

GLS Eviction Mitigation Project 2020

Pinellas CARES Nonprofit Partnership Fund

Gulfcoast Legal Services Inc.

Mx. Chelsea Wait
501 1st Ave N Ste 420
Saint Petersburg, FL 33701-3714

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Application Form

Introduction

Submission of an application is not a guarantee or commitment of funding. This application will be made public, in its entirety, including any attachments or uploads.

To see the rubric by which your organization's application will be scored, [click here](#).

Please answer these questions FIRST, as the application will show you the required sections and fields to complete based on your answers.

Priority Funding Areas*

Please select the priority area(s) most relevant to your request (see the PCF website for examples).

Eviction Mitigation through Legal Aid

Reimbursement*

The Pinellas CARES Nonprofit Partnership Fund allows requests to ask for reimbursement of expenditures related to COVID-19 programming within the Priority Funding Areas that took place between March 1, 2020 and the time of application.

Will your organization be applying for this cost reimbursement?

Yes

Future Programming*

Will your organization be applying for funding for services to be delivered between the grant award decision and December 30, 2020?

Yes

Project Name*

GLS Eviction Mitigation Project 2020

EIN*

59-1882749

DUNS Number

Please provide your organization's DUNS number. This is the Data Universal Numbering System.

You can search for your DUNS number here: <https://www.dnb.com/duns-number/lookup.html>

If you do not have a DUNS number, you can apply for one here (it is free and may take 3-4 days for approval): <https://www.dnb.com/duns-number/get-a-duns.html>

This field is optional as to not stop a qualifying organization from applying. HOWEVER, a DUNS number *will* be required if your organization is approved for a grant. Your organization should apply for a DUNS number now if it does not yet have one.

Mission Statement*

Gulfcoast Legal Services, Inc. (GLS) is a regional 501(c)3 non-profit organization providing free, comprehensive civil legal aid through counsel, advice, representation, advocacy, and education for vulnerable individuals and families in the Greater Tampa Bay area.

Total Operating Expenditure*

What are your total annual operating expenses?

\$3,364,478.00

Amount Requested*

Please review the entire application and its fiscal requirements before determining the total amount your organization will be requesting. This amount should include any reimbursements your organization is seeking for past COVID-19 programming.

Typical funding requests will range between \$25,000 and \$250,000. Amounts above and below are accepted, provided the request can be justified by community need.

Requests at the higher end, or above this range must have a significant and sustained impact on the vulnerable community being served. Your organization's capacity for spending a large amount of funds must also be justified.

\$597,262.00

If you are requesting more than \$250,000 or a large capital expenditure, please speak with PCF program staff to discuss the feasibility of your request **PRIOR TO submission**.

Priority Populations*

Please select the priority populations your programming will serve:

Note: Examples of "high-risk pandemic response jobs" include front-line workers, nurses, medical housekeeping staff, nonprofit employees, law-enforcement and medical first responders.

- Communities of color
- Children and/or the elderly
- People experiencing homelessness
- Residents with language barriers
- Persons with disabilities
- Low-income families

Guiding Principles*

One of the guiding principles of this fund is that it will apply a lens of equity to ensure the needs of specified priority populations are met.

From the priority populations you have indicated above, please explain to what extent one or more these populations are involved in the creation, design, and impact of your organization (or this specific project).

GLS serves only low-income households and those with the greatest economic need. Approximately 99% of our clients earn under 250% of the federal poverty level. While we will serve some seniors who earn more than 250% of the federal poverty level, usually they will be especially vulnerable in another way such as those with disabilities, veterans, grandparents raising grandchildren, those who are members of the LGBTQ community, and those who are at imminent and urgent risk of homelessness.

In the 2019 calendar year, GLS served almost 4000 people and approximately 50% of them were people of color. GLS relies on the feedback of clients and former clients to impact the creation and design of the organization and utilizes a client feedback survey to obtain information about the quality of services and opportunities for improvements. In addition, GLS seeks to mirror our client base by ensuring staff diversity. Currently, 46% of individuals on staff are a minority.

Length of time operating program/project*

Please briefly explain how long you have been operating the program or project for which you are requesting funds. **This funding is for expansion of existing programming or sustaining an existing expansion to meet community needs.**

GLS has been assisting individuals with their civil legal needs since 1978. Our housing program has been in existence since 1979.

Service Area*

In which areas of the county do you physically provide services?

- North County (locations such as Tarpon Springs, Crystal Beach, Palm Harbor)
- Mid-County (locations such as Clearwater, Largo, Safety Harbor)
- South County (locations such as St. Petersburg, Lealman, Kenneth City)

Impact on Organization*

What has been the impact of the coronavirus/COVID-19 on the services of your organization? (Example: inability to provide enough food, unable to provide behavioral health sessions, lack of volunteerism, etc.)

The impact of COVID-19 on our services has been immense. Staff are under great pressure to perform and are taking on greater numbers of cases to meet need. We were unable to use volunteers during the stay at home orders and are now adjusting to using volunteers remotely to assist with caseloads. GLS has seen an increase in requests for family law assistance (divorces, domestic violence), and many calls about the rules and regulations regarding evictions. The eviction moratorium is not yet over, but when it is, we expect to see increased cases in this area as well. Our financial stability unit is in overdrive, trying to keep up with cases regarding unemployment, benefits, scams, etc.

We closed our offices during the stay at home order, but now have limited staff operating out of the offices to be there for senior clients and those experiencing homelessness, who may not be able to utilize online applications or scan and email paperwork.

Our greatest concern is our ability to continue to meet COVID-19 related needs after December 2020, as we expect many in our community to have long-term issues that will last into 2021 or 2022.

In addition, we have had to cancel our fall fundraiser and will most likely have to cancel or postpone our winter/spring fundraiser for 2021.

Fiscal Accountability

Federal Fund Disclosure*

If your organization is awarded this grant, you may be considered a subrecipient of federal funding. THEREFORE, if you are deemed a subrecipient and your organization reaches a threshold of having spent more than \$750,000 in federal funding this fiscal year (this INCLUDES other federally funded programs), it will be subject to requirements of the Federal Single Audit Act. This will require your organization to comply with Federal Compliance Requirements and may necessitate additional expenses for your organization and you should prepare for this.

It is advisable that you contact a certified public accountant (CPA) or other professional for guidance.

Yes, my organization understands and assumes all liabilities/costs in regards to federal funding.

Audited Financial Statements*

Does your organization routinely contract to have an audit conducted of its financial statements?

Yes

Most Recently Filed IRS Form 990*

Please upload a copy of the organization's most recently filed IRS Form 990. **This is absolutely required.**

2018 Gulfcoast Legal Services Inc Form 990-compressed.pdf

Board-Approved Budget*

Please upload your most recently board-approved budget for this fiscal year in PDF format.

2020 budget - FINAL - BOD Approved.pdf

Audited Financial Statements

Most Recent Audited Financial Statements*

If your organization routinely contracts for an independent audit of its financial statements, including audits in accordance with Uniform Guidance and/or Chapter 10.650, Rules of the Auditor General, upload the most recent audit. The document should not be more than a year old.

2019 gulfcoast legal services, inc. 9-30-19 audit.pdf

Management Letter*

Please provide a management letter indicating any findings from your organization's most recent independent audit.

If there is no management letter, please explain why.

Gulfcoast Legal Services 9-30-19 Audit Eng Ltr.pdf

Expansion or Sustaining of Exact Programming Funded by Another Source

Existing Contract

If you are applying for funding to expand and/or sustain COVID-19 response programming that has already been funded by another source, please upload that contract here and provide a brief description of the funding source and relationship with the funder. Please note that any costs funded by another source are not allowed to be included in this application. Only the costs that are required to expand or sustain programs in excess of that funding will be considered for the purposes of this application.

Reimbursement of COVID-19 Related Expenses

Your organization may seek reimbursement for COVID-19 related expenditures between March 1, 2020 and the time of submittal of this application. **This is NOT a replacement for the loss of revenue from canceled fundraising events or a decrease in private/public support. These are costs already incurred and paid from reserves or rainy**

day funds that were used to deliver services within this funding's focus areas, *specifically* in response to the COVID-19 pandemic. These are funds that were NOT budgeted for use in this fiscal year.

Attestation*

I affirm that this funding was expended by my organization solely for program costs in relation to COVID-19, and is not being requested on a unit-of-service basis. None of these costs have been reimbursed by any other funding source.

Yes, I affirm the above is accurate and true.

Amount of Reimbursement Requested*

Please specify the total amount of reimbursement your organization is seeking.

\$2,050.00

Documentation of Expenses*

Please include a summary cover sheet that describes what the expenses are for (salaries, food costs, etc.).

Upload records of expenses indicating the use of unbudgeted funds using some or all of the financial documents:

- Receipts documenting the purchase of unbudgeted items or service
- Credit Card Statements showing payment of items (with MOST account numbers REDACTED)
- Bank Statements showing payment of credit cards (with MOST account numbers REDACTED)
- Financial reports that were presented to a Board of Directors
- Board minutes that show authorization of withdrawal(s) from reserve funds
- Bank statements with redacted account numbers indicating usage of unbudgeted funds

If you have selected more than one Priority Funding Area in the introductory section, please ensure to include information that separates the expenses. If necessary, use the textbox below to indicate any clarifying information regarding uploaded documentation.

PPE Cover Letter and Receipts.pdf

Number Served by Funding Area*

Please *briefly* specify how many people were served by the programming for which you are seeking reimbursement. If you are applying for reimbursement in multiple Funding Areas, *be sure* to provide numbers for each one. Numbers do not need to be unduplicated.

Example

Food: 1250 people

Behavioral Health: 250 people

Legal Services: 825 (number of Pinellas residents assisted between March and August)

Funding and Usage

Client Service Delivery*

Briefly describe the services to be delivered under the programming for which you are requesting funding. Please include when and where the services will occur, how the target population will access the services, and the length of time the services will be provided. **Please specify the zip codes of participants. If not available, specify the zip codes of service delivery points.**

Although the enforcement of evictions has been temporarily halted due to COVID-19, landlords are still filing evictions and unlawful detainers. Renters who do not have stable work, whose hours have been limited, or those who have been laid off will face great challenges in paying rent and may face eviction notices, which impacts credit reports and stays on record for life.

By addressing legal issues related to housing, public benefits, unemployment, etc., GLS will assist clients to stabilize their income, address landlord/tenant issues, and ultimately avoid eviction and homelessness.

Grant funding will be used to coordinate pro bono attorneys in the community to address eviction case overflow, ensuring all cases can be reviewed by a certified attorney. In addition, direct services will be provided in response to the needs identified in the online application and will include advice, legal counseling, assistance with pro se forms, brief service, and/or full representation in court. The Project will assist with legal issues including, but not limited to, the following matters:

- benefit issues
- unemployment issues
- evictions
- foreclosures/mortgage payments
- utility/medical bills
- credit disputes
- collections/repossessions
- financial exploitation
- fraud/scams
- child support
- fees/fines/interest

Services will be provided remotely and physically in the two GLS offices in 33701 and 33714. At least 25 clients will receive direct legal services specifically through this funding. Five pro bono attorneys will also be attained.

In addition, approximately 100 GLS clients will receive fast-tracked funding for rental assistance to resolve their cases as per negotiated settlement agreements (some of which will be negotiated with other funding). GLS will subcontract \$500,000 to our nonprofit partner, the St. Petersburg Free Clinic, to provide this specific service. Clients will also be encouraged to take the financial readiness classes from Regions Bank.

Communication/Outreach and Community Engagement Efforts*

In what ways is your organization marketing and communicating its available programming to the community it serves? How will you ensure that your target population is aware of your services and utilizes them?

GLS relies on our partner agencies within the community to assist us in dispersing information. Through partners such as other nonprofit agencies (such as CASA), libraries, senior centers, and schools, GLS disperses print material such as rack cards, flyers, and paper applications. In recent months, we have increased our communication with local news agencies to expand our reach. We also have done radio spots, such as with WMNF, to reach different areas of our community.

Part of the funds from this grant will go to promoting our work and supporting the Grants Manager who will oversee an awareness campaign to ensure landlords and renters are aware of the program. The awareness campaign will include a large-scale mailing to landlords as well as radio spots for renters.

Hurricane Preparedness*

If a hurricane-related emergency were to strike Pinellas County this year and cause an interruption in your organization's normal programming, how would you return to offering the programming, and continue to spend awarded funds from this grant?

There is an expectation that your programming will be able to continue in the event of a hurricane-related emergency.

If your organization has a COOP (Continuity of Operations Plan), you may upload it here instead of providing a text answer. You may redact sensitive information from your organization's COOP.

Cont of Operations Plan 8-4-2020.pdf
COOP is attached.

Evidence of Insurance Coverage*

Grantees of the Pinellas CARES Nonprofit Partnership Fund will be required to maintain appropriate insurance to cover the services proposed in this application. PCF will determine whether this coverage is appropriate.

Please upload evidence of insurance policies that cover the programming for which your organization is requesting funds.

If there is no insurance coverage for this programming, please provide an explanation as to why.

Certificate- Gen, Crime, Umbrella, Cyber.pdf

The Budget Summary and Budget Narrative sections are absolutely critical to a successful application. Improperly completed forms will be returned to you to fix, and will delay a funding decision being made on your application. Please see the examples in each section. To avoid rejection of your organization's application, PCF HIGHLY recommends you watch this short, instructional video as well: Budget Narrative/Summary Instructions

If you would like to use a unit of service cost as a basis for your budget, you MUST contact Pinellas Community Foundation program staff FIRST to discuss this possibility.

Budget Summary*

Please download the budget summary template [HERE](#) and complete it. **If you have selected multiple Priority Fund Areas, you should include ALL costs in this summary.**

Capital includes buildings, vehicles, equipment at \$3,000 or more per item. The purchase of capital must represent the lower cost option for the period during which the purchased asset would be used for COVID-response activities. Outright purchase must be less than the cost of renting or leasing OR if renting or leasing is not available.

[CLICK HERE TO SEE AN EXAMPLE OF A PROPERLY COMPLETED BUDGET SUMMARY.](#)

Please export as a PDF and upload it.

CARES-Partnership-Fund-Budget-Summary.pdf

Budget Narrative*

Please download the budget narrative template [HERE](#) and complete it.

The budget narrative needs to do more than define the expenses. It should clearly state what is going to be paid using CARES funds and then justify the expenses as a program expansion (or sustaining an already expanded program) as a result of COVID-19. Do not bold, underline, or italicize. Use dollar amounts that match your Budget Summary.

If you have selected multiple Priority Fund Areas, you should include ALL costs in this narrative.

[CLICK HERE TO SEE AN EXAMPLE OF A PROPERLY COMPLETED BUDGET NARRATIVE.](#)

Capital includes buildings, vehicles, equipment at \$3,000 or more per item. The purchase of capital must represent the lower cost option for the period during which the purchased asset would be used for COVID-response activities. Outright purchase must be less than the cost of renting or leasing OR if renting or leasing is not available.

