Form	990-EZ	
Form		

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Short Form

OMB No. 1545-0047

2019

Open to Public

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.

Inspection Department of the Treasury ► Go to www.irs.gov/Form990EZ for instructions and the latest information. Internal Revenue Service A For the 2019 calendar year, or tax year beginning , 2019, and ending , 20 C Name of organization B Check if applicable: D Employer identification number Address change The Veterans' Council of St. Johns County, Inc. 27-1971825 Room/suite Name change Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Initial return PO Box 2117 (904) 687-5668 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Amended return Number **>** St. Augustine, FL 32085-2117 Application pending G Accounting Method: Cash Accrual Other (specify) H Check ► if the organization is **not** I Website:► http://veteranscouncilsic.org/ required to attach Schedule B (Form 990, 990-EZ, or 990-PF). **J** Tax-exempt status (check only one) $-\sqrt{3}$ 501(c)(3) 501(c) (527 **K** Form of organization: Corporation Trust Other Association L 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 23,654 Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Part I Check if the organization used Schedule O to respond to any question in this Part I \checkmark 1 Contributions, gifts, grants, and similar amounts received 1 22,471 2 Program service revenue including government fees and contracts 2 0 3 3 0 4 Investment income 4 0 5a Gross amount from sale of assets other than inventory 5a 0 h Less: cost or other basis and sales expenses 5b 0 С Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a) . 5c 0 6 Gaming and fundraising events: Gross income from gaming (attach Schedule G if greater than а Revenue 6a 683 0 of contributions b Gross income from fundraising events (not including \$ from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . 6b 0 Less: direct expenses from gaming and fundraising events . . . 6c С 310 Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract d line 6c) 6d 373 Gross sales of inventory, less returns and allowances 7a 7a 0 7b h 0 Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a) 7c С 0 8 8 500 9 **Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 23,344 10 Grants and similar amounts paid (list in Schedule O) . . 10 9,716 11 Benefits paid to or for members 11 0 12 Salaries, other compensation, and employee benefits 12 0 Expenses 13 Professional fees and other payments to independent contractors 13 18 14 Occupancy, rent, utilities, and maintenance 14 826 15 Printing, publications, postage, and shipping 15 958 16 16 10,319 17 17 21,837 Excess or (deficit) for the year (subtract line 17 from line 9) 18 18 1,506 Net Assets Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 end-of-year figure reported on prior year's return) 19 35,237 20 20 61 21 Net assets or fund balances at end of year. Combine lines 18 through 20 21 36,894

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 10642I

Form 990-EZ (2019)

