

Short Form Return of Organization Exempt From Income Tax

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Under section 501(c) 527 or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) Sponsoring organizations of donor advised funds organizations that operate one or more hospital facilities and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions) All other organizations with gross receipts less than \$200 000 and total assets less than \$500 000 at the end of the year may use this form The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2012 calendar year or tax year beginning 06-01 2012 and ending 05-31 2013

B Check if applicable

- Address change
Name change
Initial return
Terminated
Amended return
Application pending

C Name of organization: FRIENDS OF THE COCOA BEACH LIBRARY
Number and street (or P O box if mail is not delivered to street address): 550 NORTH BREVARD AVENUE
City or town state or country and ZIP: COCOA BEACH, FL 32931

D Employer identification number: 23 7380568

E Telephone number

F Group Exemption Number

G Accounting Method [X] Cash [] Accrual Other (specify)

H Check [X] if the organization is not required to attach Schedule B (Form 990 990 EZ or 990 PF)

I Website
J Tax-exempt status (check only one) [X] 501(c)(3) [] 501(c)() (insert no) [] 4947(a)(1) or [] 527

K Check [] if the organization is not a section 509(a)(3) supporting organization or section 527 organization and its gross receipts are normally not more than \$50 000 A Form 990 EZ or Form 990 return is not required though Form 990 N (e postcard) may be required (see instructions) But if the organization chooses to file a return be sure to file a complete return

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 (Part II line 25 column (B) below) are \$500 000 or more file Form 990 instead of Form 990 EZ \$ 24 968

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I [X]

Table with 3 main sections: Revenue (lines 1-9), Expenses (lines 10-17), and Net Assets (lines 18-21). Includes sub-rows for detailed items like contributions, gaming, and fundraising events.

Part II Balance Sheets (see the instructions for Part II)

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

	(A) Beginning of year		(B) End of year
22 Cash savings and investments	211 582	22	216 090
23 Land and buildings	0	23	0
24 Other assets (describe in Schedule O)	0	24	0
25 Total assets	211 582	25	216 090
26 Total liabilities (describe in Schedule O)	0	26	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	211 582	27	216 090

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

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

What is the organization's primary exempt purpose? **TO RAISE ADDITIONAL FUNDS FOR LIBRARY**

Describe the organization's program service accomplishments for each of its three largest program services as measured by expenses. In a clear and concise manner describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts optional for others.)

28			
(Grants \$) If this amount includes foreign grants check here <input type="checkbox"/>		28a	
29			
(Grants \$) If this amount includes foreign grants check here <input type="checkbox"/>		29a	
30			
(Grants \$) If this amount includes foreign grants check here <input type="checkbox"/>		30a	
31 Other program services (describe in Schedule O)			
(Grants \$) If this amount includes foreign grants check here <input type="checkbox"/>		31a	
32 Total program service expenses (add lines 28a through 31a)		32	0

Part IV List of Officers, Directors, Trustees, and Key Employees List each one even if not compensated (see the instructions for Part IV)

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

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Form W 2/1099 MISC) (If not paid, enter -0)	(d) Health benefits contributions to employee benefit plans and deferred compensation	(e) Estimated amount of other compensation
JANE BESKOW PRESIDENT	0	0	0	0
DEE LUCAS VP	0	0	0	0
RICHARD BATES SECRETARY	0	0	0	0
WYNN LAMOUREUX TREASURER	0	0	0	0

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
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		X
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)		X
35 a	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)?		X
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		
35 c	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		X
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		X
37 a	Enter amount of political expenditures direct or indirect as described in the instructions	37a	
b	Did the organization file Form 1120 POL for this year?	37b	X
38 a	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	X
b	If Yes complete Schedule L Part II and enter the total amount involved	38b	
39	Section 501(c)(7) organizations Enter	39a	
a	Initiation fees and capital contributions included on line 9	39b	
b	Gross receipts included on line 9 for public use of club facilities		
40 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 section 4912 section 4955		
b	Section 501(c)(3) and 501(c)(4) 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	X
c	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912 4955 and 4958		
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization		
e	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	X
41	List the states with which a copy of this return is filed		
42 a	The organization's books are in care of <u>WYNN LAMOUREUX</u> Telephone no <u></u> Located at <u></u> ZIP + 4 <u></u>		
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 <u></u> See the instructions for exceptions and filing requirements for Form TD F 90 22 1 Report of Foreign Bank and Financial Accounts	42b	X
c	At any time during the calendar year did the organization maintain an office outside of the U S ? If Yes enter the name of the foreign country <u></u>	42c	X
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 <u></u>	43	<input type="checkbox"/>
44 a	Did the organization maintain any donor advised funds during the year? If Yes Form 990 must be completed instead of Form 990 EZ	44a	X
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	X
c	Did the organization receive any payments for indoor tanning services during the year?	44c	X
d	If Yes to line 44c has the organization filed a Form 720 to report these payments? If No provide an explanation in Schedule O	44d	
45 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	X
45 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)	45b	X

46 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

	Yes	No
46		X

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

47 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

	Yes	No
47		X

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If Yes complete Schedule E

48		X
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49a Did the organization make any transfers to an exempt non charitable related organization?

49a		X
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b If Yes was the related organization a section 527 organization?