Please export as a PDF and upload it.

CARES-Partnership-Fund-Budget-Narrative.pdf

Capital Requests

If you are requesting funding for capital expenses, please upload bids/estimates/rental agreements to match the expenses described in your budget summary and narrative.

Please upload in PDF format.

Logistical partner organizations (LPOs) are considered to be a critical part of service delivery strategy for this grant program, and using them is highly encouraged. Typical LPOs are:

- Grassroots organizations with small annual operating budgets (under \$50,000)
- Churches and other faith-based organizations
- Neighborhood associations
- Social organizations/collaboratives
- Resident councils in low-income house communities
- Neighborhood family centers
- Senior centers

Their essential role is to serve as outreach, information, referral and service delivery sites for food distribution, legal aid counseling to prevent evictions and behavioral health services, consistent with the three priority need areas in the grant specifications.

Are you going to use LPOs in this programming?*

Yes

Logistical Partner Organizations (LPOs)

LPO List*

Please upload a list with entity names and primary contact information for each LPO. If there is additional information to provide, do so in the text box below.

LPO list.xlsx

Role in Programming*

Please describe the role(s) of specified LPOs in the programming proposed in this application.

Now more than ever, GLS will rely on key partnerships to solicit prospective clients. Information about GLS services are offered at local domestic violence shelters, Goodwill locations, and senior centers. GLS staff often visits these locations to work with clients in-person. In addition, GLS has reached out to early learning providers, foster care agencies, and other organizations that serve children and families to make them aware of our legal aid services. These partnerships have been incredibly beneficial and successful, and have spread to new clients via word of mouth – the best outreach method among hard-to-reach populations.

Our main partner in this programming will be the St. Petersburg Free Clinic, which we will subcontract with to provide our clients with direct rental assistance in addition to legal services.

Our current and prospective funders will also serve as a source of referral, such as the City of Largo, United Way Suncoast, etc. In addition, we are in contact with 211 and supplying them with organization updates to communicate to those in need.

Please note that the courts are also an important partner in this work. Their ability to move through cases will have a large impact on our percentage of eviction actions resolved in the grant reporting measures. An eviction case can take as little as two weeks to work through if the courts are quick, or several months if the courts are moving slower and there are additional case factors.

Eviction Mitigation through Legal Aid

This grant will require weekly reporting on the following measures:

- **Percentage of target met** of the projected **monthly number of households** receiving eviction mitigation services from legal aid
- **Number and percentage of eviction actions that were resolved** to allow residents to remain in their homes

Affirmation of Reporting*

I affirm that my organization is capable of providing weekly reports on the above measures.

Yes

Number of Clients Served During Grant Period - Eviction Mitigation*

This grant period ends on December 30, 2020. Please estimate the number of clients that will be served for **eviction mitigation through legal aid** by the end of the grant period.

25

September Projections - Eviction Mitigation*

Please estimate the number of individuals to be served by this funding for **eviction mitigation through legal aid** in **September 2020**.

5

September Projections - Percentage of Eviction Actions Resolved*

Please estimate the percentage of evictions actions resolved by this funding in **September 2020**.

20

October Projections - Individuals Served - Eviction Mitigation*

Please estimate the number of individuals to be served by this funding for **eviction mitigation through legal aid** in **October 2020**.

7

October Projections - Percentage of Eviction Actions Resolved

Please estimate the percentage of evictions actions resolved by this funding in **October 2020**.

30

November Projections - Eviction Mitigation*

Please estimate the number of individuals to be served by this funding for **eviction mitigation through legal aid** in **November 2020**.

6

November Projections - Percentage of Eviction Actions Resolved*

Please estimate the percentage of evictions actions resolved by this funding in **November 2020**.

40

December Projections - Eviction Mitigation*

Please estimate the number of individuals to be served by this funding for **eviction mitigation through legal aid** in **December 2020**.

6

December - Percentage of Eviction Actions Resolved*

Please estimate the percentage of evictions actions resolved by this funding in **December 2020**.

Funder Involvement

Which of the funders have provided a grant to your organization within the last three years?*

Allegany Franciscan Ministries
Foundation for a Healthy St. Petersburg
Funding from a Pinellas County Municipality
Juvenile Welfare Board of Pinellas County
Pinellas Community Foundation
Pinellas County Government
Tampa Bay Resiliency Fund
United Way Suncoast

Other Funding Sources

If your organization has submitted applications to other funders or has received funding in response to coronavirus/COVID-19 from another funder, please briefly describe below:

Largo CDBG CARES funds: \$10,000
Clearwater CDBG CARES funds: \$100,000
United Way Suncoast COVID: \$33,000
Manatee CDBG CARES funds: \$49,000
Pinellas CDBG CARES: \$53,530
Senior Connection Center CARES: \$64,635
AAAPP CARES: \$59,523
Senior Citizens Services COVID- \$8,000
PCF Resiliency: \$7,970
Manatee CARES PPE funding: \$5,000

Corrective Action*

Is your organization currently under a corrective action agreement with any funder (including but not limited to those listed above)? If yes, please explain in detail, including the status of the corrective action. If no, state **No**.

No.

Confirmation

Signature and Affirmation*

By submitting this application, I hereby swear that executive leadership is aware of this request for funding, and if this funding is approved, my organization will be able to use these funds in the manner described in the application.

Please type your name as an electronic signature and the date on which you are submitting this application.

Chelsea Wait, 09/03/2020

File Attachment Summary

Applicant File Uploads

- 2018 Gulfcoast Legal Services Inc Form 990-compressed.pdf
- 2020 budget - FINAL - BOD Approved.pdf
- 2019 gulfcoast legal services, inc. 9-30-19 audit.pdf
- Gulfcoast Legal Services 9-30-19 Audit Eng Ltr.pdf
- PPE Cover Letter and Receipts.pdf
- Cont of Operations Plan 8-4-2020.pdf
- Certificate- Gen, Crime, Umbrella, Cyber.pdf
- CARES-Partnership-Fund-Budget-Summary.pdf
- CARES-Partnership-Fund-Budget-Narrative.pdf
- LPO list.xlsx

Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2018

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the 2018 calendar year, or tax year beginning **JAN 1, 2018** and ending **SEP 30, 2018**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Gulfcoast Legal Services, Inc. Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 501 First Ave N Ste 420 City or town, state or province, country, and ZIP or foreign postal code St Petersburg, FL 33731	D Employer identification number **-***2749 E Telephone number 727-821-0726
F Name and address of principal officer: Tammy D. Greer same as C above		G Gross receipts \$ 2,265,853. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶
J Website: ▶ www.gulfcoastlegal.org		L Year of formation: 1978 M State of legal domicile: FL
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: To serve the legal needs of vulnerable individuals, families & communities. 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 11 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 11 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 0 6 Total number of volunteers (estimate if necessary) 6 45 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. 7b Net unrelated business taxable income from Form 990-T, line 38 7b 9,000.	
Revenue	8 Contributions and grants (Part VIII, line 1h) 2,113,950. Prior Year 2,201,666. Current Year 9 Program service revenue (Part VIII, line 2g) 26,926. 7,070. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) -2,417. 170. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 9,223. 56,947. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 2,147,682. 2,265,853.	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 90,934. 84,176. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,397,464. 1,400,708. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. b Total fundraising expenses (Part IX, column (D), line 25) ▶ 19,975. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 592,722. 525,151. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 2,081,120. 2,010,035. 19 Revenue less expenses. Subtract line 18 from line 12 66,562. 255,818.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16) 707,618. Beginning of Current Year 1,105,091. End of Year 21 Total liabilities (Part X, line 26) 134,975. 276,630. 22 Net assets or fund balances. Subtract line 21 from line 20 572,643. 828,461.	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer Tammy D. Greer, Executive Director Type or print name and title	Date _____			
Paid Preparer Use Only	Print/Type preparer's name Cynthia J. Zygadlo	Preparer's signat <i>Cynthia J. Zygadlo</i>	Date 08/13/19	Check if self-employed <input type="checkbox"/>	PTIN P00554679
Firm's name ▶ PDR CPAs + Advisors, Inc.		Firm's EIN ▶ ** - *** 7531			
Firm's address ▶ 4023 Tampa Road, Suite 2000 Oldsmar, FL 34677		Phone no. 727-785-4447			

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: Gulfcoast Legal Services is a non profit organization serving the legal needs of vulnerable individuals, families and communities.

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 364,956. including grants of \$) (Revenue \$) Legal Assistance for Human Trafficking & Human Rights: The Immigration & Human Rights unit provided assistance to 769 immigrant victims of crime with T and U visas as well as obtaining citizenship or documented status to assure their ability to live and work in the US.

4b (Code:) (Expenses \$ 615,182. including grants of \$) (Revenue \$) Legal Services for Families/Domestic Violence: The Family Law unit provided services to 533 clients and closed 384 cases of protective injunctions, personal safety, custody, divorce, child support, visitation, and paternity.

4c (Code:) (Expenses \$ 629,664. including grants of \$ 84,176.) (Revenue \$) Financial Stability & Housing Legal Services: Financial stability and housing attorneys and support staff provided legal services to help residents obtain or maintain stable income and/or housing.

4d Other program services (Describe in Schedule O.) (Expenses \$ 1,819. including grants of \$) (Revenue \$ 7,070.)

4e Total program service expenses 1,611,621.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e	X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 22-38. Includes questions about grants, compensation, tax-exempt bonds, excess benefit transactions, and Schedule O completion.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 1a, 1b, 1c. Includes questions about Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	1a 11		
b	Enter the number of voting members included in line 1a, above, who are independent		
	1b 11		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?		X
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **FL**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **Richard Kennedy, Grants Accountant - 727-821-0726**
501 1st Avenue North, Suite 420, St. Petersburg, FL 33701

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Shaina Bent President	1.00	X		X						
(2) Ama N. Appiah ESQ Vice President	1.00	X		X						
(3) Edward A. Eager CPA Treasurer	1.00	X		X						
(4) Professor Kristen David Adams Secretary	1.00	X		X						
(5) William H. Weller ESQ Board Member	1.00	X								
(6) Elise K Winters ESQ Board Member	1.00	X								
(7) Keith E. Bass Board Member	1.00	X								
(8) Pamela D. Cichon ESQ Board Member	1.00	X								
(9) Cynthia Batt ESQ Board Member	1.00	X								
(10) Margaret Knaust ESQ Board Member	1.00	X								
(11) Bradley Muhs ESQ Board Member	1.00	X								
(12) Tammy Greer Executive Director	40.00			X						

Part VIII Statement of Revenue

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c						
	d Related organizations	1d						
	e Government grants (contributions)	1e	2,135,499.					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	66,167.					
	g Noncash contributions included in lines 1a-1f: \$							
	h Total. Add lines 1a-1f			2,201,666.				
Program Service Revenue	2 a Attorney Fees	Business Code	541100	7,070.	7,070.			
	b							
	c							
	d							
	e							
	f All other program service revenue							
	g Total. Add lines 2a-2f			7,070.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			170.	170.			
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6 a Gross rents	(i) Real	(ii) Personal					
		b Less: rental expenses						
		c Rental income or (loss)						
		d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
		b Less: cost or other basis and sales expenses						
		c Gain or (loss)						
		d Net gain or (loss)						
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a						
		b Less: direct expenses	b					
		c Net income or (loss) from fundraising events						
	9 a Gross income from gaming activities. See Part IV, line 19	a						
b Less: direct expenses		b						
c Net income or (loss) from gaming activities								
10 a Gross sales of inventory, less returns and allowances	a							
	b Less: cost of goods sold	b						
	c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code					
11 a Other Income	900099		56,947.	56,947.				
	b							
	c							
	d All other revenue							
	e Total. Add lines 11a-11d			56,947.				
12 Total revenue. See instructions			2,265,853.	64,187.	0.	0.		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	84,176.	84,176.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,110,705.	919,231.	191,428.	46.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	204,265.	177,693.	26,572.	
10 Payroll taxes	85,738.	70,887.	14,849.	2.
11 Fees for services (non-employees):				
a Management				
b Legal	4,330.	4,317.	13.	
c Accounting	70,819.	3,552.	67,267.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	10,373.	8,030.	2,343.	
12 Advertising and promotion	27,298.	20,623.	563.	6,112.
13 Office expenses	36,069.	23,897.	3,673.	8,499.
14 Information technology				
15 Royalties				
16 Occupancy	257,048.	199,850.	55,440.	1,758.
17 Travel	45,160.	36,808.	7,144.	1,208.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	25,748.	21,247.	4,500.	1.
23 Insurance	31,253.	29,849.	1,404.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Dues and Fees	9,475.	8,351.	968.	156.
b Miscellaneous	7,578.	3,110.	2,275.	2,193.
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	2,010,035.	1,611,621.	378,439.	19,975.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	182,224.	1	247,640.
	2 Savings and temporary cash investments	160,810.	2	449,705.
	3 Pledges and grants receivable, net	269,425.	3	263,604.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	30,932.	9	73,609.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 161,614.		
	b Less: accumulated depreciation	10b 92,526.	60,859.	10c 69,088.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	3,368.	15	1,445.
16 Total assets. Add lines 1 through 15 (must equal line 34)	707,618.	16	1,105,091.	
Liabilities	17 Accounts payable and accrued expenses	113,403.	17	174,147.
	18 Grants payable		18	
	19 Deferred revenue	21,572.	19	102,483.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	134,975.	26	276,630.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	542,378.	27	803,317.
	28 Temporarily restricted net assets	30,265.	28	25,144.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	572,643.	33	828,461.	
34 Total liabilities and net assets/fund balances	707,618.	34	1,105,091.	