Form	990-EZ (2019)					Page 2
Pa	rt II Balance Sheets (see the instructions f	or Part II)				
	Check if the organization used Schedule	O to respond to an	ny question in this I	Part II....		🗸
				(A) Beginning of year		(B) End of year
22	Cash, savings, and investments		[35,265	22	36,864
23	Land and buildings				23	0
24	Other assets (describe in Schedule O)			62	24	37
25	Total assets			35,327	25	36,901
26	Total liabilities (describe in Schedule O)			0	26	7
27	Net assets or fund balances (line 27 of column	()	,		27	36,894
Par	t III Statement of Program Service Accom			<i>'</i>		-
	Check if the organization used Schedule	•			(Bec	Expenses guired for section
Wha	t is the organization's primary exempt purpose?	Be the voice of Veter	ans in and for St. Job	nns County, FL		(c)(3) and 501(c)(4)
as n	cribe the organization's program service accomplis neasured by expenses. In a clear and concise m	anner, describe the			orga othe	anizations; optional for ers.)
pers	ons benefited, and other relevant information for ea	ich program title.				
28	Assistance to the St. Johns County Veterans' Treatm	ent Court and its' Pa	rticipants			
	(Grants \$ 2,384) If this amount	includes foreign gra	ints, check here .	🕨 🗌	28a	7,694
29	Veterans' Day Observances commemorating the 75th	Anniversary of the [D-Day Invasion of Nor	rmandy		
	(Grants \$ 2,800) If this amount		ints, check here .	🕨 🗋	29a	4,883
30	Veterans' Stand Down for St. Johns County's Homele	ess Veterans				
					~~	
	(Grants \$ 2,000) If this amount				30a	2,488
31						
	Other program services (describe in Schedule O)				~	
	(Grants \$ 2,532) If this amount	includes foreign gra	ints, check here	► 🗆	31a	_1
32	(Grants \$ 2,532) If this amount Total program service expenses (add lines 28a t	includes foreign gra hrough 31a)	ints, check here		32	17,597
32	(Grants \$ 2,532)If this amountTotal program service expenses (add lines 28a to 100 to	includes foreign gra hrough 31a) • Employees (list each	nts, check here		32	17,597 ctions for Part IV)
32	(Grants \$ 2,532) If this amount Total program service expenses (add lines 28a t	includes foreign gra hrough 31a) Employees (list each O to respond to ar	nts, check here		32	17,597
32	(Grants \$ 2,532)If this amountTotal program service expenses (add lines 28a to 100 to	includes foreign gra hrough 31a) • Employees (list each	nts, check here		32 nstruc ee (e)	17,597 ctions for Part IV)
32 Par	(Grants \$ 2,532) If this amount Total program service expenses (add lines 28a to 1000) t IV List of Officers, Directors, Trustees, and Key Check if the organization used Schedule (a) Name and title	includes foreign gra hrough 31a) Employees (list each O to respond to ar (b) Average hours per week	n one even if not comp ny question in this I (c) Reportable compensation (Forms W-2/1099-MISC)		32 nstruc ee (e)	17,597 ctions for Part IV)
32 Par	(Grants \$ 2,532) If this amount Total program service expenses (add lines 28a t t IV List of Officers, Directors, Trustees, and Key Check if the organization used Schedule	includes foreign gra hrough 31a) Employees (list each O to respond to ar (b) Average hours per week	n one even if not comp ny question in this I (c) Reportable compensation (Forms W-2/1099-MISC)	Constant of the line of the l	32 nstruc ee (e)	17,597 ctions for Part IV)
32 Par Willi Chai	(Grants \$ 2,532) If this amount Total program service expenses (add lines 28a to 1000 to 10000 to 1000	includes foreign gra hrough 31a)	none even if not comp ny question in this I (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	Constant of the line of the l	32 nstruc ee (e)	17,597 ctions for Part IV)
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32 Par Willi Chai Ray Vice	(Grants \$ 2,532) If this amount Total program service expenses (add lines 28a to t IV List of Officers, Directors, Trustees, and Key Check if the organization used Schedule (a) Name and title am Dudley rman Quinn	includes foreign gra hrough 31a) Employees (list each O to respond to an (b) Average hours per week devoted to position	none even if not comp ny question in this I (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)		32 Instruction . .	17,597 ctions for Part IV) Estimated amount of other compensation 0
32 Par Willi Chai Ray Vice Johr	(Grants \$ 2,532) If this amount Total program service expenses (add lines 28a to tiv List of Officers, Directors, Trustees, and Key Check if the organization used Schedule (a) Name and title am Dudley rman Quinn Chairman	includes foreign gra hrough 31a) Employees (list each O to respond to an (b) Average hours per week devoted to position	none even if not comp ny question in this I (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)		32 Instruction . .	17,597 ctions for Part IV) ✓ Estimated amount of other compensation 0
32 Par Willi Chai Ray Vice Johr Trea	(Grants \$ 2,532) If this amount Total program service expenses (add lines 28a to the service expenses) It is a service expenses (add lines 28a to the service) List of Officers, Directors, Trustees, and Key Check if the organization used Schedule (a) Name and title (a) Name and title (a) Name and title am Dudley rman Quinn Chairman Mountcastle (b) Note to the service	includes foreign gra hrough 31a) Employees (list each O to respond to ar (b) Average hours per week devoted to position 8	none even if not comp ny question in this I (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) 0		32 nstruc ee (e) 0 0	17,597 ctions for Part IV)
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32 Par Willi Chai Ray Vice Johr Trea Mich Secr	(Grants \$ 2,532) If this amount Total program service expenses (add lines 28a to t IV List of Officers, Directors, Trustees, and Key Check if the organization used Schedule (a) Name and title am Dudley rman Quinn Chairman Mountcastle surer aael Rothfeld	includes foreign gra hrough 31a) Employees (list each O to respond to ar (b) Average hours per week devoted to position 8 4	(Forms W-2/1099-MISC) (if not paid, enter -0-) () () () () () () () () () () () () ()	Densated—see the in Part IV (d) Health benefits, contributions to employ benefit plans, and deferred compensation	32 nstruc eee (e) 0 0	17,597 ctions for Part IV) ✓ Estimated amount of other compensation 0 0 0 0 0 0 0 0
32 Par Willi Chai Ray Vice Johr Trea Mich Secr	(Grants \$ 2,532) If this amount Total program service expenses (add lines 28a to t IV List of Officers, Directors, Trustees, and Key Check if the organization used Schedule (a) Name and title am Dudley rman Quinn Chairman Mountcastle surer aael Rothfeld	includes foreign gra hrough 31a) Employees (list each O to respond to ar (b) Average hours per week devoted to position 8 4	(Forms W-2/1099-MISC) (if not paid, enter -0-) () () () () () () () () () () () () ()	Densated—see the in Part IV (d) Health benefits, contributions to employ benefit plans, and deferred compensation	32 nstruc eee (e) 0 0	17,597 ctions for Part IV) ✓ Estimated amount of other compensation 0 0 0 0 0 0 0 0
32 Par Willi Chai Ray Vice Johr Trea Mich Secr	(Grants \$ 2,532) If this amount Total program service expenses (add lines 28a to t IV List of Officers, Directors, Trustees, and Key Check if the organization used Schedule (a) Name and title am Dudley rman Quinn Chairman Mountcastle surer aael Rothfeld	includes foreign gra hrough 31a) Employees (list each O to respond to ar (b) Average hours per week devoted to position 8 4	(Forms W-2/1099-MISC) (if not paid, enter -0-) () () () () () () () () () () () () ()	Densated—see the in Part IV (d) Health benefits, contributions to employ benefit plans, and deferred compensation	32 nstruc eee (e) 0 0	17,597 ctions for Part IV) ✓ Estimated amount of other compensation 0 0 0 0 0 0 0 0

