribed program) was held January 18, 2018 when two Participants graduated. Another nine successfully completed their probation later in 2018.</p> <p>The Court staff has provided the following success stories. The Veterans Council has been VTC's true "battle buddy". The Veterans' Council's generous supporters have provided, among other assistance, challenge coins to give our participants and their mentors at graduation, acknowledging their accomplishment. The Veterans' Council, working with our volunteer mentors, have also provided aid directly to VTC Participants, including cell phones for Participants having no or very low income, with which they can communicate with the Court and family while inpatient treatment; and financial assistance to low-income participants, allowing them to enter residential treatment without fear of losing their homes, pets, and vehicles.</p> <p>In 2018, VTC averaged approximately 24 participants with 32 criminal cases. (Some participants had multiple charges.) Fourteen participants entered VTC. Eleven participants were successfully terminated from probation and graduated. Two participants completed their terms of probation but did not graduate due to failure to comply with program requirements. The majority of participants enrolled in VTC in 2018 remain with the program and are expected to graduate in coming years.</p> <p>Ages of participating veterans ranged from 26 to 72, with four veterans 65 or over. Conflict locations included Vietnam, Iraq and Afghanistan. Seven veterans were members of historically disadvantaged minorities. Three were female veterans.</p> <p>Among the participants and graduates were:</p> <ul style="list-style-type: none"> <li>• A disabled combat veteran who had been unemployed for years, had a history of substance abuse, and committed a crime after self-medicating for PTSD. During his time in VTC, this veteran achieved a record of long-term sobriety, gained full-time employment, and explored educational options for different vocational tracks.</li> <li>• A veteran with an extensive felony record who has broken a long pattern of criminal activity and is successfully pursuing a vocational program using his military benefits.</li> </ul>
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Form 990-EZ Part III Line 31 (Continued)	<ul style="list-style-type: none"> <li>• A Vietnam combat veteran with repeated substance abuse related offenses. In VTC, this veteran regained his sobriety and reconnected to the community. He continues to find great satisfaction in the weekly volunteer work he began in the program.</li> </ul> <p>Veteran Council members attend every court; often bringing guests who are members of the military community. This moral support has greatly enhanced our participants' experience; letting them know they, and the court, are supported by the larger community and their fellow veterans.</p> <p>Our veterans report that VTC has given them the sense of solidarity, accountability and direction they had in the military. They have noted that the attention and caring they receive from the VTC team members have been instrumental in their recovery.</p> <p>Continuing into 2019 and future years, the VTC's Mission is to provide Veterans with:</p> <ul style="list-style-type: none"> <li>• A means to effectively address their legal charges.</li> <li>• A team experience and support structure similar to their military experience.</li> <li>• A safe and structured environment in which to pursue their recovery and maintain accountability.</li> <li>• Assistance to Veterans:             <ul style="list-style-type: none"> <li>○ Recover from substance abuse and maintain a sober lifestyle.</li> <li>○ Address mental health issues.</li> <li>○ Utilize their military benefits.</li> <li>○ Achieve educational and employment goals.</li> <li>○ Gain stable housing for those for whom homelessness is an issue.</li> <li>○ Become fully re-integrated into the community.</li> </ul> </li> </ul> <p>3) \$3,050 Grant, \$3,520 Expense</p> <p>In conjunction with the <b>St. Johns County Veterans' Service Office, St. Johns County Legal Services and Elks Lodge 829</b>, the Veterans' Council hosted the annual Veterans' "Stand Down" on September 8, 2018, to benefit homeless Veterans, Veterans in need and other homeless persons in St. Johns County.</p> <p>While Military Surplus may only be distributed to qualified Veterans, much of the clothing is donated by those wishing to assist all the homeless in the county, and, after qualified Veterans have received their share, the remaining clothing is distributed to all who are in need. In addition to the clothing, tents and sleeping bags (military surplus), haircuts and showers were made available, with legal advice from St. Johns County Legal Services and assistance to Veterans in filing claims with the U.S. Department of Veterans' Affairs available.</p> <p>This year twenty-five (25) homeless Honorably-Discharged Veterans and thirty-four (34) other homeless were greeted, received hot meals, haircuts and showers, counseled and given supplies (much-needed clothing, shoes and accessories, bicycles and other sundry supplies) to help make their life easier. Direct meal expenditures were \$469.75 and non-meal expenditures totaled \$3,010.84, with another \$40 in miscellaneous expenses. In</p>