Part XI Reconciliation of Net Assets

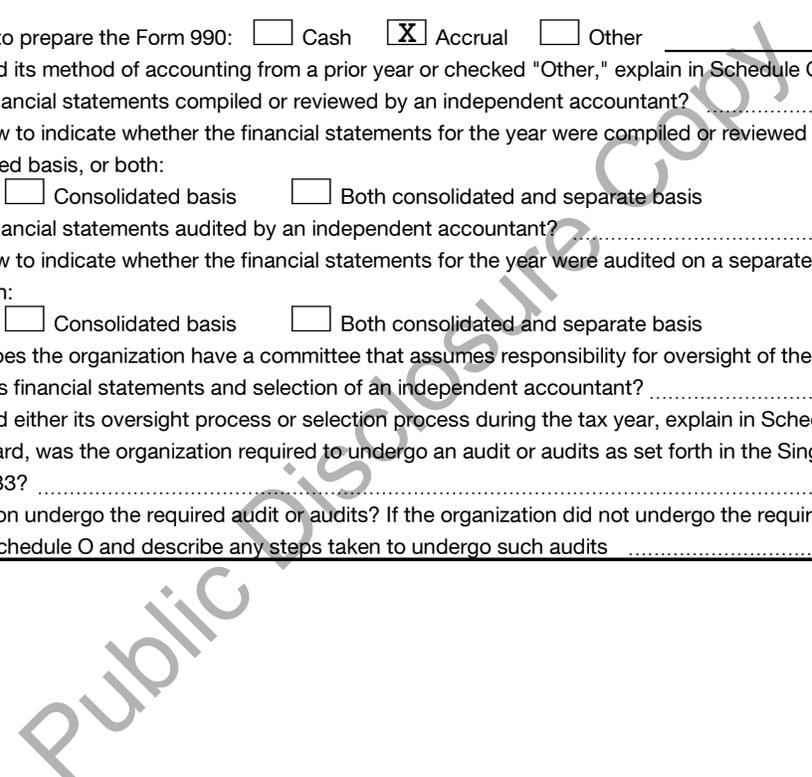
Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,265,853.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,010,035.
3	Revenue less expenses. Subtract line 2 from line 1	3	255,818.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	572,643.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	828,461.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	X	



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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,043,538.	2,148,353.	1,823,924.	2,113,950.	2,201,666.	10,331,431.
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	2,043,538.	2,148,353.	1,823,924.	2,113,950.	2,201,666.	10,331,431.
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.						10,331,431.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	2,043,538.	2,148,353.	1,823,924.	2,113,950.	2,201,666.	10,331,431.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...	429.	531.	696.	222.	170.	2,048.
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 VI.)		8,031.	46,362.	9,223.	56,947.	120,563.
11 Total support. Add lines 7 through 10						10,454,042.
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 2018 (line 6, column (f) divided by line 11, column (f))	14	98.83 %
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	99.37 %
16a 33 1/3% support test - 2018. 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 - 2017. 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 - 2018. 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 VI 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 - 2017. 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 VI 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 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
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 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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 VI.)						
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 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2018. 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 - 2017. 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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
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)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b 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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c 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 .		

Section 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.		
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.		

Section C. Type II Supporting Organizations

	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 or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

	Yes	No
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?		
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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
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? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

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 <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> 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.		

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

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

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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
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 which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

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

Part II, Short Year Explanation:

This fiscal period represents a shortened period, as the Organization is transitioning from a December 31 year-end to a September 30 fiscal year-end.

Public Disclosure Copy

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Name of the organization

Gulfcoast Legal Services, Inc.

Employer identification number

**** - ***2749**

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization Gulfcoast Legal Services, Inc.	Employer identification number ** - ***2749
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	 <hr/> <hr/> <hr/>	\$ <u>732,450.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	 <hr/> <hr/> <hr/>	\$ <u>304,289.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	 <hr/> <hr/> <hr/>	\$ <u>276,204.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	 <hr/> <hr/> <hr/>	\$ <u>77,526.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	 <hr/> <hr/> <hr/>	\$ <u>107,009.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	 <hr/> <hr/> <hr/>	\$ <u>84,031.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Gulfcoast Legal Services, Inc.	Employer identification number ** - ***2749
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/>	\$ 67,343.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ 119,601.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Public Disclosure Copy

Name of organization Gulfcoast Legal Services, Inc.	Employer identification number ** - ***2749
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Public Disclosure Copy

Name of organization Gulfcoast Legal Services, Inc.	Employer identification number ** - *** 2749
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

Public Disclosure Copy

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization Gulfcoast Legal Services, Inc. Employer identification number ** - *** 2749

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, total number and acreage, number of easements on historic structures, and monitoring details.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include reporting requirements for art and historical treasures.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment _____ %
- b Permanent endowment _____ %
- c Temporarily restricted endowment _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		74,071.	57,525.	16,546.
d Equipment		87,543.	35,001.	52,542.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				69,088.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	2,438,824.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b	172,971.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e		172,971.
3	Subtract line 2e from line 1		3	2,265,853.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	2,265,853.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	2,183,006.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	172,971.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e		172,971.
3	Subtract line 2e from line 1		3	2,010,035.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	2,010,035.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part X, Line 2:

The Organization accounts for the effect of any uncertain tax positions based on a "more likely than not" threshold to the recognition of the tax positions being sustained based on the technical merits of the position under scrutiny by the applicable taxing authority. If a tax position or positions are deemed to result in uncertainties of those positions, the unrecognized tax benefit is estimated based on a "cumulative probability assessment" that aggregates the estimated tax liability for all uncertain tax positions. The Organization has identified its tax status as a tax-exempt entity as its only significant tax position; however, the Organization has determined that such tax position does not result in an uncertainty requiring recognition. The Organization is not currently under

Part XIII Supplemental Information *(continued)*

examination by any taxing jurisdiction. The organization's federal returns are generally open for examination for three years following the date filed.

Public Disclosure Copy

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Name of the organization **Gulfcoast Legal Services, Inc.** Employer identification number **** - *** 2749**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
The Community Law Program 501 1st Ave N, Room 519 St. Petersburg, FL 33701	** - *** 0727	501(C)(3)	39,026.	0.			To provide free legal assistance to low income individuals
Bay Area Legal Services 1302 N. 19th Street, Suite 400 Tampa, FL 33605	** - *** 1886	501(C)(3)	45,150.	0.			To provide free legal assistance to low income individuals

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▶** _____

3 Enter total number of other organizations listed in the line 1 table **▶** _____

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization

Gulfcoast Legal Services, Inc.

Employer identification number

** - ***2749

Form 990, Part III, Line 4c, Program Service Accomplishments:

IRS Low Income Taxpayer Clinic program.

Form 990, Part VI, Section B, line 11b:

Draft return was reviewed in its entirety by the Executive Director and the Finance and Audit Committee of the Board of Directors and then sent to all Board members for review and approval.

Form 990, Part VI, Section B, Line 12c:

As per the employee handbook and the Union collective bargaining agreement, employees and officers agree to disclose any potential conflicts of interest prior to engaging in any new activity. The policy is monitored on an ongoing basis, and any potential conflicts are examined for compliance by the Executive Director.

Form 990, Part VI, Section B, Line 15:

The Board of Directors determines the Executive Director's salary, based upon comparatives for similar positions. The Board assesses the performance of the Executive Director, at least annually, against key criteria, including but not limited to accomplishment of established annual goals as well as programmatic and fiscal outcomes. Other officers' and key staff members' compensation is determined using comparability data for like positions in the region.

Form 990, Part VI, Section C, Line 18:

A public inspection copy is available upon request from the Organization

Name of the organization Gulfcoast Legal Services, Inc.	Employer identification number **-***2749
--	--

and is published on the public GuideStar website.

Form 990, Part VI, Section C, Line 19:

The Organization's governing documents, conflict of interest policy, and financial statements are maintained on the Organization's internal shared server and are accessible in both print and electronic formats to all staff and Board members. All documents are available upon request to the public. Financial statements are provided to all funders each year upon completion of the annual audit.

Public Disclosure Copy

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

2018

For calendar year 2018 or other tax year beginning JAN 1, 2018, and ending SEP 30, 2018

▶ Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Department of the Treasury
Internal Revenue Service

Open to Public Inspection for
501(c)(3) Organizations Only

<p>A <input type="checkbox"/> Check box if address changed</p> <p>B Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)</p>	<p>Print or Type</p>	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) Gulfcoast Legal Services, Inc.</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. 501 First Ave N Ste 420</p> <p>City or town, state or province, country, and ZIP or foreign postal code St Petersburg, FL 33731</p>	<p>D Employer identification number (Employees' trust, see instructions.) **-***2749</p> <p>E Unrelated business activity code (See instructions.)</p>
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C Book value of all assets at end of year 1,105,091.

F Group exemption number (See instructions.) ▶

G Check organization type ▶ 501(c) corporation 501(c) trust 401(a) trust Other trust

H Enter the number of the organization's unrelated trades or businesses. ▶ 1 Describe the only (or first) unrelated trade or business here ▶ **See Statement 1**. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No
 If "Yes," enter the name and identifying number of the parent corporation. ▶

J The books are in care of ▶ **Richard Kennedy, Grants Accountant** Telephone number ▶ **727-821-0726**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales				
b Less returns and allowances	c Balance ▶	1c		
2 Cost of goods sold (Schedule A, line 7)		2		
3 Gross profit. Subtract line 2 from line 1c		3		
4a Capital gain net income (attach Schedule D)		4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		4b		
c Capital loss deduction for trusts		4c		
5 Income (loss) from a partnership or an S corporation (attach statement)		5		
6 Rent income (Schedule C)		6		
7 Unrelated debt-financed income (Schedule E)		7		
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)		8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)		9		
10 Exploited exempt activity income (Schedule I)		10		
11 Advertising income (Schedule J)		11		
12 Other income (See instructions; attach schedule)		12		
13 Total. Combine lines 3 through 12		13	0.	

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)
 (Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)	14	
15 Salaries and wages	15	
16 Repairs and maintenance	16	
17 Bad debts	17	
18 Interest (attach schedule) (see instructions)	18	
19 Taxes and licenses	19	
20 Charitable contributions (See instructions for limitation rules)	20	
21 Depreciation (attach Form 4562)	21	
22 Less depreciation claimed on Schedule A and elsewhere on return	22a	22b
23 Depletion	23	
24 Contributions to deferred compensation plans	24	
25 Employee benefit programs	25	
26 Excess exempt expenses (Schedule I)	26	
27 Excess readership costs (Schedule J)	27	
28 Other deductions (attach schedule)	28	
29 Total deductions. Add lines 14 through 28	29	0.
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	0.
31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	31	
32 Unrelated business taxable income. Subtract line 31 from line 30	32	0.

Part III Total Unrelated Business Taxable Income

Table with 3 columns: Line number, Description, and Amount. Includes lines 33-38 for unrelated business taxable income calculation.

Part IV Tax Computation

Table with 3 columns: Line number, Description, and Amount. Includes lines 39-44 for tax computation.

Part V Tax and Payments

Table with 3 columns: Line number, Description, and Amount. Includes lines 45a-55 for tax and payments.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

Table with 3 columns: Line number, Description, and Yes/No columns. Includes lines 56-58 regarding foreign activities and tax-exempt interest.

Sign Here section containing declaration text and signature lines for the preparer and Executive Director.

Paid Preparer Use Only section containing fields for preparer name, signature, date, firm name, address, and EIN.

Form 990-T	Description of Organization's Primary Unrelated Business Activity	Statement	1
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Disallowed Transportation Fringe Benefits

To Form 990-T, Page 1

Public Disclosure Copy

Underpayment of Estimated Tax by Corporations

Department of the Treasury
Internal Revenue Service

▶ Attach to the corporation's tax return. **Form 990-T**

▶ Go to www.irs.gov/Form2220 for instructions and the latest information.

2018

Name Gulfcoast Legal Services, Inc.	Employer identification number **-***2749
---	---

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment			
1 Total tax (see instructions)		1	1,890.
2 a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a		
b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method	2b		
c Credit for federal tax paid on fuels (see instructions)	2c		
d Total. Add lines 2a through 2c		2d	
3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty		3	1,890.
4 Enter the tax shown on the corporation's 2017 income tax return. See instructions. Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5		4	
5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3		5	1,890.

Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it does not owe a penalty. See instructions.	
6 <input type="checkbox"/> The corporation is using the adjusted seasonal installment method.	
7 <input type="checkbox"/> The corporation is using the annualized income installment method.	
8 <input type="checkbox"/> The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.	

Part III Figuring the Underpayment					
		(a)	(b)	(c)	(d)
9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	9	04/15/18	06/15/18	09/15/18	
10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column	10	630.	630.	630.	
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions	11				
Complete lines 12 through 18 of one column before going to the next column.					
12 Enter amount, if any, from line 18 of the preceding column	12				
13 Add lines 11 and 12	13				
14 Add amounts on lines 16 and 17 of the preceding column	14		630.	1,260.	
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	0.	0.	0.	
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	16		630.	1,260.	
17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	17	630.	630.	630.	
18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column	18				

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

LHA For Paperwork Reduction Act Notice, see separate instructions. Form 2220 (2018)

Part IV Figuring the Penalty

	(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19			
20 Number of days from due date of installment on line 9 to the date shown on line 19	20			
21 Number of days on line 20 after 4/15/2018 and before 7/1/2018	21			
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 5\% (0.05)}{365}$...	22 \$	\$	\$	\$
23 Number of days on line 20 after 06/30/2018 and before 10/1/2018	23			
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 5\% (0.05)}{365}$...	24 \$	\$	\$	\$
25 Number of days on line 20 after 9/30/2018 and before 1/1/2019	25			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 5\% (0.05)}{365}$...	26 \$	\$	\$	\$
27 Number of days on line 20 after 12/31/2018 and before 4/1/2019	27	See Attached Worksheet		
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 6\% (0.06)}{365}$...	28 \$	\$	\$	\$
29 Number of days on line 20 after 3/31/2019 and before 7/1/2019	29			
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{365}$	30 \$	\$	\$	\$
31 Number of days on line 20 after 6/30/2019 and before 10/1/2019	31			
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{365}$	32 \$	\$	\$	\$
33 Number of days on line 20 after 9/30/2019 and before 1/1/2020	33			
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{365}$	34 \$	\$	\$	\$
35 Number of days on line 20 after 12/31/2019 and before 3/16/2020	35			
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{366}$	36 \$	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37 \$	\$	\$	\$
38 Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns	38			\$ 63.

* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

	Enter filer's identifying number	
Type or print	Name of exempt organization or other filer, see instructions. Gulfcoast Legal Services, Inc.	Employer identification number (EIN) or **-***2749
<small>File by the due date for filing your return. See instructions.</small>	Number, street, and room or suite no. If a P.O. box, see instructions. 501 First Ave N Ste 420	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. St Petersburg, FL 33731	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

Richard Kennedy, Grants Accountant - 501 1st Avenue

- The books are in the care of ▶ **North, Suite 420 - St. Petersburg, FL 33701**
Telephone No. ▶ **727-821-0726** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **August 15, 2019**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning **JAN 1, 2018**, and ending **SEP 30, 2018**.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.