Form 99	90-EZ (2019)		Р	age 3
Part	V Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V.) Check if the organization used Schedule O to respond to any question in this		ν.	\checkmark
33	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	33	Yes	No √
34	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	34		~
35a	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)?	35a		
b c	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O 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	35b 35c		
36	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	36		✓
37a b	Enter amount of political expenditures, direct or indirect, as described in the instructions and the instructions big the organization file Form 1120-POL for this year?	37b		~
38a	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?	38a		~
b 39 a b 40a	If "Yes," complete Schedule L, Part II, and enter the total amount involved 38b Section 501(c)(7) organizations. Enter: 39a Initiation fees and capital contributions included on line 9 39a Gross receipts, included on line 9, for public use of club facilities 39b 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	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	40b	_	√
c d	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			
е	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	40e		√
41	List the states with which a copy of this return is filed Florida			
42a		904-68 32080		
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	42b	Yes	
	Financial Accounts (FBAR). At any time during the calendar year, did the organization maintain an office outside the United States?	42c		/
	If "Yes," enter the name of the foreign country	420		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year	•••		
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	Yes	No √
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	44b		√
c d	Did the organization receive any payments for indoor tanning services during the year?	44c 44d		✓
45a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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	45a 45b		√
				V

orm 990-E2	2 (2010)					-
46 Dia to	d the organization engage, directly or i candidates for public office? If "Yes,"	ndirectly, in political c complete Schedule C	campaign activities on	behalf of or	in opposit	ion Yes No ∙ 46 ✓
Part VI	Section 501(c)(3) Organization	s Only				
	All section 501(c)(3) organization	ns must answer que	estions 47-49b and	52, and cor	mplete the	e tables for lines
	50 and 51.					_
	Check if the organization used Sc	hedule O to respond	d to any question in t	his Part VI	•••	<u></u>
	d the organization engage in lobbying ar? If "Yes," complete Schedule C, Pa		section 501(h) electio		÷	
•	the organization a school as described i				• • •	· 47 🗸
	d the organization make any transfers				• • •	
	'Yes," was the related organization a s					
50 Co	omplete this table for the organization's apployees) who each received more that	s five highest compen	sated employees (oth	er than offic	ers, directo	ors, trustees, and k
	(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 contributions t benefit plans, a compen	benefits, to employee and deferred	(e) Estimated amount of other compensation
one				· · · · · · · · · · · · · · · · · · ·		
		-				
	tal number of other employees paid ov					
51 Co	omplete this table for the organization 00,000 of compensation from the org	i's five highest comp anization. If there is no	ensated independent one, enter "None."			
51 Cc \$1	omplete this table for the organization 00,000 of compensation from the org (a) Name and business address of each indepen	's five highest comp anization. If there is no dent contractor	ensated independent			n received more th Compensation
51 Cc \$1	omplete this table for the organization 00,000 of compensation from the org	's five highest comp anization. If there is no dent contractor	ensated independent one, enter "None."			
51 Cc \$1	omplete this table for the organization 00,000 of compensation from the org (a) Name and business address of each indepen	's five highest comp anization. If there is no dent contractor	ensated independent one, enter "None."			
51 Cc \$1	omplete this table for the organization 00,000 of compensation from the org (a) Name and business address of each indepen	's five highest comp anization. If there is no dent contractor	ensated independent one, enter "None."			
51 Cc \$1	omplete this table for the organization 00,000 of compensation from the org (a) Name and business address of each indepen	's five highest comp anization. If there is no dent contractor	ensated independent one, enter "None."			
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51 Cc \$1	omplete this table for the organization 00,000 of compensation from the org (a) Name and business address of each indepen	's five highest comp anization. If there is no dent contractor	ensated independent one, enter "None."			
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SCHEDULE A	
(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 2019

Open to Public

Inspection

Name	of th	ne organization					Employer identification	number
The V	eter	rans' Council of St. Johns Count	y, Inc.				27-19	71825
Par		Reason for Public Cha		organizations must	comple	te this p	art.) See instructio	ns.
The c	orga	nization is not a private founda	tion because it is	s: (For lines 1 through	12, chec	k only or	ne box.)	
1		A church, convention of church	nes, or associatio	on of churches descri	bed in se	ection 17	0(b)(1)(A)(i).	
2		A school described in section	170(b)(1)(A)(ii).	Attach Schedule E (F	orm 990	or 990-E2	Z).)	
3		A hospital or a cooperative hos						
4		A medical research organization						iii). Enter the
		hospital's name, city, and state	•					
5		An organization operated for t section 170(b)(1)(A)(iv). (Com		college or university	owned o	r operate	ed by a government	al unit described in
6 7	\checkmark	A federal, state, or local govern An organization that normally described in section 170(b)(1)	receives a subst	tantial part of its sup				the general public
8		A community trust described in	n section 170(b)	(1)(A)(vi). (Complete I	Part II.)			
9		An agricultural research organi or university or a non-land-gra university:						
10		An organization that normally r receipts from activities related support from gross investment acquired by the organization a	to its exempt fur income and unr	nctions—subject to co related business taxal	ertain exc ble incom	ceptions, ne (less se	and (2) no more that ection 511 tax) from	n 33 ¹ /3% of its
11		An organization organized and	operated exclus	sively to test for public	safety.	See sect i	ion 509(a)(4).	
12		An organization organized and	•	•				ry out the purposes
		of one or more publicly suppo						
		Check the box in lines 12a thro						
а		Type I. A supporting organ the supported organization supporting organization. Ye	(s) the power to	regularly appoint or e	lect a ma	jority of t		
b		Type II. A supporting organ control or management of organization(s). You must	the supporting o	rganization vested in	the same			
С		Type III functionally integ its supported organization(ally integrated with,
d		Type III non-functionally i that is not functionally integ requirement (see instruction	grated. The orgai	nization generally mus	st satisfy	a distribu	ution requirement an	
е		Check this box if the organ functionally integrated, or 1						e II, Type III
f	E	nter the number of supported of						
g		rovide the following informatior	-					
		Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the o listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
(A)								
(B)								
(C)								
(D)								

(E) Total Part IISupport 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.)

