

0707

OMB No. 1545-1150

# Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code  
(except black lung benefit trust or private foundation)

▶ Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$100,000 and total assets less than \$250,000 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.

## 2006

### Open to Public Inspection

Form **990-EZ**

Department of the Treasury  
Internal Revenue Service

**A** For the 2006 calendar year, or tax year beginning AUGUST 1, 2006, and ending JULY 31, 2007

- B** Check if applicable:
- Address change
  - Name change
  - Initial return
  - Final return
  - Amended return
  - Application pending

200707 070030000 29 IA  
**FLORIDA SPORTS FISHING ASSOCIATION**  
 INC  
 PO BOX 1216  
 CAPE CANAVERAL FL 32920-1216

I  
R  
S

**D** Employer identification number  
59-1876272

**E** Telephone number  
(321) 984-7160

**F** Group Exemption Number

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

**G** Accounting method:  Cash  Accrual  
Other (specify) ▶

**I** Website: ▶ FSFACLUB.ORG

**H** Check  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

**J** Organization type (check only one)—  501(c) 07 (insert no)  4947(a)(1) or  527

**K** Check  if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$100,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$

### Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 47 of the instructions.)

1	Contributions, gifts, grants, and similar amounts received	1	0
	Program service revenue including government fees and contracts	2	0
	Membership dues and assessments	3	5625
	Investment income	4	
5a	Gross amount from sale of assets other than inventory	5a	
b	Less: cost or other basis and sales expenses	5b	
c	Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule).	5c	
	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>		
a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	47480
b	Less: direct expenses other than fundraising expenses	6b	32923
c	Net income or (loss) from special events and activities (line 6a less line 6b)	6c	14557
7a	Gross sales of inventory, less returns and allowances	7a	15372
b	Less: cost of goods sold	7b	12183
c	Gross profit or (loss) from sales of inventory (line 7a less line 7b)	7c	3189
8	Other revenue (describe ▶ _____)	8	
9	<b>Total revenue</b> (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	9	23371
10	Grants and similar amounts paid (attach schedule)	10	8100
11	Benefits paid to or for members	11	
12	Salaries, other compensation, and employee benefits	12	
13	Professional fees and other payments to independent contractors	13	
14	Occupancy, rent, utilities, and maintenance	14	4978
15	Printing, publications, postage, and shipping	15	40
16	Other expenses (describe ▶ <u>Insurance, office supplies</u> )	16	3105
17	<b>Total expenses</b> (add lines 10 through 16)	17	16223
18	Excess or (deficit) for the year (line 9 less line 17)	18	7148
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	47521
20	Other changes in net assets or fund balances (attach explanation)	20	
21	<b>Net assets or fund balances at end of year</b> (combine lines 18 through 20)	21	54669

### Part II Balance Sheets—If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ.

(See page 51 of the instructions.)

	(A) Beginning of year	(B) End of year		
22	Cash, savings, and investments	22	47521	54669
23	Land and buildings	23	0	0
24	Other assets (describe ▶ _____)	24	0	0
25	<b>Total assets</b>	25	47521	54669
26	<b>Total liabilities</b> (describe ▶ _____)	26	0	0
27	<b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21)	27	47521	54669

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<b>Part III Statement of Program Service Accomplishments</b> (See page 51 of the instructions.)	<b>Expenses</b> (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)
What is the organization's primary exempt purpose? <u>SEE ATTACHED</u>	
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.	
28 <u>SEE ATTACHED</u>	
(Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>28a</b>
29	
(Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>29a</b>
30	
(Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>30a</b>
31 Other program services (attach schedule)	
(Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>31a</b>
<b>32 Total program service expenses</b> (add lines 28a through 31a)	<b>32</b>

<b>Part IV List of Officers, Directors, Trustees, and Key Employees</b> (List each one even if not compensated. See page 52 of the instructions.)				
(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
<u>SEE ATTACHED</u>				

<b>Part V Other Information</b> (Note the statement requirement in General Instruction V.)	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	<input checked="" type="checkbox"/>
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34	<input checked="" type="checkbox"/>
35 If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35a	<input checked="" type="checkbox"/>
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	<input type="checkbox"/>
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement.)	36	<input checked="" type="checkbox"/>
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. <b>37a</b>		
b Did the organization file Form 1120-POL for this year?	37b	<input checked="" type="checkbox"/>
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 unpaid at the start of the period covered by this return?	38a	<input checked="" type="checkbox"/>
b If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved	38b	
39 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a	
b Gross receipts, included on line 9, for public use of club facilities	39b	

**Part V Other Information** (Note the statement requirement in General Instruction V.) (Continued)

- 40a** 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:  
 section 4911 ▶ \_\_\_\_\_ ; section 4912 ▶ \_\_\_\_\_ ; section 4955 ▶ \_\_\_\_\_
- b** 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach an explanation . . .
- c** Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . ▶ \_\_\_\_\_
- d** 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? . . .