Florida Corporate Income/Franchise Tax Return

F-1120, R. 01/19 1019

FEIN ** - *** 2749

For calendar year 2018 or tax year beginning JAN 1, 2018 ending SEP 30, 2018

Rule 12C-1.051 Florida Administrative Code Effective 01/19 Page 1 of 6

8933020180930000200503713*****274900002

Name Gulfcoast Legal Services, Inc.
Address 501 First Ave N Ste 420
City/State/ZIP St Petersburg, FL 33731

Check here if any changes have been made to name or address

Computation of Florida Net Income Tax

- 1. Federal taxable income (see instructions) - Attach pages 1-5 of federal return Check here if negative 9,000.00
2. State income taxes deducted in computing federal taxable income (attach schedule) Check here if negative
3. Additions to federal taxable income (from Schedule I) Check here if negative
4. Total of Lines 1, 2 and 3 Check here if negative 9,000.00
5. Subtractions from federal taxable income (from Schedule II) Check here if negative
6. Adjusted federal income (Line 4 minus Line 5) Check here if negative 9,000.00
7. Florida portion of adjusted federal income (see instructions) Check here if negative 9,000.00
8. Nonbusiness income allocated to Florida (from Schedule R) Check here if negative
9. Florida exemption 9,000.00
10. Florida net income (Line 7 plus Line 8 minus Line 9) 0.00
11. Tax due: 5.5% of Line 10 0.00
12. Credits against the tax (from Schedule V)
13. Total corporate income/franchise tax due (Line 11 minus Line 12) 0.00
14. a) Penalty: F-2220 b) Other c) Interest: F-2220 d) Other Line 14 Total
15. Total of Lines 13 and 14
16. Payment credits: Estimated tax payments 16a \$ Tentative tax payment 16b \$
17. Total amount due: Subtract Line 16 from Line 15. If positive, enter amount due here and on payment coupon. If the amount is negative (overpayment), enter on Line 18 and/or Line 19 0.00
18. Credit: Enter amount of overpayment credited to next year's estimated tax here and on payment coupon
19. Refund: Enter amount of overpayment to be refunded here and on payment coupon

844081 09-17-18

Payment Coupon for Florida Corporate Income Tax Return

1019 F-1120 R. 01/19

Do Not Detach

YEAR ENDING 09/30/18

To ensure proper credit to your account, enclose your check with tax return when mailing.

Name Gulfcoast Legal Services, Inc
Address 501 First Ave N Ste 420
City/State/ZIP St Petersburg, FL 33731

If 6/30 year end, return is due 1st day of the 4th month after the close of the taxable year, otherwise return is due 1st day of the 5th month after the close of the taxable year.

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20180101 0 0 0
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900000 0 0 0
0 900000 0 0

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8933 0 20180930 0002005037 1 3*****2749 0000 2



Gulfcoast Legal Services, Inc.

FEIN ** - ***2749

1019
F-1120
R. 01/19
Page 2 of 6
09/30/18

This return is considered incomplete unless a copy of the federal return is attached.
If your return is not signed, or improperly signed and verified, it will be subject to a penalty. The statute of limitations will not start until your return is properly signed and verified. Your return must be completed in its entirety.

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

Sign here Signature of officer (must be an original signature) Date _____ Title **Executive Director**

Paid preparers only
Preparer's signature *Coyssado* Date **08/13/19**
Preparer check if self-employed Preparer's PTIN **P00554679**

Firm's name (or yours if self-employed) and address **PDR CPAs + Advisors, Inc.**
4023 Tampa Road, Suite 2000
Oldsmar, FL
FEIN **** - ***7531**
ZIP **34677**

All Taxpayers Must Answer Questions A through M Below - See Instructions

- A. State of incorporation: _____
- B. Florida Secretary of State document number: _____
- C. Florida consolidated return? YES NO
- D. Initial return Final return (final federal return filed)
- E. Principal Business Activity Code (as pertains to Florida)
- F. A Florida extension of time was timely filed? YES NO
- G-1. Corporation is a member of a controlled group? YES NO If yes, attach list.
- G-2. Part of a federal consolidated return? YES NO If yes, provide:
FEIN from federal consolidated return: _____
Name of corporation: _____
- G-3. The federal common parent has sales, property, or payroll in Florida? YES NO
- H. Location of corporate books:
501 1st Avenue North, Suite 420
City, State, ZIP: **St. Petersburg, FL 33701**
- I. Taxpayer is a member of a Florida partnership or joint venture? YES NO
- J. Enter date of latest IRS audit: _____
a) List years examined: _____
- K. Contact person concerning this return: **Tammy D. Greer**
a) Contact person telephone number: **727-821-0726**
b) Contact person e-mail address: **tammyg@gulfcoastlega**
- L. Type of federal return filed 1120 1120S or **990-T**

L

T

Where to Send Payments and Returns

Make check payable to and mail with return to:
Florida Department of Revenue
5050 W Tennessee Street
Tallahassee FL 32399-0135

If you are requesting a **refund** (Line 19), send your return to:
Florida Department of Revenue
PO Box 6440
Tallahassee FL 32314-6440

Remember:

- ✓ **Make your check payable to the Florida Department of Revenue.**
- ✓ **Write your FEIN on your check.**
- ✓ **Sign your check and return.**
- ✓ **Attach a copy of your federal return.**
- ✓ **Attach a copy of your Florida Form F-7004 (extension of time) if applicable.**



NAME Gulfcoast Legal Services, Inc.

FEIN ** - ***2749

TAXABLE YEAR ENDING 09/30/18

Schedule I - Additions and/or Adjustments to Federal Taxable Income	
1. Interest excluded from federal taxable income (see instructions)	1.
2. Undistributed net long-term capital gains (see instructions)	2.
3. Net operating loss deduction (attach schedule)	3.
4. Net capital loss carryover (attach schedule)	4.
5. Excess charitable contribution carryover (attach schedule)	5.
6. Employee benefit plan contribution carryover (attach schedule)	6.
7. Enterprise zone jobs credit (Florida Form F-1156Z)	7.
8. Ad valorem taxes allowable as enterprise zone property tax credit (Florida Form F-1158Z)	8.
9. Guaranty association assessment(s) credit	9.
10. Rural and/or urban high crime area job tax credits	10.
11. State housing tax credit	11.
12. Florida Tax Credit Scholarship Program Credits	12.
13. Renewable energy tax credits	13.
14. New markets tax credit	14.
15. Entertainment industry tax credit	15.
16. Research and Development tax credit	16.
17. Energy Economic Zone tax credit	17.
18. s. 168(k) IRC special bonus depreciation	18.
19. Other additions (attach schedule)	19.
20. Total Lines 1 through 19. Enter total on Line 20 and on Page 1, Line 3.	20.

Schedule II - Subtractions from Federal Taxable Income	
1. Gross foreign source income less attributable expenses (a) Enter s. 78, IRC income \$ _____ (b) plus s. 862, IRC dividends \$ _____ (c) less direct and indirect expenses \$ _____ Total ▶	1.
2. Gross subpart F income less attributable expenses (a) Enter s. 951, IRC subpart F income \$ _____ (b) less direct and indirect expenses \$ _____ Total ▶	2.
Note: Taxpayers doing business outside Florida enter zero on Lines 3 through 6, and complete Schedule IV.	
3. Florida net operating loss carryover deduction (see instructions)	3.
4. Florida net capital loss carryover deduction (see instructions)	4.
5. Florida excess charitable contribution carryover (see instructions)	5.
6. Florida employee benefit plan contribution carryover (see instructions)	6.
7. Nonbusiness income (from Schedule R, Line 3)	7.
8. Eligible net income of an international banking facility (see instructions)	8.
9. s. 179, IRC expense (see instructions)	9.
10. s. 168(k), IRC special bonus depreciation (see instructions)	10.
11. Other subtractions (attach statement)	11.
12. Total Lines 1 through 11. Enter total on Line 12 and on Page 1, Line 5.	12.



NAME Gulfcoast Legal Services, Inc.

FEIN ** - ***2749

TAXABLE YEAR ENDING 09/30/18

Schedule III - Apportionment of Adjusted Federal Income						
III-A For use by taxpayers doing business outside Florida, except those providing insurance or transportation services.						
	(a) WITHIN FLORIDA (Numerator)	(b) TOTAL EVERYWHERE (Denominator)	(c) Col. (a) ÷ Col. (b) Rounded to Six Decimal Places		(d) Weight <small>If any factor in Column (b) is zero, see note on Pg 9 of the instructions.</small>	(e) Weighted Factors Rounded to Six Decimal Places
1. Property (Schedule III-B below)					X 25% or	
2. Payroll					X 25% or	
3. Sales (Schedule III-C below)					X 50% or	
4. Apportionment fraction (Sum of Lines 1, 2, and 3, Column (e)). Enter here and on Schedule IV, Line 2.						1.000000
III-B For use in computing average value of property (use original cost).	WITHIN FLORIDA		TOTAL EVERYWHERE			
	a. Beginning of year	b. End of year	c. Beginning of year	d. End of year		
1. Inventories of raw material, work in process, finished goods						
2. Buildings and other depreciable assets						
3. Land owned						
4. Other tangible and intangible (financial org. only) assets (attach schedule)						
5. Total (Lines 1 through 4)						
6. Average value of property						
a. Add Line 5, Columns (a) and (b) and divide by 2 (for within Florida) 6a.						
b. Add Line 5, Columns (c) and (d) and divide by 2 (for total everywhere)	6b. _____					
7. Rented property (8 times net annual rent)						
a. Rented property in Florida	7a. _____					
b. Rented property Everywhere	7b. _____					
8. Total (Lines 6 and 7). Enter on Line 1, Schedule III-A, Columns (a) and (b).						
a. Enter Lines 6 a. plus 7 a. and also enter on Schedule III-A, Line 1, Column (a) for total average property in Florida	8a. _____					
b. Enter Lines 6 b. plus 7 b. and also enter on Schedule III-A, Line 1, Column (b) for total average property Everywhere	8b. _____					
III-C Sales Factor	(a) TOTAL WITHIN FLORIDA (Numerator)		(b) TOTAL EVERYWHERE (Denominator)			
1. Sales (gross receipts)	N/A		N/A			
2. Sales delivered or shipped to Florida purchasers			N/A			
3. Other gross receipts (rents, royalties, interest, etc. when applicable)						
4. TOTAL SALES (Enter on Schedule III-A, Line 3, Columns [a] and [b])						
III-D Special Apportionment Fractions (see instructions)	(a) WITHIN FLORIDA	(b) TOTAL EVERYWHERE	(c) FLORIDA Fraction ((a) ÷ (b)) Rounded to Six Decimal Places			
1. Insurance companies (attach copy of Schedule T - Annual Report)						
2. Transportation services						

Schedule IV - Computation of Florida Portion of Adjusted Federal Income	
1. Apportionable adjusted federal income from Page 1, Line 6	1.
2. Florida apportionment fraction (Schedule III-A, Line 4)	2.
3. Tentative apportioned adjusted federal income (multiply Line 1 by Line 2)	3.
4. Net operating loss carryover apportioned to Florida (attach schedule; see instructions)	4.
5. Net capital loss carryover apportioned to Florida (attach schedule; see instructions)	5.
6. Excess charitable contribution carryover apportioned to Florida (attach schedule; see instructions)	6.
7. Employee benefit plan contribution carryover apportioned to Florida (attach schedule; see instructions)	7.
8. Total carryovers apportioned to Florida (add Lines 4 through 7)	8.
9. Adjusted federal income apportioned to Florida (Line 3 less Line 8; see instructions)	9.



NAME Gulfcoast Legal Services, Inc.

FEIN ** - ***2749

TAXABLE YEAR ENDING 09/30/18

Schedule V - Credits Against the Corporate Income/Franchise Tax	
1. Florida health maintenance organization credit (attach assessment notice)	1.
2. Capital investment tax credit (attach certification letter)	2.
3. Enterprise zone jobs credit (from Florida Form F-1156Z attached)	3.
4. Community contribution tax credit (attach certification letter)	4.
5. Enterprise zone property tax credit (from Florida Form F-1158Z attached)	5.
6. Rural job tax credit (attach certification letter)	6.
7. Urban high crime area job tax credit (attach certification letter)	7.
8. Hazardous waste facility tax credit	8.
9. Florida alternative minimum tax (AMT) credit	9.
10. Contaminated site rehabilitation tax credit (attach tax credit certificate)	10.
11. State housing tax credit (attach certification letter)	11.
12. Florida Tax Credit: Scholarship Program Credits. (attach certificate)	12.
13. Florida renewable energy technologies investment tax credit	13.
14. Florida renewable energy production tax credit	14.
15. New markets tax credit	15.
16. Entertainment industry tax credit	16.
17. Research and Development tax credit	17.
18. Energy Economic Zone tax credit	18.
19. Other credits (attach schedule)	19.
20. Total credits against the tax (sum of Lines 1 through 19 not to exceed the amount on Page 1, Line 11). Enter total credits on Page 1, Line 12	20.

Schedule R - Nonbusiness Income

Line 1. Nonbusiness income (loss) allocated to Florida

Type	Amount
_____	_____
_____	_____
_____	_____
Total allocated to Florida 1.	_____
(Enter here and on Page 1, Line 8)	

Line 2. Nonbusiness income (loss) allocated elsewhere

Type	State/country allocated to	Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
Total allocated elsewhere 2.		_____

Line 3. Total nonbusiness income

Grand total. Total of Lines 1 and 2 3.	_____
(Enter here and on Schedule II, Line 7)	



NAME Gulfcoast Legal Services, Inc. FEIN ** - ***2749 TAXABLE YEAR ENDING 09/30/18

**Estimated Tax Worksheet
For Taxable Years Beginning On or After January 1, 2018**

1. Florida income expected in taxable year	1.	\$	9,000.00
2. Florida exemption \$50,000 (Members of a controlled group, see instructions on Page 14 of Florida Form F-1120N)	2.	\$	9,000.00
3. Estimated Florida net income (Line 1 less Line 2)	3.	\$	
4. Total Estimated Florida tax (5.5% of Line 3)		\$	
Less: Credits against the tax	4.	\$	
5. Computation of installments:			
Payment due dates and payment amounts:			
If 6/30 year end, last day of 4th month,			
otherwise last day of 5th month - Enter 0.25 of Line 4	5a.		
Last day of 6th month - Enter 0.25 of Line 4	5b.		
Last day of 9th month - Enter 0.25 of Line 4	5c.		
Last day of fiscal year - Enter 0.25 of Line 4	5d.		

NOTE: If your estimated tax should change during the year, you may use the amended computation below to determine the amended amounts to be entered on the declaration (Florida Form F-1120ES).

1. Amended estimated tax	1.	\$	_____
2. Less:			
(a) Amount of overpayment from last year elected for credit to estimated tax and applied to date	2a.	\$	_____
(b) Payments made on estimated tax declaration (Florida Form F-1120ES)	2b.	\$	_____
(c) Total of Lines 2(a) and 2(b)	2c.	\$	_____
3. Unpaid balance (Line 1 less Line 2(c))	3.	\$	_____
4. Amount to be paid (Line 3 divided by number of remaining installments)	4.	\$	_____

References

The following documents were mentioned in this form and are incorporated by reference in the rules indicated below. The forms are available online at floridarevenue.com/forms.