Secti	on A. Public Support				•		
Calen	dar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	44,538	35,494	28,812	62,764	17,471	189,079
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	250	250	250	250	250	1,250
4	Total. Add lines 1 through 3	44,788	35,744	29,062	63,014		190,329
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						70,348 119,981
	on B. Total Support						117,701
	dar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	44,788	35,744	29,062	63,014	17,721	190,329
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	0	0	0	0	0	0
9	Net income from unrelated business			-			
	activities, whether or not the business is regularly carried on	500	500	800	200	500	2,500
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	170	226	215	277	373	1,261
11	Total support. Add lines 7 through 10						194,090
12	Gross receipts from related activities, etc	•	,			12	0
13	First five years. If the Form 990 is for the organization, check this box and stop he	re				ear as a section	
	on C. Computation of Public Suppor			4 4 (0)			
14 15	Public support percentage for 2019 (line 6		•			14	61.8 %
15 16a	Public support percentage from 2018 Sch 33 ¹ / ₃ % support test-2019. If the organi					15 ¹ /3% or more	<u>56.7</u> %
IVa	box and stop here. The organization qua						
b	331/3% support test-2018. If the organi	zation did not	check a box o	n line 13 or 16	a, and line 15	is 33 ¹ /3% or m	ore, check
17a	 this box and stop here. The organization qualifies as a publicly supported organization						
b	10%-facts-and-circumstances test — 26 15 is 10% or more, and if the organization resupported organization	ation meets the meets the	e "facts-and-c s-and-circums	circumstances" stances" test.	test, check The organizati	this box and s on qualifies as	a publicly
18	Private foundation. If the organization di instructions	d not check a l	oox on line 13,	16a, 16b, 17a	, or 17b, chec	k this box and	see
					Sch	edule A (Form 990) or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019

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.)

Secti	on A. Public Support			-			
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
•	unrelated trade or business under section 513						
4	Tax revenues levied for the						
-	organization's benefit and either paid to						
	or expended on its behalf						
-							
5	The value of services or facilities furnished by a governmental unit to the						
	organization without charge						
•							
6 70	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disgualified persons .						
	· · ·						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
	on B. Total Support						
	dar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the	•	n's first, secon	d, third, fourth	n, or fifth tax ye	ear as a sec	tion 501(c)(3)
	organization, check this box and stop her						> 🗌
Secti	on C. Computation of Public Suppor	t Percentag	e				
15	Public support percentage for 2019 (line 8	3, column (f), c	livided by line	13, column (f))		15	%
16	Public support percentage from 2018 Sch	nedule A, Part	III, line 15 .			16	%
Secti	on D. Computation of Investment Inc						
17	Investment income percentage for 2019 (I	ine 10c, colur	nn (f), divided b	oy line 13, colu	ımn (f))	17	%
18	Investment income percentage from 2018			-		18	%
19a	331/3% support tests-2019. If the organi					ore than 331	
	17 is not more than 33 ¹ / ₃ %, check this box a						
b	331/3% support tests-2018. If the organiz	-	-	-		-	
	line 18 is not more than 331/3%, check this k						
20	Private foundation. If the organization die	-	-	-			
			20/ 01 110 14	, 100, 01 100,			

Schedule A (Form 990 or 990-EZ) 2019

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

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

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b 5c

6

7

8

9a

9b

9c

10a

Page 5

				age
Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
с	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
ecti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
	с. у	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
ecti	on C. Type II Supporting Organizations		1	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
-	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			

the supported organization(s). Section D. All Type III Supporting Organizations

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

or management of the supporting organization was vested in the same persons that controlled or managed

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete line 3 below.*
- c
 The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).
- 2 Activities Test. *Answer (a) and (b) below.*
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. *Answer (a) and (b) below.*
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

2a

2b

3a

3b

Yes No

1

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

Page	6
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1	\Box Check here if the organization satisfied the Integral Part Test as a qualifying tru	st on Nov. 20, 1970 (explain in Part VI). See				
	instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.					

Section A-Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C-Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

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

Schedule A (Form 990 or 990-EZ) 2019

	le A (Form 990 or 990-EZ) 2019			Page 7
Part	V Type III Non-Functionally Integrated 509(a)(3	Supporting Organi	zations (continued)	
Sect	ion D—Distributions			Current Year
1	Amounts paid to supported organizations to accomplish e			
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	orted	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	h the organization is res	ponsive	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
c	From 2016			
d	From 2017			
e	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from			
	Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2015			
b	Excess from 2016			
С	Excess from 2017			
d	Excess from 2018			
е	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

Page **8**

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.