49b		
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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 paid more than \$100 000	(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

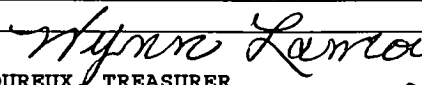
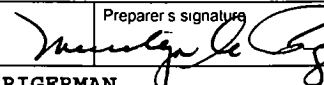
51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100 000 of compensation from the organization If there is none enter None

(a) Name and address of each independent contractor paid more than \$100 000	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100 000

52 Did the organization complete Schedule A? **Note** All section 501(c)(3) organizations other than nonexempt charitable trusts must attach a completed Schedule A

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 this return and all such schedules and statements are true correct and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here	Signature of officer 
	WYNN LAMOUREUX, TREASURER Type or print name and title
Paid Preparer Use Only	Print/Type preparer's name MARILYN RIGERMAN
	Preparer's signature 
	Firm's name MARILYN RIGERMAN
	Firm's address 200 NORTH FIRST STREET Cocoa Beach FL 32931

May the IRS discuss this return with the preparer shown above? See Instructions EEA

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2012

Open to Public Inspection

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 ▶ See separate instructions

Department of the Treasury
Internal Revenue Service

Name of the organization

FRIENDS OF THE COCOA BEACH LIBRARY

Employer identification number

23-7380568

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 11 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)
- 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 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)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**
- 11 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 that describes the type of supporting organization and complete lines 11e through 11h
 - a Type I
 - b Type II
 - c Type III Functionally integrated
 - d Type III Non functionally integrated
- e By checking this box I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I Type II or Type III supporting organization check this box
- g Since August 17 2006 has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls either alone or together with persons described in (ii) and (iii) below the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

Part III 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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants.)	7,457	4,007	6,976	34,617	7,185	60,242
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total Add lines 1 through 3	7,457	4,007	6,976	34,617	7,185	60,242
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						60,242

Section B Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	7,457	4,007	6,976	34,617	7,185	60,242
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2,229	1,694	917	319	259	5,418
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Do not include gain or loss from the sale of capital assets. (Explain in Part IV.))						
11 Total support Add lines 7 through 10						65,660
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	91.75	%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	91.10	%
16a 33 1/3% support test 2012 If the organization did not check the box on line 13 and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. <input checked="" type="checkbox"/>			
b 33 1/3% support test 2011 If the organization did not check a box on line 13 or 16a and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. <input type="checkbox"/>			
17a 10% facts-and-circumstances test 2012 If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more and if the organization meets the facts and circumstances test, check this box and stop here. Explain in Part IV how the organization meets the facts and circumstances test. The organization qualifies as a publicly supported organization. <input type="checkbox"/>			
b 10% facts and circumstances test 2011 If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more and if the organization meets the facts and circumstances test, check this box and stop here. Explain in Part IV how the organization meets the facts and circumstances test. The organization qualifies as a publicly supported organization. <input type="checkbox"/>			
18 Private foundation If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. <input type="checkbox"/>			

Part III Support Schedule for Organizations Described in Section 509(a)(2)
 (Complete only if you checked the box on line 9 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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 bus under sec 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total Add lines 1 through 5						
7a Amounts included on lines 1 2 and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5 000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest dividends payments received on securities loans rents royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9 10c 11 and 12)						

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

Section C Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8 column (f) divided by line 13 column (f))	15	%
16 Public support percentage from 2011 Schedule A Part III line 15	16	%

Section D Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c column (f) divided by line 13 column (f))	17	%
18 Investment income percentage from 2011 Schedule A Part III line 17	18	%

19a 33 1/3% support tests 2012 If the organization did not check the box on line 14 and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3% check this box and stop here The organization qualifies as a publicly supported organization

b 33 1/3% support tests 2011 If the organization did not check a box on line 14 or line 19a and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3% check this box and stop here The organization qualifies as a publicly supported organization

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

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SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2012

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or 990-EZ

Name of the organization

Employer identification number

FRIENDS OF THE COCOA BEACH LIBRARY

23-7380568

01 Description of other revenue (Part I, line 8)

Description	Amount
STATEMENT ATTACHED	24 968

02 Description of other expenses (Part I, line 16)

Description	Amount
SCHEDULE ATTACHED	20 461

Friends of the Cocoa Beach Library Inc
Balance Sheet
June 30 2013

ASSETS

Current Assets

Sun Trust Checking	\$	42 861 36
Sun Trust Money Market		173 228 37

Total Assets	\$	216 089 73
		=====

LIABILITIES AND FUND BALANCES

Fund Balances

Balance Forward	\$	211 581 86
Current Year Earnings		4 507 87

Total Liabilities and Fund Balances	\$	216 089 73
		=====

Friends of the Cocoa Beach Library Inc
Statement of Operation
For Twelve Months Ending June 30 2013

Income

Membership	\$	4 282 00	
Used Books		13 948 50	
Book Bags		427 00	
Donations		2 902 57	
Online Sales		1 064 54	
Book and Author		2 040 00	
Recycling		44 65	
Interest		259 23	\$ 24 968 49

Deduct Expense

Busing	\$	397 17	
Adult and Children Programs		4 858 83	
Books and Films		6 520 01	
Newsletter		3 061 99	
Library Bags		299 71	
Membership		130 00	
Office Expense		119 32	
Hospitality		1 205 48	
Professional Fees		250 00	
Fees and Sales Tax		857 91	
Book and Author		2 760 20	\$ 20 460 62

Current Earnings

\$ 4 507 87
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