Form F-2220	Underpayment of Estimated Tax on Florida Corporate Income/Franchise Tax	Rule 12C-1.051, F.A.C.
Form F-7004	Florida Tentative Income/Franchise Tax Return and Application for Extension of Time to File Return	Rule 12C-1.051, F.A.C.
Form F-1156Z	Florida Enterprise Zone Jobs Credit Certificate of Eligibility for Corporate Income Tax	Rule 12C-1.051, F.A.C.
Form F-1158Z	Enterprise Zone Property Tax Credit	Rule 12C-1.051, F.A.C.
Form F-1120N	Instructions for Corporate Income/Franchise Tax Return	Rule 12C-1.051, F.A.C.
Form F-1120ES	Declaration/Installment of Florida Estimated	Rule 12C-1.051, F.A.C.



FEIN ** - ***2749
DATA Page 1 of 2

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Public Disclosure Copy

Gulfcoast Legal Services, Inc.
2020 Budget

Board approved 9/26/2019

The 2021 budget has not yet been board approved but will include a 1% COLA increase for salaries with a 5% increase in insurance and utilities.

Description	Budget (2020)
Grant Revenue - Federal Total	(1,996,897.00)
Grant Revenue - State & Local Total	(556,752.33)
Grant Revenue - Other Grants & Contracts Total	(464,003.00)
United Way Allocation Total	(12,500.00)
Foundation Grants Total	(11,943.00)
Contributions Total	(100,000.00)
Event Contributions Total	(5,000.00)
Event Sponsorship Total	-
Attorney Fees Total	(2,000.00)
SSI Fee Total	-
Contingency	25,000.00
Interest Income Total	(300.00)
Miscellaneous Income Total	-
In-kind Professional Services Total	(20,000.00)
In-kind Pro Bono Attorney Total	(280,000.00)
In-kind Space Total	(85,000.00)
Net Assets Released from Restriction Total	-
Total Revenue	(3,509,395.33)
Salary Attorney Total	1,150,696.35
Salary Paralegal Total	462,421.47
Salary Support Staff Total	320,745.18
Accrued Leave - Attorney Total	-
Accrued Leave - Paralegal Total	-
Accrued Leave - Support Staff Total	-
Employer Payroll Taxes Total	-
FICA Total	147,940.52
Florida Unemployment Tax Total	3,391.50
Insurance - Medical Total	264,330.00
Insurance - Dental Total	17,160.00
Insurance - Vision Total	2,359.50
Insurance - Life/ADD Total	5,265.00
Insurance - Admin Fees Total	-
Insurance - LT Disability Total	15,444.00
Worker's Comp Total	3,287.57
Supplemental Insurance Total	-
Grant Allocations Total	100,852.50
Legal Fees to outside attorneys Total	3,000.00
Accounting & Audit Fees Total	47,280.00
Payroll Processing Fee's Total	5,618.36
Notaries Total	\$0.00
Florida Bar Foundation Fellow Total	-
Consulting Services - Other Total	9,000.00
Contract Attorney Total	-
Janitorial Services Total	-
Other Contracted Services Total	33,480.00
Advertising & Marketing Total	-
eNewsletter Total	1,380.00

Gulfcoast Legal Services, Inc.
2020 Budget

Board approved 9/26/2019

Description	Budget (2020)
Graphic Design & promotional items Total	13,000.00
Postage & Shipping Total	10,050.00
Courier & Delivery Fees Total	100.00
Direct Mail Services Total	4,000.00
Printing & Reproduction Total	6,900.00
Supplies Total	6,386.00
Equipment Repairs & Maintenance Total	-
Equipment Lease Expenses Total	43,970.00
Equipment less than \$1,000 Total	500.00
Telecommunications Total	20,400.00
Computer Repairs & Maintenance Total	74,250.00
Software - 1 year license Total	28,837.00
Internet Service Total	21,420.00
Website Hosting, Design, Updating Total	750.00
Recruitment Advertising Total	1,500.00
Seminars & Professional Development Total	11,600.00
Meetings & Functions Total	3,000.00
Board Meetings & Development Total	300.00
Food & Beverages Total	100.00
Donor & Community Relations Total	1,500.00
Business Meals & Entertainment Total	1,500.00
Rent Total	128,752.00
Parking Expenses Total	200.00
Electric Total	-
Property Taxes Total	300.00
Water, Sewer, & Trash Total	-
Building Repairs & Maintenance Total	-
Business Licenses & Permits Total	200.00
Attorney Licenses & Regulatory Fees Total	8,165.00
Association & Membership Dues Total	4,600.00
Subscriptions Total	675.00
Books & Purchased Publications Total	800.00
Airfare Total	4,400.00
Lodging Total	12,600.00
Mileage, Fuel, Parking, & Tolls Total	24,000.00
Per Diem Total	6,000.00
Credit Card Merchant Fees Total	620.00
Bank Charges Total	1,920.00
Late Fees, Interest, & Finance Charges Total	200.00
Leasehold Improvement Depreciation Total	14,708.00
Furniture & Equipment Depreciation Total	100.00
Office Equipment Depreciation Total	-
Computer Equipment Depreciation Total	30,000.00
Professional Liability Total	53,425.70
Mult.PerilBld,Conten,Liability Total	8,960.00
Commercial Blanket Bond Total	614.00
Library Expenses Total	-
Online Legal Research Total	5,064.00

Gulfcoast Legal Services, Inc.
2020 Budget

Board approved 9/26/2019

Description	Budget (2020)
Litigation Expenses Total	3,600.00
Interpreter Services Total	3,000.00
Medical Records Total	100.00
Miscellaneous Expenses Total	500.00
Moving Costs Total	-
Clearing Acct Total	-
In-kind Professional Services Total	300,000.00
In-kind Space Total	85,000.00
Capital purchases	-
Transfers Total	-
Total Expense	<u>3,541,718.65</u>
(Surplus)/Deficit	32,323.31
Depreciation expense - noncash	<u>(44,808.00)</u>
Cash Surplus	<u><u>(12,484.69)</u></u>

Gulfcoast Legal Services, Inc.

Financial Statements

September 30, 2019

And

**Reports of Independent
Certified Public Accountants**



GULFCOAST LEGAL SERVICES, INC.
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Oldsmar / Tampa / St. Petersburg

727-785-4447

813-498-1294

727-784-5491 Fax

www.pdr-cpa.com

INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
Gulfcoast Legal Services, Inc.
St. Petersburg, FL

We have audited the accompanying financial statements of Gulfcoast Legal Services, Inc. (a nonprofit organization) (the Organization), which comprise the statement of financial position as of September 30, 2019, the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

CONTINUED

INDEPENDENT AUDITOR'S REPORT - CONTINUED

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Gulfcoast Legal Services, Inc. as of September 30, 2019, and the changes in its net assets and its cash flows for the year then ended, in accordance with accounting principles generally accepted in the United States of America.

Other Matters

Other Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedule of expenditures of federal awards, as required by Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated, in all material respects, in relation to the financial statements as a whole.

Other Reporting Required by *Government Auditing Standards*

In accordance with *Government Auditing Standards*, we have also issued our report dated February 24, 2020, on our consideration of the Organization's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Organization's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Organization's internal control over financial reporting and compliance.

CONTINUED

INDEPENDENT AUDITOR'S REPORT - CONTINUED

Report on Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The schedule of Functional Expenses - Department of Elder Affairs Required Format is presented for additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

PDR CPAs + Advisors

Oldsmar, Florida
February 24, 2020

**GULFCOAST LEGAL SERVICES, INC.
STATEMENT OF FINANCIAL POSITION
SEPTEMBER 30, 2019**

ASSETS

Current assets

Cash and cash equivalents	\$ 198,641
Grants receivable	514,623
Other receivables	1,390
Prepays and other	33,442
Restricted cash	128,779
Client escrow funds	173
Total current assets	<u>877,048</u>

Other assets

Property and equipment, net	46,757
Security deposit	203
Total other assets	<u>46,960</u>

Total Assets \$ 924,008

LIABILITIES AND NET ASSETS

Current liabilities

Accounts payable	\$ 21,329
Client trust deposits	173
Accrued liabilities	107,238
Deferred revenue	84,925
Total current liabilities	<u>213,665</u>

Net assets

Without donor restrictions	
Designated by the Board of Directors: operational reserve	75,601
Undesignated	631,242
	<u>706,843</u>

With donor restrictions	3,500
Total net assets	<u>710,343</u>

Total Liabilities and Net Assets \$ 924,008

See accompanying notes to financial statements

**GULFCOAST LEGAL SERVICES, INC.
STATEMENT OF ACTIVITIES
YEAR ENDED SEPTEMBER 30, 2019**

	Without Donor Restrictions	With Donor Restrictions	Total
Operating Support and Revenue			
Grants and contracts	\$ 2,405,857	\$ -	\$ 2,405,857
Contributions	81,681	3,500	85,181
In-kind revenue	308,619	-	308,619
Article V	373,810	-	373,810
Other	15,140	-	15,140
Net assets released from restrictions:			
Satisfaction of restrictions	25,144	(25,144)	-
	3,210,251	(21,644)	3,188,607
Total operating support and revenue			
Operating Expenses			
Program services	2,749,423	-	2,749,423
General and administrative	487,999	-	487,999
Fundraising	69,837	-	69,837
	3,307,259	-	3,307,259
Total operating expenses			
Change in Net Assets from Operations	(97,008)	(21,644)	(118,652)
Nonoperating activities			
Interest income	534	-	534
	534	-	534
Change in Net Assets	(96,474)	(21,644)	(118,118)
Net Assets at Beginning of Year	803,317	25,144	828,461
Net Assets at End of Year	\$ 706,843	\$ 3,500	\$ 710,343

See accompanying notes to financial statements

GULFCOAST LEGAL SERVICES, INC.
STATEMENT OF FUNCTIONAL EXPENSES
YEAR ENDED SEPTEMBER 30, 2019

	Program Services	Supporting Services		Total
		General and Administrative	Fundraising	
Personnel expenses				
Lawyers' salaries	\$ 1,004,095	\$ 8,852	\$ 7	\$ 1,012,954
Paralegal salaries	423,391	5,395	-	428,786
Other salaries	93,695	223,091	42,506	359,292
Employee benefits	359,126	32,655	3,327	395,108
Total personnel costs	1,880,307	269,993	45,840	2,196,140
Other expenses				
In-kind expense	268,555	39,674	390	308,619
Space and occupancy	152,091	25,381	-	177,472
Repairs and maintenance	103,599	24,007	812	128,418
Grants and allocations	99,937	-	-	99,937
Accounting, audit and legal	5,780	85,885	-	91,665
Travel, training and conferences	60,058	9,523	5,658	75,239
Telephone	20,092	7,990	-	28,082
Insurance	47,349	1,635	183	49,167
Advertising	13,121	1,732	991	15,844
Depreciation	34,890	5,544	975	41,409
Postage and printing	14,538	1,533	13,047	29,118
Office supplies	13,078	4,179	672	17,929
Contract services to program	9,424	797	200	10,421
Dues and fees	16,149	2,144	75	18,368
Other	3,988	5,927	375	10,290
Client litigation	6,467	-	-	6,467
Bank charges	-	2,055	619	2,674
Total other expenses	869,116	218,006	23,997	1,111,119
Total functional expenses	\$ 2,749,423	\$ 487,999	\$ 69,837	\$ 3,307,259

See accompanying notes to financial statements

GULFCOAST LEGAL SERVICES, INC.
STATEMENT OF CASH FLOWS
YEAR ENDED SEPTEMBER 30, 2019

Cash Flows from Operating Activities:	
Change in net assets	\$ (118,118)
Adjustments to reconcile change in net assets to net cash used in operating activities:	
Depreciation	41,409
(Increase) Decrease in:	
Grants receivable	(254,754)
Other accounts receivable	2,345
Prepays and other	40,167
(Decrease) Increase in:	
Accounts payable	(2,011)
Accrued liabilities	(43,396)
Deferred revenue	<u>(17,558)</u>
Net cash used in operating activities	(351,916)
Cash Flows from Investing Activities:	
Acquisition of property and equipment	(19,078)
Return of security deposit	<u>1,242</u>
Net cash used in investing activities	<u>(17,836)</u>
Net Decrease in Cash and Cash Equivalents	(369,752)
Cash and Cash Equivalents and Restricted Cash at Beginning of Year (including restricted cash of \$149,200 at September 30, 2018)	<u>697,172</u>
Cash and Cash Equivalents and Restricted Cash at End of Year (including restricted cash of \$128,779 at September 30, 2019)	<u><u>\$ 327,420</u></u>

See accompanying notes to financial statements

**GULFCOAST LEGAL SERVICES, INC.
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2019**

NOTE A - NATURE OF ORGANIZATION

Gulfcoast Legal Services, Inc. (the Organization) is a tax exempt, Florida not-for-profit corporation organized for the purpose of providing high quality legal assistance in civil matters to vulnerable individuals, families, and communities financially eligible in Pinellas, Sarasota, Hillsborough, Pasco, and Manatee Counties, Florida.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Presentation

The accompanying financial statements of the Organization have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (US GAAP), which require the Organization to report information regarding its financial position and activities according to the following net asset classifications:

Net assets without donor restrictions: Net assets that are not subject to donor-imposed restrictions and may be expended for any purpose in performing the primary objectives of the Organization. These net assets may be used at the discretion of the Organization's management and the board of directors.

Net assets with donor restrictions: Net assets subject to stipulations imposed by donors, and grantors. Some donor restrictions are temporary in nature; those restrictions will be met by action of the Organization or by the passage of time. Other donor restrictions are perpetual in nature, whereby the donor has stipulated the funds be maintained in perpetuity.

Donor restricted contributions are reported as increases in net assets with donor restrictions. When a restriction expires, net assets are reclassified from net assets with donor restriction to net assets without donor restrictions in the statement of activities.

Measure of Operations

The statement of activities reports all changes in net assets, including changes in net assets from operating and nonoperating activities. Operating activities consist of those items attributable to the Organization's ongoing legal assistance services. Nonoperating activities are limited to resources that generate return from investments and cash and other activities considered to be more unusual or nonrecurring in nature.

Use of Estimates

The preparation of financial statements in conformity with US GAAP requires management to make estimates and assumptions that affect certain reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements. Estimates also affect the reported amounts of revenue and expenses during the reporting period. Accordingly, actual results could differ from those estimates. Significant estimates include the collectability of receivables, determination of the useful lives of the property and equipment, and allocation of functional expenses.

GULFCOAST LEGAL SERVICES, INC.
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2019

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - CONTINUED

Cash and Cash Equivalents

Cash and cash equivalents consist of cash on deposit with financial institutions. The Organization considers all highly liquid assets with an initial maturity of three months or less as cash and cash equivalents.

Financial instruments which potentially subject the Organization to concentrations of credit risk consist principally of cash held in financial institutions in excess of federally-insured limits. From time to time throughout the year ended September 30, 2019, the Organization's cash balance may have exceeded the federally insured limit. However, the Organization has not experienced and does not expect to incur any losses in such accounts.