Political Campaign and Lobbying Activities

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

Department of the Treasury Internal Revenue Service Complete if the organization is described below.
 Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

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

Name of organization			dentifica	tion number	
The Ve	eterans' Council of St. Johns County, Inc.		27-19	971825	
Part	I-A Complete if the organization is exempt under section 501(c) or is a s	ection 52	7 orga	nization.	
1	Provide a description of the organization's direct and indirect political campaign act definition of "political campaign activities")				
2	Political campaign activity expenditures (see instructions)	>	\$		0
3	Volunteer hours for political campaign activities (see instructions)			100	
Part	I-B Complete if the organization is exempt under section 501(c)(3).				
1	Enter the amount of any excise tax incurred by the organization under section 4955 .	🕨	\$		0
2	Enter the amount of any excise tax incurred by organization managers under section 495				0
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?			Yes	No
4a	Was a correction made?			Yes	No
b	If "Yes," describe in Part IV.				
Part	I-C Complete if the organization is exempt under section 501(c), except	section 5	01(c)(3).	
1	Enter the amount directly expended by the filing organization for section 527 exemp activities		\$		
2	Enter the amount of the filing organization's funds contributed to other organizations f 527 exempt function activities		.		
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1 line 17b		\$		
4	Did the filing organization file Form 1120-POL for this year?			Yes	No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 p				he filing

organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

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

Schedule C (Form 990 or 990-EZ) 2019



Inspection

Pa	rt II-A	Complete if the organization section 501(h)).	is exempt under section 501(c)(3) and filed	d Form 5768 (elec	ction under			
A B	Check ► Check ►	 heck ► ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures). heck ► ☐ if the filing organization checked box A and "limited control" provisions apply. 						
<u> </u>		Limits on Lobby	ving Expenditures ans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals			
1	b Total I	obbying expenditures to influence a	bublic opinion (grassroots lobbying) . . . a legislative body (direct lobbying) . . . and 1b) . . .	0				
	d Othere Total e	d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d)						
		mount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	0				
	Over \$5 Over \$1	er \$500,000 500,000 but not over \$1,000,000 ,000,000 but not over \$1,500,000	20% of the amount on line 1e. \$100,000 plus 15% of the excess over \$500,000. \$175,000 plus 10% of the excess over \$1,000,000.					
		Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000. Over \$17,000,000 \$1,000,000.						
	-	oots nontaxable amount (enter 259		0				
		act line 1g from line 1a. If zero or les		0				
		ict line 1f from line 1c. If zero or les		[0]				
	-	ng section 4911 tax for this year?	on either line 1h or line 1i, did the organization		Yes No			

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year beginning in)		(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total	
2a	Lobbying nontaxable amount	0	0	0	0	0	
b	Lobbying ceiling amount (150% of line 2a, column (e))					0	
С	Total lobbying expenditures	0	0	0	0	0	
d	Grassroots nontaxable amount	0	0	0	0	0	
е	Grassroots ceiling amount (150% of line 2d, column (e))					0	
f	Grassroots lobbying expenditures	0	0	0	0	0	

Schedule C (Form 990 or 990-EZ) 2019

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed		(a)		(b)		
	iption of the lobbying activity.	Yes	No	Ar	nount	
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
i	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
с	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6).)(5), c	or se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		•	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the	prior	year?	3		
Part	III-B Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OI answered "Yes."				ine 3	, is

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

Part IV Supplemental Information

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

Please see Schedule O for responses to Part II-A.

Part IV Supplemental Information (continued)

Name of the Organization

OMB No. 1545-0047 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.

►Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2019 **Open to Public** Inspection Employer Identification Nu

27-1971825

Form 990-EZ	Some contributions were restricted to specific purposes. Funds received by purpos	e:
Part I	2019 Veterans' Day Events	\$6 <i>,</i> 000
	2019 Veterans' Stand Down	2,600
	Wreaths Across America	60
	Veterans' Treatment Court	6,300
	Veterans' Wishing Well Project on Plaza de la Constitucion	2,500
	Total Temporarily or Permanently Restricted Contributions	\$17,460
	Unrestricted contributions	5,011
	Total Contributions	<u>\$22,471</u>
Form 990-EZ Part I Line 8	\$500 Newsletter and website advertising revenues were received in 2019. As this t below the threshold requiring filing of IRS Form 990-T, that form has not been prep Form 990-EZ Part V Line 35 was answered as No.	
Form 990-EZ	Cash Grants and Similar Disbursements were made to and/or for the following:	
Part I Line 10	Civil Rights Committee of St. Augustine, for plaque at Florida Atlantic Memorial, commemorating service of LtGen Bailey, USMC, a St. Augustine Native	200
	Direct Assistance to families of Veterans in need	1,032
	Direct Cash Assistance to St. Johns County Veterans' Treatment Court participants (\$941 Loan advance made in 2018, to be repaid in 2019 but forgiven before 2018 990-EZ was prepared, was reported on 2018 990-EZ as a grant)	1,284
	Ground-breaking for St. Johns County Community-Based Outpatient Clinic	100
	k9's for Warriors	250
	Northeast Florida Chief Petty Officers' Association, for food assistance to active duty US Coast Guard members during federal shutdown	500
	St. Johns County Veterans' Service Office, for Veterans' Stand Down	2,000
	Veterans' Day Program Events at Anastasia Baptist Church:	0
	Patriot Guard Riders, for VietNam Wall and Global War on Terror Wall	1,600
	• Military Museum of North Florida \$300 for 2018 event, \$500 for 2019 event	800
	St. Augustine High School Choir	300
	A Guiding Light	100
	Viet Nam Veterans of America Chapter 1084 for Toys for Tots	150
	Viet Nam Veterans of America Chapter 1084 for U.S. Department of Veterans' Affairs ground-breaking for St. Johns County Community-Based Outpatient Clinic	200
	Wreaths Across America	100
	Net Total Cash Grants and Similar Disbursements made in 2019	\$8,616
	he Veterans' Council of St. Johns County, Inc.'s 2019 Form 990-F7	Page 1 of 10