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Form 990-EZ Part III Line 31 (Continued)	<p>addition to these direct expenditures, donations of military surplus (tents, sleeping bags, knapsacks, etc.) were distributed only to those qualifying Veterans, as required by the donating federal agencies, and had an estimated value of approximately ten thousand dollars (\$10,000.00)—however, the cost of the Military Surplus actually distributed is unknown. Military Surplus Donations in excess of distributions were returned to the appropriate agencies.</p> <p>Many support organizations were on hand providing services; in attendance were the Council on Aging, Humana, Housing Resources, employment counseling, the Red Cross, the VA benefits counsel, Legal Aid, and the Wildflower Dental Clinic.</p> <p>Tammy Shirley of the St. Johns County Veterans' Service Office uses this \$3,500 Elks Beacon grant to the Veterans' Council to purchase those items of personal hygiene which have not been donated; she also is the primary "go-getter" seeking out any Military Surplus goods which could benefit our homeless population. Because of the many other organizations assisting, this report could not quantify the value of the cash cards, goods and services provided at this annual event. An additional \$100 was also donated for this event.</p> <p>4) \$2,000 Grant; \$2,000 Expense          To <b>Forward March</b>, sponsoring two tables at the 2019 Military Ball (those attending reimbursed the Veterans' Council, either in 2018 or 2019). Forward March refunded \$250 in 2019 for two tickets which the attendee purchased directly from Forward March.</p> <p>5) \$1,942 Grant; \$1,942 Expense          To <b>Viet Nam Veterans of America</b> Chapter 1084, passing on a restricted donation received on behalf of the Chapter.</p> <p>6) \$1,650 Grant; \$1,730 Expense          To <b>National POW/MIA Memorial &amp; Museum at Cecil Field</b>, to dedicate a pew at their new Chapel of the High Speed Pass</p> <p>7) \$1,072 Expense          In May, 2018, the Veterans' Council requested that the <b>St. Johns County Board of County Commissioners</b> ("BOCC") proclaim the county as a "Purple Heart County" and that the BOCC would seek to designate Interstate 95 in St. Johns County as a "Purple Heart Highway". This request was granted at a ceremony held on Tuesday, May 15, at the County Center. Presentation of POW/MIA flags to the "BOCC", to be flown at the County Administrative Center and the County Health Center; honoring our Purple Heart Veterans with a special presentation in conjunction with the BOCC. The BOCC have agreed to petition the Florida Department of Transportation to designate Interstate 95 in St. Johns County as a "Purple Heart Highway".          Expenses included:          \$399 for plaques awarded to each Commissioner          \$297 for Purple Heart Awards          \$226 for awards reception          \$ 90 for lanyards to allow POW/MIA Flags to be flown below the U.S. Flag          \$ 60 for Purple Heart Pins</p>
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Form 990-EZ Part III Line 31 (Continued)	<p>8) \$910 Grant; \$910 Expense To purchase camo shirts for members of the <b>City of St. Augustine Fire Rescue</b>, to be worn during May and November (months commemorating our U.S. Armed Forces and Veterans).</p> <p>9) \$500 Grant; \$532 Expense The <b>Gary Sinise Foundation</b> for the completion of Tracy Selfcik's bicycle ride from San Diego, CA to St. Augustine, FL; Veterans' Council shirt presented at May 3rd completion of ride</p> <p>10) \$250 Grant; \$250 Expense Grant to <b>The Ride Home</b>, to extend an invitation to a former POW, their family, or the family of a MIA servicemember to attend the 2018 Retreat at Andersonville, GA, where they would receive recognition commensurate with their extraordinary courage and valor. The mission of The Ride Home is to increase the number of participants paying tribute; and to increase public awareness and commitment that we will never forget.</p> <p>11) \$250 Grant; \$250 Expense Grant to <b>K-9s for Warriors</b>, based in St. Johns County, to assist in publicizing their successes.</p> <p>12) \$245 Expenses Reproduction costs for additional DVDs of each the five Videos produced by the Veterans' Council in conjunction with Florida Veterans Programs and Projects; these DVDs were distributed to schools in Putnam County and Duval County, Florida.</p> <p>13) \$200 Grant; \$200 Expense To Chapter 1084, <b>Viet Nam Veterans of America</b>, to provide urgent assistance to residents of the Florida Panhandle who were impacted by Hurricane Michael</p> <p>14) \$150 Grant; \$150 Expense To <b>Veterans' Victory Garden</b>, a startup whose mission is to support a healing veteran community through cultivation &amp; production of organic foods through nursery management practices by offering hands-on experience to our Veterans.</p> <p>Total for above 14 Programs: \$18,433 Grants; \$21,745 Expenses</p>
Form 990-EZ Part IV	The Officers of the Veterans' Council are not compensated for their time or meeting expenses; however, they may, after approval by the other members of the Board, be reimbursed for authorized out-of-pocket expenses (e.g., on-line registration renewals by personal credit card, as the Council has not authorized the use of corporate credit cards). All officers annually certify that they have disclosed any possible conflicts of interest.