Restricted Cash

Restricted cash consists of monies received in advance from a funder that is restricted for use only on the underlying grant activities.

Grants Receivable

Grants receivable represent amounts due from various federal, state, and local agencies for purposes specified by each grant. Management monitors the collection status of its receivable balance on an ongoing basis.

The carrying amount of grants receivable is reduced by an allowance for credit losses that reflects management's best estimate of the amounts that will not be collected. Each balance is individually reviewed as deemed necessary. Based on management's assessment an estimate is made of the portion, if any, of the balance that will not be collected. Receivables are written off as a charge to the allowance for credit losses when, in management's estimation, it is probable that the receivable is worthless. Management considers all receivables to be collectible. As such, an allowance for doubtful accounts is not recorded in the accompanying financial statements.

Property and Equipment

Property and equipment are stated at cost, if purchased or at estimated fair value at the date of receipt, if acquired by gift. Expenditures in excess of \$1,000 with an estimated useful life in excess of one year are capitalized. Depreciation is calculated using the straight-line method over the useful lives of the respective assets ranging from 3 to 10 years for furniture and equipment, and 5 years for leasehold improvements (based on estimated term of lease).

Accrued Liabilities

Accrued liabilities consist of accruals for payroll and related expenses.

**GULFCOAST LEGAL SERVICES, INC.
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2019**

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - CONTINUED

Contributed Services

Amounts representing the estimated value of significant donated legal services are included as support and expenses in the financial statements. These hours are influenced by the complexity of the individual cases and the experience of the attorney, and therefore could fluctuate from year to year. The total hourly rate was estimated by the local bar association to be \$200 for 2019. Total contributed services included in revenues and expenses for the year ended September 30, 2019 were \$227,482.

Revenue Recognition

Contributions received are recorded as net assets without donor restrictions or net assets with donor restrictions, depending on the existence and/or nature of any donor-imposed restrictions. Contributions that are restricted by the donor are reported as an increase in net assets without donor restrictions if the restriction expires in the reporting period in which the contribution is recognized. All other donor restricted contributions are reported as an increase in net assets with donor restrictions, depending on the nature of the restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), net assets with donor restrictions are reclassified to net asset without donor restrictions and reported in the statement of activities as net assets released from restrictions.

Contributed property and equipment are recorded at fair value at the date of the donation. Contributions with donor-imposed stipulations regarding how long the contributed assets must be used are recorded as net assets with donor restrictions; otherwise, the contributions are recorded as net assets without donor restrictions.

Federal, state, and local government and other public grants that are indicative of exchange transactions are recognized as support when performance occurs pursuant to the contract agreement. Revenue under these contracts is deferred until earned. Certain grants which have attributes more consistent with contributions than exchange transactions are accounted for consistent with contributions. Amounts received for services not yet provided are included in deferred revenue in the accompanying statement of financial position.

**GULFCOAST LEGAL SERVICES, INC.
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2019**

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - CONTINUED

Functional Expenses

The costs of providing program and other activities have been summarized on a functional basis in the statement of activities and functional expenses. Certain costs have been allocated among program and supporting services benefited. Such allocations are determined by management on an equitable basis. Expenses are charged to program or supporting service based on specific identification when possible. The expenses that are allocated include the following:

<u>Expense</u>	<u>Method of Allocation</u>
Personnel expenses	Time and effort
Office expenses	Ratio of employee time per function
Operating insurance	Ratio of employee time per function
Other	Ratio of employee time per function
Repairs and maintenance	Ratio of employee time per function
Space and occupancy	Ratio of employee time per function
Accounting and audit	Ratio of employee time per function

Income Tax Status

The Organization is a not-for-profit organization that is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code. In addition, it has been determined by the Internal Revenue Service that the Organization is not a private foundation under Section 509(a) of the Code. Accordingly, no provision for income taxes has been recorded.

The Organization accounts for the effect of any uncertain tax positions based on a “more likely than not” threshold to the recognition of the tax positions being sustained based on the technical merits of the position under scrutiny by the applicable taxing authority. If a tax position or positions are deemed to result in uncertainties of those positions, the unrecognized tax benefit is estimated based on a “cumulative probability assessment” that aggregates the estimated tax liability for all uncertain tax positions.

The Organization has identified its tax status as a tax-exempt entity as its only significant tax position; however, the Organization has determined that such tax position does not result in an uncertainty requiring recognition. The Organization is not currently under examination by any taxing jurisdiction. The Organization’s federal returns are generally open for examination for three years following the date filed.

Impairment of Long-Lived Assets

Management reviews all long-lived assets for impairment whenever events or changes in circumstances indicate that the carrying amount of an asset may not be recoverable. Recoverability of assets to be held and used is measured by a comparison of the carrying amount of an asset to a real property appraisal. If the carrying amount of an asset exceeds its appraisal value, an impairment charge is recognized for the amount by which the carrying amount of the asset exceeds the fair value of the asset.

**GULFCOAST LEGAL SERVICES, INC.
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2019**

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - CONTINUED

Advertising Costs

Advertising costs are expensed as incurred and were \$15,844 for the year ended September 30, 2019.

NOTE C - AVAILABILITY AND LIQUIDITY

The following represents the Organization's financial assets available to meet general expenditures over the next twelve months at September 30:

	2019
Financial Assets:	
Cash and cash equivalents	\$ 198,641
Grants receivable	514,623
Other receivables	1,390
Total financial assets	714,654
Less Amounts Not Available to be Used Within One Year:	
Net assets with donor restrictions:	3,500
Less net assets with donor restrictions to be met in less than a year	(3,500)
	-
Financial assets available to meet general expenditures over the next twelve months	\$ 714,654

The Organization's goal is generally to maintain financial assets to meet 90 days of operating expenses. The restricted cash noted above is available to meet operating expenses over the next twelve months; however, the amounts are limited to use within a specific program. As part of its liquidity plan, excess cash is invested in a separate money market account. The Board of Directors has designated these net assets; the amounts are presented as a separate component of net assets without donor restrictions in the statement of financial position. As described in **NOTE E**, the Organization also has a \$200,000 line-of-credit available for use in meeting financial obligations.

**GULFCOAST LEGAL SERVICES, INC.
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2019**

NOTE D - PROPERTY AND EQUIPMENT

Property and equipment consisted of the following at September 30:

	2019
Furniture and fixtures	\$ 4,990
Office equipment	502
Leasehold improvements	74,071
Computer equipment	99,297
	178,860
Less accumulated depreciation	(132,103)
	\$ 46,757

NOTE E – LINE-OF-CREDIT

The Organization has a line-of-credit with a borrowing capacity of \$200,000 payable upon demand that matures in August 2020. The interest rate on this line-of-credit is the prime rate plus .55% (5.55% at September 30, 2019). There is no amount outstanding on the line-of-credit at September 30, 2019.

NOTE F - NET ASSETS

Net assets with donor restrictions were as follows for the year ended September 30:

	2019
Passage of Time	
General Donation	\$ 3,500

Net assets released from net assets with donor restrictions are as follows for the year ended September 30:

	2019
Satisfaction of Purpose Restrictions	
Enforcement and Education Regarding Fair Housing Act in Fort Myers, FL	\$ 25,144

NOTE G - CONCENTRATIONS

Federal, state, county, city, and other agencies award funds to the Organization for special purposes. During the year ended September 30, 2019, 48% of revenues were received from two funders.

At September 30, 2019, 77% of the grants receivable balance was due from one funder.

GULFCOAST LEGAL SERVICES, INC.
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2019

NOTE H - OPERATING LEASES

The Organization leases office space and office equipment under one long-term and various month-to-month operating leases. At September 30, 2019, the future minimum rental commitments under non-cancellable operating leases are as follows:

<u>Years ending September 30,</u>	<u>Amount</u>
2020	\$ 131,461
2021	45,950
2022	<u>35,232</u>
	<u>\$ 212,643</u>

The Organization's corporate office space is leased from Pinellas County. The lease expires in August 2020; thereafter, the lease may be renewed for one year upon written request from the Organization and approval of Pinellas County. The total rental expense for the year ended September 30, 2019 was approximately \$162,000. In-kind rental expense for various spaces for the year ended September 30, 2019 was approximately \$80,700 and was included in in-kind expense in the schedule of functional expenses.

NOTE I - EMPLOYEE BENEFIT PLAN

The Organization maintained a 403(b) (SEP/IRA) Tax Exempt Employer Contribution Retirement Plan (Original Plan) which was amended effective December 1, 2015 to a 403(b) Thrift Plan (Amended Plan). The Original Plan covered all permanent employees after one year of employment. The annual employer contribution was discretionarily determined by the Board of Directors. No amounts were contributed during the year ended September 30, 2019.

The Amended Plan covers substantially all permanent employees. The annual employer contribution is discretionarily determined by the Board of Directors. There was no contribution for the year ended September 30, 2019. Participants of the Original Plan are immediately vested in discretionary employer contributions. Other participants are 50% and 100% vested after one year and two years of service, respectively. Employee contributions are allowed under the Amended Plan.

NOTE J - NON-FEDERAL MATCH CERTAIN CONTRACTS

Several grant agreements require a match of the federal funds received in the form of cash and/or in-kind resources. For the year ended September 30, 2019, the Organization was in compliance with these matching requirements.

**GULFCOAST LEGAL SERVICES, INC.
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2019**

NOTE K - CONCENTRATION OF SOURCE OF SUPPLY OF LABOR

The Organization signed a collective bargaining agreement (CBA) with the National Organization of Legal Service Workers. The agreement period was from April 1, 2014 through March 31, 2017 with a one-year extension through March 31, 2018. The CBA was then temporarily extended, and a new agreement put in place that is effective June 1, 2018 through May 31, 2021. The CBA covers all full-time and regular part-time staff attorneys and supervising attorneys, law graduates, paralegals, legal secretaries and other support staff (representing approximately 71% of the Organization's employees). The Organization's other employees are not represented by a union.

NOTE L - SUBSEQUENT EVENTS

The Organization has evaluated all subsequent events through February 24, 2020, the date the financial statements were available to be issued. The Organization is not aware of any subsequent events which would require recognition or disclosure in the financial statements.

OTHER INFORMATION

GULF COAST LEGAL SERVICES, INC.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
YEAR ENDED SEPTEMBER 30, 2019

<u>Federal Agency</u> <u>Pass-Through Entity</u> <u>Federal Program</u>	<u>CFDA</u> <u>Number</u>	<u>Contract/</u> <u>Pass-Through Entity</u> <u>Identifying Number</u>	<u>Expenditures</u>
FEDERAL AWARDS:			
Department of Housing and Urban Development			
<u>Passed through Manatee County</u>			
Community Development Block Grants/Entitlement Grants	14.218	R-18-114	7,186
<u>Passed through City of Largo</u>			
Community Development Block Grants/Entitlement Grants	14.218	B18MC12028	27,999
<u>Passed through City of Clearwater</u>			
Community Development Block Grants/Entitlement Grants	14.218	GM20-9216-079	19,808
<u>Passed through City of Bradenton</u>			
Community Development Block Grants/Entitlement Grants	14.218	IDIS #641	9,336
			<u>64,329</u>
Department of Justice			
<u>Passed through Pinellas County</u>			
Services for Trafficking Victims	16.320	2015-VT-BX-K020	69,907
	16.320	2015-VT-BX-K020-SVS	88,730
			<u>158,637</u>
<u>Passed through Florida Department of Legal Affairs, Office of the Attorney General</u>			
Crime Victim Assistance	16.575	VOCA-2018-Gulfcoast Legal Services-00530	449,661
Crime Victim Assistance	16.575	VOCA-2018-Gulfcoast Legal Services-00551	231,391
Crime Victim Assistance	16.575	VOCA-2018-Gulfcoast Legal Services-00531	432,362
			<u>1,113,414</u>
<u>Passed through Florida Coalition Against Domestic Violence</u>			
Violence Against Women Formula Grants	16.588	19-2057-LCH	15,828
	16.588	20-2057-LCH	5,200
	16.588	19-2057-LS	52,677
	16.588	20-2057-LS	3,390
			<u>77,095</u>
			<u>1,349,146</u>
Department of the Treasury			
Low Income Taxpayer Clinics	21.008	18-LITCO349-01-01	32,657
	21.008	19-LITCO349-02-01	68,464
			<u>101,121</u>
Department of Health and Human Services			
<u>Passed through Area Agency on Aging of Pasco-Pinellas, Inc.</u>			
Special Programs for the Aging Title III, Part B Grants for Supportive Services and Senior Centers	93.044	EL017-GULF COAST LEGAL-2018	29,860
	93.044	EA019-GULF COAST LEGAL-2019	62,894
<u>Passed through Florida Rural Legal Service, Inc.</u>			
Special Programs for the Aging Title III, Part B Grants for Supportive Services and Senior Centers	93.044	n/a	26,216
<u>Passed through Senior Connection Center, Inc.</u>			
Special Programs for the Aging Title III, Part B Grants for Supportive Services and Senior Centers	93.044	OAA-2018-GLS	20,157
	93.044	OAA-2019-GLS	70,948
			<u>210,075</u>
<u>Passed through Area Agency on Aging of Pasco-Pinellas, Inc.</u>			
National Family Caregiver Support, Title III, Part E	93.052	EL017-GULF COAST LEGAL-2018	9,001
	93.052	EA019-GULF COAST LEGAL-2019	15,173
<u>Passed through Senior Connection Center, Inc.</u>			
National Family Caregiver Support, Title III, Part E	93.052	OAA-2018-GLS	5,716
	93.052	OAA-2019-GLS	14,888
			<u>44,778</u>
			<u>254,853</u>
Total expenditures of federal awards			\$ <u>1,769,449</u>

See notes to the schedule of expenditures of federal awards

GULFCOAST LEGAL SERVICES, INC.
NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
YEAR ENDED SEPTEMBER 30, 2019

BASIS OF PRESENTATION

The accompanying Schedule of Expenditures of Federal Awards (the Schedule) includes the federal grant activity of Gulfcoast Legal Services, Inc. under programs of the federal government for the year ended September 30, 2019. The information in this schedule is presented in accordance with accounting principles generally accepted in the United States of America as applicable to non-profit organizations and Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*. Because the Schedule presents only a selected portion of the operations of Gulfcoast Legal Services, Inc., it is not intended to and does not present the financial position, changes in net assets or cash flows of Gulfcoast Legal Services, Inc.

SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance wherein certain types of expenditures are not allowable or are limited as to reimbursement. The Organization elected to use the 10% de minimis indirect cost rate allowed under the Uniform Guidance.

CONTINGENCIES

Expenditures incurred by the Organization are subject to audit and possible disallowance by the grantor agency. Management believes that if audited, any adjustments for disallowed expenses would be immaterial in amount.