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ OMB No. 1545-0047 Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. OMB No. 1545-0047 Linformation about Schedule O (Form 990 or 990-EZ) Pinformation about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Omen to Public

Department of the Treasury Internal Revenue Service Name of the Organization

Employer Identification Number 27-1971825

Form 990-EZ Part I Line 10	Gift Cards provided to the St. Johns County Veterans' Treatment Court Coordinator, for distribution as directed by the Court as incentives and rewards for Participants' compliance with the Veterans' Treatment Court programs.	1,100
Continued	Total Cash Grants, Similar Disbursements and Gift Cards	\$9,716
Form 990-EZ Part I Line 13	Credit Card processing fees, incurred when donations were received by credit card or PayPal, treated as fund-raising expenses.	\$18
Form 990-EZ	Depreciation (see Supplemental Information for Part II Line 24)	\$25
Part I Line 14	Sound System (while not directly applicable to exempt organizations, the Veterans' Council has made a "§1.263(a)-1(f) de minimis safe harbor election")	724
	Surge protector and heavy duty extension cord for speaker system	77
	Total Line 14	\$ 826
Form 990-EZ	Postage	\$65
Part I Line 15	Printing and Copying	782
LINE 13	Supplies	111
	Total Line 15	\$958
Form 990-EZ	Program Expenses:	
Part I Line 16	Advertising and Promotion	495
	American and POW/MIA Flags donated to local government agencies and to the Cecil Field POW/MIA's Chapel of the High Speed Pass	548
	Braille Plaque with U.S. Flag for St. Augustine National Cemetery	500
	Video Production for 2019 Veterans' Day Observances	500
	Video duplication and distribution of past productions	160
	Veterans' Stand Down:	
	 Food and Beverages for Homeless Veterans and Volunteers 	488
	 Goods to supplement donations for Homeless Veterans, purchased through St. Johns County Veterans' Service Officer were reported on Line 10 as a grant of \$2,000 	
	Veterans' Treatment Court:	
	Challenge Coins, Dog Tags and similar incentives for Participants	1,465
	• Mentor Off-Site Training (\$1,683 Lodging, \$1,420 Per Diem, \$215 Mileage)	3,318
	Mentor Uniforms	527

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. ►Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

	Vatarans' Day Events	
Form 990-EZ Part I Line 16	Veterans' Day Events:	200
	Anastasia Baptist Church support staff	300
Continued	Awards	70
	Food and Beverages for Volunteers	132
	 Bringing Home the Wall (Replica of Viet Nam Wall rental), setup and takedown 	1,600
	General and Administrative	0
	Florida Registration Fees	136
	Insurance	401
	Post Office Box Rental	92
	Trophies, Plaques and Recognition Awards	518
	Website design and maintenance	669
		\$11,919
Form 990-EZ Part I Line 20	\$1 Rounding Adjustment \$60 increase in cash when stale uncleared check was voided; vendor did not wish to be reimbursed.	
Form 990-EZ Part II Line 22	Cash balances are as of Dec. 31, and are different from the balanced reported i monthly Treasurer's Reports filed with the Veterans' Council, which report tran the day prior to the public meeting.	•
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; 2019 \$24.63, Future depreciation: 2020 \$24.63; 2021 \$12.32. Eff. 1/1/19, the Veterans' Council adopted a "§1.263(a)-1(f) de minimis safe harbor election")	
Form 990-EZ Part II Line 26		
Form 990-EZ Part III	Program expenses reported in this part are reported on the cash basis, and do the many hours contributed by unpaid volunteers to support the Veterans' Cou programs.	
Form 990-EZ Part III Line 28	Assistance to the St. Johns County Veterans' Treatment Court and its' Participan \$2,384 Grants, \$7,694 Expense In conjunction with the St. Johns County Courts of Florida's Seventh Judicial D Chapter 1084, Viet Nam Veterans of America, the Veterans' Council provides M assist Veterans who opt to be entered into the Veterans' Treatment Court (VTC and, where appropriate and approved by the Court, financial assistance to allow	istrict and lentors to C) program

Name of the Organization

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.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

participants to meet their current obligations while undergoing prescribed treatment. 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. Each Participant is paired with an unpaid Mentor, also a Veteran, who meets with the
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. 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). Mentors are available 24/7 to address any issues.
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 eight 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.
 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 endeavors. In 2019, the Veterans' Council also provided: program-related transportation of a low-income participant. 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.
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.
 As this is the third year of the Veterans' Treatment Court, the cumulative effects of the joint efforts of those involved since the Court became active in the first quarter of 2017 include: 49 Veterans chose to become Participants in the St. Johns County Veterans' Treatment Court, rather than the criminal court system. For the three years the court has been in existence (2017 through 2019), VTC averaged approximately 25 participants. Of the 49, 24 Participants successfully met their obligations and graduated 2 Participants completed their period of probation and were "termed out" (i.e., not graduated) 1 Participant failed to meet the Court's requirements and was returned to the criminal court system.
Five Ave Ave Ave Ave Ave Ave Ave Ave Ave A

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.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the Organization The Veterans' Council of St. Johns County, Inc.