	Yes	No
40b		<input checked="" type="checkbox"/>
40c		
40d		
40e		<input checked="" type="checkbox"/>

**41** List the states with which a copy of this return is filed. ▶ NONE

**42a** The books are in care of ▶ ERIC R. GRIGGS Telephone no. ▶ (321) 984-7160  
 Located at ▶ 332 DAYLAND AV, INDIANLAND, FL 32117

- b** At any time during the calendar year, did the organization have over a financial account in a foreign country (such as a bank account)? . . .  
 If "Yes," enter the name of the foreign country: ▶ \_\_\_\_\_  
 See the instructions for exceptions and filing requirements for foreign accounts.
- c** At any time during the calendar year, did the organization maintain a financial account in a foreign country? . . .  
 If "Yes," enter the name of the foreign country: ▶ \_\_\_\_\_

**43** Section 4947(a)(1) nonexempt charitable trusts filing Form 990 and enter the amount of tax-exempt interest received or accrued during the year: ▶ \_\_\_\_\_

Under penalties of perjury, I declare that I have examined this return and belief, it is true, correct, and complete. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has knowledge.

**Please Sign Here**

Signature of officer: *Eric R. Griggs*  
 Type or print name and title: ERIC R. GRIGGS, TRC

**Paid Preparer's Use Only**

Preparer's signature: \_\_\_\_\_  
 self-employed

Firm's name (or yours if self-employed), address, and ZIP + 4: \_\_\_\_\_  
 EIN: \_\_\_\_\_  
 Phone no: \_\_\_\_\_

2006 Form 990-EZ

Part I

Line 10

- a. Cash grant of \$2,500 to Brevard County Schools, 2700 Judge Fran Jamieson Way, Viera, Florida 32940 to aid in Marine Projects by High School students.
- b. Cash Grants of \$2,200 to the Coastal Conservation Association, 6919 Portwest, Suite 100 Houston, Texas 77024
- c. Cash Grant of \$250 to the Pete Harris Benefit Tournament, 1350 South Hickory Street, Melbourne, Florida, 32901.
- d. Cash Grants of \$350 the Big Brothers – Big Sisters Inc., 2450 Minton Road West, Melbourne, Florida 32904, to help children experience fishing.
- e. Cash Grant of \$1,000 to Mote Marine Laboratory, 1600 Ken Thompson Parkway, Sarasota, Florida 34236 for the furtherance of Marine research.
- f. Cash Grant of \$250 to The Leukemia & Lymphoma Society, Donor Services, P. O. Box 4072, Pittsfield, MA 01202, in honor of Brandon Thornton and for use in allowing terminal children the possibility to go fishing.
- g. Cash grant of \$500 to the Hilton Head Reef Foundation, 300 P. O. Box 5542, Hilton Head Island, South Carolina, 29938
- h. Cash grant of \$250 to the Travis Tanner Benefit, c/o Space Coast Credit Union, P. O. Box 419001, Melbourne, Florida, 32901
- i. Cash grant of \$500 to Eliminate Breast Cancer, c/o Lisa Gorichky, 365 W. Osceola Lane, Cocoa Beach, Florida, 32931
- j. Cash Grant \$300 to the International Game Fish Association, 300 Gulf Stream Way, Dania Beach, Florida, 33004

**Part III**

**What is the organization's primary exempt purpose? To promote that continued availability of the local marine environment for use by all residents and to encourage the children of Brevard County to use and appreciate this environment.**

**Lines 28-31**

- a. Cash grant of \$2,500 to Brevard County Schools to aid in Marine Projects by High School students. Grant \$1,800, Expenses, including Grant, \$2,500
- b. Approximately 50 man-days of labor to conduct a Kid's Fishing Day at Port Canaveral for over 600 Brevard County children. Grant \$0. Expenses, including Grant \$1,479.
- c. Approximately 15 man-days of labor to conduct a fishing day at Camp Chance for members of the Brevard Association for Retarded Citizens. . Grant \$0. Expenses, including Grant \$207.
- d. Grant to the International Game Fish Association to further marine conservation. Grant \$300, Expenses, including Grant, \$300.
- e. Grant to the Coastal Conservation Association to further marine conservation. Grant \$2,200, Expenses, including Grant, \$2,200.
- f. Grant to the Mote Marine Laboratory to further the scientific understanding of our Marine Species. Grant \$1,000, Expenses, including Grant, \$1,000
- g. Grant to the Hilton Head Reef Foundation to further the tagging and study of dolphin (fish). Grant \$500, Expenses, including Grant, \$500.

**Part IV**

<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>	<b>E</b>
Dale Badgett, 4800 Ancona Rd., Cocoa, Florida 32927	President 1	0	0	0
Steve Collins, 331 Lake Lenelle Dr, Chuluota, Florida 32766	V. Pres. 1	0	0	0
Eric Griggs, 332 Oakland Ave, Indialantic, Florida 32903	Treasurer 2	0	0	0
David Werner, 3785 Long Leaf Dr, Melbourne, Florida 32940	Secretary 2	0	0	0
Chris Costello, 1530 Riverside Drive, Titusville, Florida 32789	Director 1	0	0	0
Mike Cochran, 3710 Detroit Street, Cocoa, Florida 32926	Director 1	0	0	0
Bill Kosiba, 4390 Skyway Drive, Port Saint John, Florida 32927	Director 1	0	0	0
Rob Hollander, 259 Lakeshore Drive, Merritt Island, Florida 32953	Director 1	0	0	0
Chris Hudson, 1020 Sycamore Drive, Rockledge, Florida 32955	Director 1	0	0	0