See independent auditor's report



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**INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER
FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER
MATTERS BASED ON AN AUDIT OF FINANCIAL
STATEMENTS PERFORMED IN ACCORDANCE WITH
GOVERNMENT AUDITING STANDARDS**

To the Board of Directors
Gulfcoast Legal Services, Inc.

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of Gulfcoast Legal Services, Inc. (the Organization), which comprise the statement of financial position as of September 30, 2019, and the related statements of activities, cash flows, and functional expenses for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated February 24, 2020.

Internal Control over Financial Reporting

In planning and performing our audit of the financial statements, we considered the Organization's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control. Accordingly, we do not express an opinion on the effectiveness of the Organization's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. *A material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the Organization's financial statements will not be prevented or detected and corrected on a timely basis. *A significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

CONTINUED

**INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER
FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER
MATTERS BASED ON AN AUDIT OF FINANCIAL
STATEMENTS PERFORMED IN ACCORDANCE WITH
GOVERNMENT AUDITING STANDARDS - CONTINUED**

Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Organization's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Organization's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

PDR CPAs + Advisors

Oldsmar, Florida
February 24, 2020



**INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE FOR EACH
MAJOR FEDERAL PROGRAM AND ON INTERNAL CONTROL
OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE**

To the Board of Directors
Gulfcoast Legal Services, Inc.

Report on Compliance for Each Major Federal Program

We have audited Gulfcoast Legal Services, Inc.'s (the Organization) compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of the Organization's major federal programs for the year ended September 30, 2019. The Organization's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

Management's Responsibility

Management is responsible for compliance with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal programs.

Auditor's Responsibility

Our responsibility is to express an opinion on compliance for each of the Organization's major federal programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about the Organization's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination of the Organization's compliance.

Opinion on Each Major Federal Program

In our opinion, the Organization complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended September 30, 2019.

CONTINUED

**INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE FOR EACH
MAJOR FEDERAL PROGRAM AND ON INTERNAL CONTROL
OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE - CONTINUED**

Report on Internal Control over Compliance

Management of the Organization is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered the Organization's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of the Organization's internal control over compliance.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. *A material weakness in internal control over compliance* is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. *A significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weakness or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

PDR CPAs + Advisors

Oldsmar, Florida
February 24, 2020

**GULFCOAST LEGAL SERVICES, INC.
SCHEDULE OF FINDINGS AND QUESTIONED COSTS
FOR THE YEAR ENDED SEPTEMBER 30, 2019**

Type of auditor's report issued: Unmodified

Internal control over financial reporting:

Material weakness(es) identified? yes no

Significant deficiency(ies) identified not considered to be material weakness(es)? yes none reported

Noncompliance material to financial statements noted? yes no

Federal Awards Section

Internal control over major federal programs:

Material weakness(es) identified? yes no

Significant deficiency(ies) identified not considered to be material weakness(es)? yes none reported

Type of auditor's report on compliance for major federal programs: Unmodified

Any audit findings disclosed that are required to be reported in accordance with 2 CFR part 200.516(a) of the Uniform Guidance? yes no

Identification of major federal programs:

CFDA Numbers	Name of Federal Program
16.575	Crime Victim Assistance

Dollar threshold used to distinguish between type A and type B Federal programs \$ 750,000

Auditee qualified as low-risk auditee for federal purposes? yes no

**GULFCOAST LEGAL SERVICES, INC.
SCHEDULE OF FINDINGS AND QUESTIONED COSTS - CONTINUED
FOR THE YEAR ENDED SEPTEMBER 30, 2019**

Part II - Schedule of Financial Statement Findings

This section identifies the significant deficiencies, material weakness, and instances of noncompliance related to the financial statements that are required to be reported in accordance with *Government Auditing Standards*.

There were no reportable findings.

Part III - Federal and State Award Findings and Questioned Costs

This section identifies the significant deficiencies, material weakness, and instances of noncompliance, including questioned costs, related to the audit of major federal programs, as required to be reported by the Uniform Guidance.

There were no reportable findings.

Summary Schedule of Prior Audit Findings

A Summary Schedule of Prior Audit Findings is not necessary since there were no prior year audit findings related to a major federal program.

SUPPLEMENTARY INFORMATION

**GULFCOAST LEGAL SERVICES, INC.
SCHEDULE OF FUNCTIONAL EXPENSES – DEPARTMENT OF
ELDER AFFAIRS
YEAR ENDED SEPTEMBER 30, 2019**

<u>Expenses</u>	<u>Legal Services</u>	<u>Fundraising</u>	<u>Management & General</u>	<u>Total Supporting Services</u>	<u>Total</u>
Salaries	\$ 1,521,181	\$ 42,513	\$ 237,338	\$ 279,851	\$ 1,801,032
Payroll taxes and benefits	359,126	3,327	32,655	35,982	395,108
Travel	60,058	5,658	9,523	15,181	75,239
Communication/postage	34,630	13,047	9,523	22,570	57,200
Utilities*	152,091	-	25,381	25,381	177,472
Insurance	47,349	183	1,635	1,818	49,167
Maintenance and repair	103,599	812	24,007	24,819	128,418
Printing/supplies	13,078	672	4,179	4,851	17,929
Professional fees/legal/audit	15,204	200	86,682	86,882	102,086
Subcontractors	99,937	-	-	-	99,937
Depreciation	34,890	975	5,544	6,519	41,409
Other **	308,280	2,450	51,532	53,982	362,262
Total expenses	<u>2,749,423</u>	<u>69,837</u>	<u>487,999</u>	<u>557,836</u>	<u>3,307,259</u>
Allocation of management and general	<u>475,692</u>	<u>12,307</u>	<u>(487,999)</u>	<u>(475,692)</u>	<u>-</u>
Total expenses after allocation	<u>\$ 3,225,115</u>	<u>\$ 82,144</u>	<u>\$ -</u>	<u>\$ 82,144</u>	<u>\$ 3,307,259</u>
Total units (hours)	<u>41,890</u>	N/A	N/A	N/A	N/A
Recalculated total unit cost (per case hour)	<u>\$ 77</u>				

* Includes rental expense of \$120,118, equipment lease of \$42,899, minor equipment of \$14,416, and electricity of \$39.

** Includes in-kind expenses of \$308,619, litigation expenses of \$6,467, bank fees of \$2,674, dues and fees of \$18,368, online research of \$4,062, advertising of \$15,844, and other expenses of \$6,228.

See independent auditor's report



Oldsmar / Tampa / St. Petersburg

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813-498-1294
727-784-5491 Fax

www.pdr-cpa.com

October 7, 2019

Tammy Greer, MPA, Executive Director
Shaina Bent, President of the Board of Directors
Gulfcoast Legal Services, Inc.
501 First Avenue North, Suite 420
PO Box 358
St. Petersburg, Florida 33731

Dear Tammy and Shaina:

We are pleased to confirm our understanding of the services we are to provide for Gulfcoast Legal Services, Inc. for the year ended September 30, 2019.

We will audit the financial statements of Gulfcoast Legal Services, Inc. (the Organization) which comprise the statement of financial position as of September 30, 2019, the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements. Also, the following supplementary information accompanying the financial statements will be subjected to the auditing procedures applied in our audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America, and we will provide an opinion on it in relation to the financial statements as a whole, in a report combined with our auditor's report on the financial statements:

1. Schedule of expenditures of federal awards
 2. Notes to schedule of expenditures of federal awards
 3. Schedule of support, revenue and expenses and changes in net assets for IOTA funds, if applicable
 4. Schedule of functional expenses - Department of Elder Affairs required format
-

Audit Objectives

The objective of our audit is the expression of an opinion about whether your financial statements are fairly presented, in all material respects, in conformity with U.S. generally accepted accounting principles and to report on the fairness of the supplementary information referred to in the second paragraph when considered in relation to the financial statements taken as a whole. The objective also includes reporting on:

- Internal control related to the financial statements and compliance with the provisions of laws, regulations, contracts or award agreements, noncompliance with which could have a material effect on the financial statements in accordance with *Government Auditing Standards*.
- Internal control over compliance related to major programs and an opinion (or disclaimer of opinion) on compliance with federal statutes, regulations, and the terms and conditions of federal awards that could have a direct and material effect on each major program in accordance with the Single Audit Act Amendments of 1996 and Title 2 U.S. *Code of Federal Regulations* (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance).

The *Government Auditing Standards* report on internal control over financial reporting and on compliance and other matters will include a paragraph that states that (1) the purpose of the report is solely to describe the scope of testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance, and (2) the report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. The Uniform Guidance report on internal control over compliance will include a paragraph that states that the purpose of the report on internal control over compliance is solely to describe the scope of testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Both reports will state that the report is not suitable for any other purpose.

Our audit will be conducted in accordance with auditing standards generally accepted in the United States of America; the standards for financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; the Single Audit Act Amendments of 1996; and the provisions of the Uniform Guidance, and will include tests of accounting records, a determination of major program(s) in accordance with the Uniform Guidance, and other procedures we consider necessary to enable us to express such an opinion. We will issue written reports upon completion of our Single Audit. Our reports will be addressed to the Board of Directors of Gulfcoast Legal Services, Inc. We cannot provide assurance that an unmodified opinion will be expressed. Circumstances may arise in which it is necessary for us to modify our opinion or add an emphasis-of-matter or other-matter paragraph. If our opinion on the financial statements or the Single Audit compliance opinion is other than unmodified, we will discuss the reasons with management in advance. If, for any reason, we are unable to complete the audit or are unable to form or have not formed an opinion, we may decline to express an opinion or issue a report, or we may withdraw from this engagement.

Audit Procedures - General

An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements; therefore, our audit will involve judgment about the number of transactions to be examined and the areas to be tested. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements. We will plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement, whether from (1) errors, (2) fraudulent financial reporting, (3) misappropriation of assets, or (4) violations of laws or governmental regulations that are attributable to the Organization or to acts by management or employees acting on behalf of the Organization. Because the determination of abuse is subjective, *Government Auditing Standards* do not expect auditors to provide reasonable assurance of detecting abuse.

Because of the inherent limitations of an audit, combined with the inherent limitations of internal control, and because we will not perform a detailed examination of all transactions, there is a risk that material misstatements or noncompliance may exist and not be detected by us, even though the audit is properly planned and performed in accordance with U.S. generally accepted auditing standards and *Government Auditing Standards*. In addition, an audit is not designed to detect immaterial misstatements or violations of laws or governmental regulations that do not have a direct and material effect on the financial statements or on major programs. However, we will inform the appropriate level of management of any material errors, any fraudulent financial reporting, or misappropriation of assets that come to our attention. We will also inform the appropriate level of management of any violations of laws or governmental regulations that come to our attention, unless clearly inconsequential, and of any material abuse that comes to our attention. We will include such matters in the reports required for a Single Audit. Our responsibility as auditors is limited to the period covered by our audit and does not extend to any later periods for which we are not engaged as auditors.

Our procedures will include tests of documentary evidence supporting the transactions recorded in the accounts, tests of the physical existence of inventories, and direct confirmation of receivables and certain other assets and liabilities by correspondence with selected individuals, funding sources, creditors, and financial institutions. We will request written representations from the Organization's attorneys as part of the engagement, and they may bill the Organization for responding to this inquiry. At the conclusion of our audit, we will require certain written representations from you about your responsibilities for the financial statements; schedule of expenditures of federal awards; federal award programs; compliance with laws, regulations, contracts, and grant agreements; and other responsibilities required by generally accepted auditing standards.

Audit Procedures - Internal Control

Our audit will include obtaining an understanding of the Organization and its environment, including internal control, sufficient to assess the risks of material misstatement of the financial statements and to design the nature, timing, and extent of further audit procedures. Tests of controls may be performed to test the effectiveness of certain controls that we consider relevant to preventing and detecting errors and fraud that are material to the financial statements and to preventing and detecting misstatements resulting from illegal acts and other noncompliance matters that have a direct and material effect on the financial statements. Our tests, if performed, will be less in scope than would be necessary to render an opinion on internal control and, accordingly, no opinion will be expressed in our report on internal control issued pursuant to *Government Auditing Standards*.

As required by the Uniform Guidance, we will perform tests of controls over compliance to evaluate the effectiveness of the design and operation of controls that we consider relevant to preventing or detecting material noncompliance with compliance requirements applicable to each major federal award program. However, our tests will be less in scope than would be necessary to render an opinion on those controls and, accordingly, no opinion will be expressed in our report on internal control issued pursuant to the Uniform Guidance.

An audit is not designed to provide assurance on internal control or to identify significant deficiencies or material weaknesses. Accordingly, we will express no such opinion. However, during the audit, we will communicate to management and those charged with governance internal control related matters that are required to be communicated under AICPA professional standards, *Government Auditing Standards*, and the Uniform Guidance.

Audit Procedures - Compliance

As part of obtaining reasonable assurance about whether the financial statements are free of material misstatement, we will perform tests of Gulfcoast Legal Services, Inc.'s compliance with provisions of applicable laws, regulations, contracts, and agreements, including grant agreements. However, the objective of those procedures will not be to provide an opinion on overall compliance, and we will not express such an opinion in our report on compliance issued pursuant to *Government Auditing Standards*.

The Uniform Guidance requires that we also plan and perform the audit to obtain reasonable assurance about whether the auditee has complied with applicable federal statutes, regulations, and the terms and conditions of federal awards applicable to major programs. Our procedures will consist of tests of transactions and other applicable procedures described in the *OMB Compliance Supplement* for the types of compliance requirements that could have a direct and material effect on each of the Organization's major programs. The purpose of these procedures will be to express an opinion on Gulfcoast Legal Services, Inc.'s compliance with requirements applicable to each of its major programs in our report on compliance issued pursuant to the Uniform Guidance.

Other Services

We will prepare the Organization's Federal tax return (IRS 990), 990-T, and F-1120 for the year ended September 30, 2019 based on information provided by you. We will also assist in preparing the financial statements, schedule of expenditures of federal awards, and related notes of the Organization in conformity with U.S. generally accepted accounting principles and the Uniform Guidance based on information provided by you. These nonaudit services do not constitute an audit under *Government Auditing Standards* and such services will not be conducted in accordance with *Government Auditing Standards*.

We will perform the services in accordance with applicable professional standards, including the Statements on Standards for Tax Services issued by the American Institute of Certified Public Accountants. The other services are limited to the financial statement, schedule of expenditures of federal awards, related notes, and tax services previously defined. We, in our sole professional judgment, reserve the right to refuse to perform any procedure or take any action that could be construed as assuming management responsibilities. We will advise management with regard to tax positions taken in the preparation of the tax return, but management must make all decisions with regard to those matters.