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.
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.
 Among the participants and graduates were: 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. 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. 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.
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.
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.
To enhance the ability of our Mentors to better address the needs of their respective Participants, the Veterans' Council, in conjunction with the State of Florida's Seventh Judicial District , organized a multi-day seminar, held in Melbourne, Florida, with nine local Mentors in attendance.
 Continuing into 2020 and future years, the VTC's Mission is to provide Veterans with: A means to effectively address their legal charges. A team experience and support structure similar to their military experience. A safe and structured environment in which to pursue their recovery and maintain accountability. Assistance to Veterans:

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-E2) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

Name of the Organization

2019 Open to Public Inspection Employer Identification Number

27-1971825

OMB No. 1545-0047

Form 990-EZ Part III Line 28 Continued	 Recover from substance abuse and maintain a sober lifestyle. Address mental health issues. Utilize their military benefits. Achieve educational and employment goals. Gain stable housing for those for whom homelessness is an issue. Become fully re-integrated into the community.
	 The Veterans' Council funded the following expenses: \$ 250 Grant to a Veteran for transportation \$1,034 Grant to a Veteran for needed repairs to his vehicle \$1,100 Grant to Court in supermarket and gas station gift cards, used as incentives \$1,465 Challenge Coins used as incentives \$ 527 for Mentor uniforms \$ 215 for mileage reimbursement for Mentors' attending Melbourne seminar \$1,420 for per diem reimbursement for Mentors' attending Melbourne seminar \$1,683 for lodging for Mentors' attending Melbourne seminar
	Subsequent Events: In 2020, due to COVID-19 Pandemic amelioration efforts, the Court has waived some appearances by Participants, reduced the frequency of dedicated Court Sessions, and encouraged Participants and Mentors to comply with CDC guidelines when meeting. Four Participants graduated in 2020 prior to the filing of this information return. Many mentors, as well as the Veterans' Treatment Court Coordinator, have increased their contacts with Participants during this period of stress.
Form 990-EZ Part III Line 29	2019 Veterans' Day Observances \$2,800 Grant, \$4,883 Expense To commemorate Veterans' Day and the 75 th Anniversary of D-Day, the invasion of Normandy, France which led to the end of World War II, 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 2019 event, the Veterans' Council rented a traveling replica of the Viet Nam Wall (\$1,600 Grant) with a new addition, a Wall commemorating those Soldiers, Sailors, Marines and Airman lost since September 11, 2001. 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 Judge Howard O. McGillin, Jr., Col. USA (ret), who also is the primary judge in the Veterans' Treatment Court. Judge McGillin delivered an outstanding accounting of the D- Day invasion from personal knowledge from his father who served in Patton's Army during the invasion. In additional, 2019 Grants of \$800 (\$300 discussed in 2018 but not paid until 2019) to the Military Museum of North Florida reimbursed that exempt organization for the costs of providing authentic military vehicles. A Guiding Light, Inc. received a \$100 grant for providing patriotic music prior to the event.

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. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No. 1545-0047 2019 Open to Public Inspection Employer Identification Number 27-1971825

Name of the Organization The Veterans' Council of St. Johns County, Inc.

Form 990-EZ	Other expenses incurred for this event include:
Part III	 \$500 for Video Production of this event
Line 29	 \$440 Printing and Publicity
Continued	\$401 Event Liability Insurance
	 \$310 Plaques and Trophies presented (\$240 for 2018 paid in 2019, \$70 for 2019)
	\$300 Technical and Stage Support
	\$132 Food and Beverages for Volunteers
Form 990-EZ	2019 Veterans' Stand Down
Part III	\$2,000 Grant, \$2,488 Expense
Line 30	In conjunction with the St. Johns County Veterans' Service Office, St. Johns County Legal
	Services and Elks Lodge 829, the Veterans' Council hosted the annual Veterans' "Stand
	Down" on September 14, 2019, to benefit homeless Veterans, Veterans in need and other
	homeless persons in St. Johns County.
	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.
	This year twenty-seven (27) homeless Honorably-Discharged Veterans and more than thirty
	(30) 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 \$488. 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.
	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.
	Travis Neidig of the St. Johns County Veterans' Service Office uses this \$2,000 Elks Beacon
	Grant to the Veterans' Council to purchase those items of personal hygiene which have not
	been donated; he 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.
	The Veteran's Council disbursed a grant of \$2,000 to St. Johns County Veterans' Service
	Office, intended for the purchase of goods desired by our county's Homeless Veterans, but
	which were not donated for this event, including:
	New underwear, socks, boots and shoes
	 Insect repellent, personal hygiene sundries, flashlights and batteries

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.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the Organization The Veterans' Council of St. Johns County, Inc.