Form 990-EZ Part V Line 33	Last year, the Veterans' Council reported "The Veterans' Council, in conjunction with the St. Johns County Sheriff's Office, has registered Vets-4-Cops LLC, a joint venture to assist our local law enforcement professionals and assist their programs as required. This may grow to become a significant effort in future years." Little activity has been noticed, and this joint venture may not come to fruition.

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Form 990-EZ Part V Line 37 & Part VI Line 47	See Schedule C and related Supplemental Information (later in this document) for the "no cost" political lobbying activities of the Veterans' Council. Focus of these efforts is to re-establish a permanent Community-Based Outpatient Clinic (CBOC) in St. Johns County and the support for the newly-franchised (2017) St. Johns County Veterans' Treatment Court (see Programs above).
Form 990-EZ Part VI Line 47	The Veterans' Council has been involved with the establishment of the St. Johns County Veterans' Treatment Court (VTC) as reported in Other Programs (2) above. Please see Schedule O's responses to Schedule C, Part I-A & Part II-B for the history and political efforts involved to establish such a valuable program to benefit both the St. Johns County residents (who save tax money) and the miscreant Veterans who graduate from the VTC Program and return to become productive citizens of our community.
Form 990-EZ Schedule A Pt IIB Line 10	Net proceeds from gaming
Form 990-EZ Schedule C	The Veterans' Council has incurred no financial cost for lobbying on behalf of St. Johns County Veterans.
Form 990-EZ Schedule C Part I-A & Part II-A	<p>The Veterans' Council filed Form 5768 Election/Revocation of Election by an Eligible Section 501(c)(3) Organization To Make Expenditures To Influence Legislation with the IRS for tax year ending December 31, 2011; this election is valid for all subsequent tax years. Since January 1, 2011, the Veterans' Council has reported its' activities, at a \$0 total cost.</p> <p>For ease in reading, next page contains explanation for all lobbying efforts.</p>

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Form 990-EZ Schedule C Part I-A & Part II-A (Continued)	<p><b>U.S. Department of Veterans' Affairs</b></p> <p>The Veterans' Council continued its' efforts (which started in 2015 and continues to this day) to have the U.S. Department of Veterans' Affairs ("VA") permanently relocate its' St. Augustine Community-Based Outpatient Clinic ("CBOC") near or within the St. Johns County Health Services Campus.</p> <p>In 2018, The VA has entered into an agreement in principle to acquire a plot on State Road 207 and develop that plot as a permanent CBOC. Unforeseen delays have been encountered, mostly due to environmental remediation.</p> <p>Quarterly or more frequently, Veterans' Council officers continue to meet with representatives from the temporary St. Augustine CBOC and Gainesville, FL-based VA officials, both to obtain an update and to serve as a reminder that this project will not be forgotten.</p> <p><b>St. Johns County Veterans' Treatment Court</b></p> <p>In 2016, The Veterans' Council formally initiated efforts to create a salaried position within the St. Johns County government to assist in administering a Veterans' Treatment Court (VTC) within the Seventh Judicial District, to specifically address the needs of St. Johns County Veterans' who have been involved with the criminal justice system. The goal is to provide an alternative to incarceration and to allow the Veteran to remain gainfully employed, or to obtain needed mental and/or medical treatments.</p> <p>Members of the Board of the Council, all unpaid volunteers, have appeared before public meetings of the Board of County Commissioners, and to sitting judges in St. Johns County, as well as e-mailing the aforementioned and being interviewed by the local newspaper, the St. Augustine Record. As the concept of the Veterans' Treatment Court coalesced, meetings were held with those having similar positions in Volusia County, Florida, the nearest county with a functioning Veterans' Treatment Court.</p> <p>During 2017, the VTC became operational, providing St. Johns County with the following primary benefits:</p> <ul style="list-style-type: none"> <li>• Reduced costs for incarceration</li> <li>• Diverting 24 Veterans from the criminal court system (in 2018 this number remained consistent, even though eleven left the program because new Participants enrolled).</li> </ul> <p>As the St. Johns County Veterans' Treatment Court has proven successful, it is envisaged that the governmental lobbying efforts will significantly diminish, if not cease.</p> <p><b>St. Johns County Board of County Commissioners</b></p> <p>The Veterans' Council formally requested the Board of Count Commissioners (BOCC) to request that the State of Florida designate that portion of Interstate 95 in St. Johns County as a "Purple Heart Highway" as further described in the notes to Form 990-EZ Line 31 for Program (7) on page 7 of this Schedule.</p>
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