Form 990-EZ Part III Line 31	 Total \$2,532 Grant, \$2,532 Expense 1) \$1,032 Grant, \$1,032 Expense Direct Assistance to families of Veterans in need, consisting of \$1,000 grant to Vets 4 Vets of St. Augustine, Inc. to compensate that exempt organization for advances made to prevent the widow of a disabled Veteran from losing her home due to non-payment of property tax; \$32 to purchase a household appliance for another disabled Veteran 2) \$500 Grant, \$500 Expense \$500 to Northeast Florida Chief Petty Officers' Association, for food assistance to active duty US Coast Guard members during federal shutdown 3) \$350 Grant, \$350 Expense \$200 to VietNam Veterans of America Chapter 1084 for refreshments provided at the U.S. Department of Veterans' Affairs groundbreaking for the new Leo C. Chase Community Based Outpatient Clinic to be built in St. Augustine \$150 Grant, \$250 Expense \$250 Grant to K-9s for Warriors, to enable that exempt organization to receive additional matching grants \$200 Grant to Civil Rights Committee of St. Augustine, for plaque at Florida Atlantic Memorial, commemorating service of LtGen Bailey, USMC, a St. Augustine Native \$100 Grant, \$100 Expense \$100 Grant, \$100 Expense To A Guiding Light, for patriotic music presented prior to the groundbreaking for the new Leo C. Chase Community Based Outpatient Clinic to be built in St. Augustine \$100 Grant, \$100 Expense To A Guiding Light, for patriotic music presented prior to the groundbreaking for the new Leo C. Chase Community Based Outpatient Clinic to be built in St. Augustine \$100 Grant, \$100 Expense To A Guiding Light, for patriotic music presented prior to the groundbreaking for the new Leo C. Chase Community Based Outpatient Clinic to be built in St. Augustine \$100 Grant, \$100 Expense To A Guiding Light, for patriotic music presented prior to the groundbreaking for the new Leo C. Chase Community Based Outpatient
Form 990-EZ Part IV	Officers of The Veterans' Council of St. Johns County, Inc. are not compensated, but may be reimbursed for pre-authorized out-of-pocket administrative expenses, such as office supplies and postage.
Form 990-EZ Part V Line 37	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, the support for the newly-franchised (2017) St. Johns County Veterans' Treatment Court (see Programs above), and proposed future use of the temporary CBOC when it is no longer in service, perhaps as a shelter for our Homeless Veterans.
Form 990-EZ Part VI Line 47	See Supplemental Information for Schedule C for details of the Veterans' Council's lobbying efforts.

Department of the Treasury Internal Revenue Service Name of the Organization 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 www.irs.gov/form990.

Form 990-EZ Schedule A Part II Line 1	In 2018, Forward March, Inc., an unrelated §501(c)(3) exempt organization, in anticipation of a voluntary dissolution, made restricted donations to the Veterans' Council, totaling \$35,000. In 2019, Forward March, Inc. made an additional restricted donation of \$2,500 to the Veterans' Council. As Forward March, Inc. was not considered a disinterested person and did not make the unsolicited donations because of the Veterans' Council's publicly-supported nature, these donations were not excluded from the amounts reported on this line, for the above years. However, in 2019, the Veterans' Council did receive an unsolicited \$5,000 donation because of the Veteran's Council's support of the St. Johns County Veterans Treatment Court; this donation was restricted for the support of that program, and has been excluded from reporting on this line because the donation meets the definition of an Unusual Grant.
Form 990-EZ Schedule A Part II Line 3	Approximate value of meeting rooms provided by St. Johns County at the County Health Facility
Form 990-EZ Schedule A Part II Line 9	Gross proceeds from advertising revenues on-line and in newsletter
Form 990-EZ Schedule A Part II Line 10	Net Proceeds from Gaming
Form 990-EZ Schedule A Part VI	In 2019, one Unusual Grant, in the amount of \$5,000 was donated in recognition of the Veterans' Council's activities in support of the St. Johns County Veterans' Treatment Court. This donation was restricted for the continued support of that program.
Form 990-EZ Schedule C	The Veterans' Council has incurred no financial cost in lobbying on behalf of St. Johns County Veterans.
Form 990-EZ Schedule C Part 1-A & Part II-A	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.

Department of the Treasury Internal Revenue Service

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 www.irs.gov/form990.

Name of the Organization The Veterans' Council of St. Johns County, Inc.

Section 1.263(a)-1(f) de minimis safe harbor election

Effective January 1, 2019, The Veterans' Council of St. Johns County, Inc. has made an initial de minimis safe harbor election under section 1.263(a)-1(f).

It is the intent of the Veterans' Council to continue for this election to be made annually, until such time as the election is revoked.

While not directly applicable to most transactions made by exempt organizations, this election may be pertinent to the proper determination of Unrelated Business Taxable Income ("UBIT"), and thus has been made in an abundance of caution to ensure that UBIT is not overstated. For convenience, this election has been consistently used in reporting all transactions, not just those possibly pertaining to UBIT.

The Veterans' Council of St. Johns County, Inc. PO Box 2117 St. Augustine, FL 32085-2117