Management Responsibilities

Management is responsible (1) designing, implementing, establishing, and maintaining effective internal controls relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error, including internal controls over federal awards, and for evaluating and monitoring ongoing activities to help ensure that appropriate goals and objectives are met; (2) following laws and regulations; (3) ensuring that there is reasonable assurance that government programs are administered in compliance with compliance requirements; and (4) ensuring that management and financial information is reliable and properly reported. Management is also responsible for implementing systems designed to achieve compliance with applicable laws, regulations, contracts, and grant agreements. You are also responsible for the selection and application of accounting principles; for the preparation and fair presentation of the financial statements, schedule of expenditures of federal awards, and all accompanying information in conformity with U.S. generally accepted accounting principles; and for compliance with applicable laws and regulations (including federal statutes) and the provisions of contracts and grant agreements (including award agreements). Your responsibilities also include identifying significant contractor relationships in which the contractor has responsibility for program compliance and for the accuracy and completeness of that information.

Management is also responsible for making all financial records and related information available to us, and for the accuracy and completeness of that information. You are also responsible for providing us with (1) access to all information of which you are aware that is relevant to the preparation and fair presentation of the financial statements, (2) access to personnel, accounts, books, records, supporting documentation, and other information as needed to perform an audit under the Uniform Guidance, (3) additional information that we may request for the purpose of the audit, and (4) unrestricted access to persons within the organization from whom we determine it necessary to obtain audit evidence.

Your responsibilities include adjusting the financial statements to correct material misstatements and confirming to us in the management representation letter that the effects of any uncorrected misstatements aggregated by us during the current engagement and pertaining to the latest period presented are immaterial, both individually and in the aggregate, to the financial statements as a whole.

You are responsible for the design and implementation of programs and controls to prevent and detect fraud, and for informing us about all known or suspected fraud affecting the Organization involving (1) management, (2) employees who have significant roles in internal control, and (3) others where the fraud could have a material effect on the financial statements. Your responsibilities include informing us of your knowledge of any allegations of fraud or suspected fraud affecting the Organization received in communications from employees, former employees, grantors, regulators, or others. In addition, you are responsible for identifying and ensuring that the Organization complies with applicable laws, regulations, contracts, agreements, and grants. Management is also responsible for taking timely and appropriate steps to remedy fraud and noncompliance with provisions of laws, regulations, contracts, and grant agreements, or abuse that we report. Additionally, as required by the Uniform Guidance, it is management's responsibility to evaluate and monitor noncompliance with federal statutes, regulations, and the terms and conditions of federal awards; take prompt action when instances of noncompliance are identified including noncompliance identified in audit findings; promptly follow up and take corrective action on reported audit findings; and prepare a summary schedule of prior audit findings and a separate corrective action plan, if applicable.

You are responsible for identifying all federal awards received and understanding and complying with the compliance requirements and for the preparation of the schedule of expenditures of federal awards (including notes and noncash assistance received) in conformity with the Uniform Guidance. You agree to include our report on the schedule of expenditures of federal awards in any document that contains and indicates that we reported on the schedule of expenditures of federal awards. You also agree to include the audited financial statements with any presentation of the schedule of expenditures of federal awards that includes our report thereon. Your responsibilities include acknowledging to us in the representation letter that (1) you are responsible for presentation of the schedule of expenditures of federal awards in accordance with the Uniform Guidance; (2) you believe the schedule of expenditures of federal awards, including its form and content, is stated fairly in accordance with the Uniform Guidance; (3) the methods of measurement or presentation have not changed from those used in the prior period (or, if they have changed, the reasons for such changes); and (4) you have disclosed to us any significant assumptions or interpretations underlying the measurement or presentation of the schedule of expenditures of federal awards.

You are also responsible for the preparation of the other supplementary information, which we have been engaged to report on, in conformity with U.S. generally accepted accounting principles. You agree to include our report on the supplementary information in any document that contains, and indicates that we have reported on, the supplementary information. You also agree to include the audited financial statements with any presentation of the supplementary information that includes our report thereon.

Your responsibilities include acknowledging to us in the written representation letter that (1) you are responsible for presentation of the supplementary information in accordance with GAAP; (2) you believe the supplementary information, including its form and content, is fairly presented in accordance with GAAP; (3) the methods of measurement or presentation have not changed from those used in the prior period (or, if they have changed, the reasons for such changes); and (4) you have disclosed to us any significant assumptions or interpretations underlying the measurement or presentation of the supplementary information.

Management is responsible for establishing and maintaining a process for tracking the status of audit findings and recommendations. Management is also responsible for identifying and providing report copies of previous financial audits, attestation engagements, performance audits, or other studies related to the objectives discussed in the Audit Objectives section of this letter. This responsibility includes relaying to us corrective actions taken to address significant findings and recommendations resulting from those audits, attestation engagements, performance audits, or studies. You are also responsible for providing management's views on our current findings, conclusions, and recommendations, as well as your planned corrective actions for the report, and for the timing and format for providing that information.

You agree to assume all management responsibilities relating to the tax services, financial statements, schedule of expenditures of federal awards, related notes, and any other nonaudit services we provide. You will be required to acknowledge in the management representation letter the tax services provided and our assistance with preparation of the financial statements, schedule of expenditures of federal awards, and related notes and that you have evaluated the adequacy of our services and have reviewed and approved the results of the services, the financial statements, schedule of expenditures of federal awards, and related notes prior to their issuance and have accepted responsibility for them. Further, you agree to oversee the nonaudit services by designating an individual, preferably from senior management, with suitable skill, knowledge, or experience; evaluate the adequacy and results of the services; and accept responsibility for them.

Engagement Administration, Fees, and Other

We may from time to time and depending on the circumstances, use third-party service providers in serving your account. We may share confidential information about you with these service providers, but remain committed to maintaining the confidentiality and security of your information. Accordingly, we maintain internal policies, procedures, and safeguards to protect the confidentiality of your personal information. In addition, we will secure confidentiality agreements with all service providers to maintain the confidentiality of your information and we will take reasonable precautions to determine that they have appropriate procedures in place to prevent the unauthorized release of your confidential information to others. In the event that we are unable to secure an appropriate confidentiality agreement, you will be asked to provide your consent prior to the sharing of your confidential information with the third-party service provider. Furthermore, we will remain responsible for the work provided by any such third-party service providers.

We understand that your employees will prepare all cash, accounts receivable, and other confirmations we request and will locate any documents selected by us for testing.

At the conclusion of the engagement, we will complete the appropriate sections of the Data Collection Form that summarizes our audit findings. It is management's responsibility to electronically submit the reporting package (including financial statements, schedule of expenditures of federal awards, summary schedule of prior audit findings, auditor's reports, and corrective action plan) along with the Data Collection Form to the federal audit clearinghouse. We will coordinate with you the electronic submission and certification. The Data Collection Form and the reporting package must be submitted within the earlier of 30 calendar days after receipt of the auditor's reports or nine months after the end of the audit period.

We will provide copies of our reports to the Organization; however, management is responsible for distribution of the reports and the financial statements. Unless restricted by law or regulation, or containing privileged and confidential information, copies of our reports are to be made available for public inspection.

The audit documentation for this engagement is the property of PDR CPAs + Advisors and constitutes confidential information. However, subject to applicable laws and regulations, audit documentation and appropriate individuals will be made available upon request and in a timely manner to federal agency providing direct or indirect funding, or the U.S. Government Accountability Office for purposes of a quality review of the audit, to resolve audit findings, or to carry out oversight responsibilities. We will notify you of any such request. If requested, access to such audit documentation will be provided under the supervision of PDR CPAs + Advisors personnel. Furthermore, upon request, we may provide copies of selected audit documentation to the aforementioned parties. These parties may intend, or decide, to distribute the copies or information contained therein to others, including other governmental agencies.

The audit documentation for this engagement will be retained for a minimum of five years after the report release date or for any additional period requested by the federal agency providing direct or indirect funding. If we are aware that a federal awarding agency, pass-through entity, or auditee is contesting an audit finding, we will contact the party(ies) contesting the audit finding for guidance prior to destroying the audit documentation.

Mary Brown is the engagement shareholder and is responsible for supervising the engagement and signing the reports or authorizing another individual to sign them. We expect to begin our audit in November 2019.

Parties to this engagement agree that any dispute that may arise regarding the meaning, performance, or enforcement of this engagement will, first, be submitted to mediation upon the written request of any party to the engagement. All mediations initiated as a result of this engagement shall be administered by the American Arbitration Association (AAA). The results of this mediation shall be binding only upon agreement of each party to be bound. Costs of any mediation proceeding shall be shared equally by both parties.

Our fees for these services will generally be based on the actual time spent at our standard hourly rates. Our standard hourly rates vary according to the degree of responsibility involved and the experience level of the personnel assigned to the engagement. However, fees might also reflect other relevant factors, including the level of skill required to perform the work, the level of risk involved, and time limitations imposed either by you or the circumstances. We have set the audit fee at \$17,000 and the Single Audit procedures at an additional \$6,000. This estimate is based upon anticipated cooperation from your personnel, adherence to the deadlines as presented in the Request list, and the assumption that unexpected circumstances will not be encountered during the audit engagement. If significant additional time is necessary or if the deadlines are not met, we will keep you informed of any problems we encounter and our fees will be adjusted accordingly.

We will also prepare the Federal Form 990, 990-T, and F-1120 for Gulfcoast Legal Services, Inc. Our total fee for the tax return will be \$2,700.

Our invoices will be rendered each month as work progresses and are payable upon receipt. A final invoice will be rendered upon completion of the engagement that is payable upon receipt of the financial statements. A one and one-half percent per month service charge is assessed for invoices outstanding after 60 days. In accordance with our firm policy, work may be suspended if your account becomes 60 days or more overdue and will not be resumed until your account is paid in full. Additionally, we will not be able to deliver either a draft or final financial statement if any account balance is outstanding for services rendered under this agreement.

If we elect to terminate our services for nonpayment, our engagement will be deemed to have been completed upon written notification of termination, even if we have not completed our report. You will be obligated to compensate us for all time expended and to reimburse us for all out-of-pocket expenditures through the date of termination.

This engagement includes only those services specifically described in this letter. Any additional services will be separately invoiced at our standard rates.

Government Auditing Standards require that we provide you with a copy of our most recent external peer review report and any letter of comment, and any subsequent peer review reports and letters of comment received during the period of the contract. Our 2018 peer review report accompanies this letter.

We appreciate the opportunity to be of service to you and believe this letter accurately summarizes the significant terms of our engagement. If you have any questions, please let us know. If you are in agreement with the terms of our engagement as described in this letter, please sign the enclosed copy and return it to us.

Very truly yours,

PDR CPAs + Advisors



Mary Brown
Certified Public Accountant

RESPONSE:

This letter correctly sets forth the understanding of Gulfcoast Legal Services, Inc. and is accepted by us.

Gulfcoast Legal Services, Inc.

Date: 10-09-2019



Tammy Greer, MPA, Executive Director

Date: _____

Shaina Bent, President of the Board of Directors



Report on the Firm's System of Quality Control

December 12, 2018

To the Shareholders of PDR CPAs + Advisors
And the Peer Review Committee of the Florida Institute of CPAs

We have reviewed the system of quality control for the accounting and auditing practice of PDR CPAs + Advisors (the firm) in effect for the year ended June 30, 2018. Our peer review was conducted in accordance with the Standards for Performing and Reporting on Peer Reviews established by the Peer Review Board of the American Institute of Certified Public Accountants (Standards).

A summary of the nature, objectives, scope, limitations of, and the procedures performed in a System Review as described in the Standards may be found at www.aicpa.org/prsummary. The summary also includes an explanation of how engagements identified as not performed or reported in conformity with applicable professional standards, if any, are evaluated by a peer reviewer to determine a peer review rating.

Firm's Responsibility

The firm is responsible for designing a system of quality control and complying with it to provide the firm with reasonable assurance of performing and reporting in conformity with applicable professional standards in all material respects. The firm is also responsible for evaluating actions to promptly remediate engagements deemed as not performed or reported in conformity with professional standards, when appropriate, and for remediating weaknesses in its system of quality control, if any.

Peer Reviewer's Responsibility

Our responsibility is to express an opinion on the design of the system of quality control and the firm's compliance therewith based on our review.

Required Selections and Considerations

Engagements selected for review included an engagement performed under *Government Auditing Standards* including a compliance audit under the Single Audit Act and an audit of an employee benefit plan.

As a part of our peer review, we considered reviews by regulatory entities as communicated by the firm, if applicable, in determining the nature and extent of our procedures.

Opinion

In our opinion, the system of quality control for the accounting and auditing practice of PDR CPAs + Advisors in effect for the year ended June 30, 2018, has been suitably designed and complied with to provide the firm with reasonable assurance of performing and reporting in conformity with applicable professional standards in all material respects. Firms can receive a rating of *pass*, *pass with deficiency(ies)*, or *fail*. PDR CPAs + Advisors has received a peer review rating of *pass*.

Gregory, Sharer & Stuart, P.A.



Cover Sheet for PPE Reimbursements

The receipts below are for costs incurred for PPE. All costs included in this budget have been prorated to only include Pinellas County PPE. These costs were not part of the approved 2019-20 budget and were incurred to keep staff and clients safe after we reopened our Pinellas Office following the stay at home orders. Detailed information is below:

Gulfcoast Legal Services, Inc.						
Account Distribution Report						
Transaction	AP Transaction	Transaction Type	Post Date	Debit Amount	Pinellas Portion Amount	NOTES
Date	Number					
1-6130-1-98, Supplies						
05/01/2020	2020-05 Amazon	Invoice	05/01/2020	\$71.98	\$52.67	Face Masks
05/21/2020	2020-05 Big frog	Invoice	05/21/2020	\$500.00	\$365.85	Face Masks
05/14/2020	2020-05 DGS	Invoice	05/14/2020	\$624.01	\$457.04	Sneeze guards
05/28/2020	2020-06 Amazon	Invoice	05/28/2020	\$54.99	\$27.50	Hand Sanitizer- 2 gallons
06/02/2020	2020-06 Five Below	Invoice	06/02/2020	\$24.61	\$11.61	Sanitizer dispensers
06/02/2020	2020-06 Amazon2	Invoice	06/02/2020	\$119.96	\$59.98	Face Masks
06/02/2020	2020-06 Amazon3	Invoice	06/02/2020	\$119.96	\$92.47	Soap dispensers
06/03/2020	2020-06 Amazon4	Invoice	06/03/2020	\$147.50	\$118.00	Social distancing floor markers
06/04/2020	2020-06 Amazon 6	Invoice	06/04/2020	\$45.98	\$22.99	Gloves
06/05/2020	2020-06 Amazon7	Invoice	06/05/2020	\$15.96	\$3.99	Conversion chart for temporal scanner
06/05/2020	2020-06 Amazon 8	Invoice	06/05/2020	\$38.48	\$22.53	Spray cleaning bottles and soap dispensers
<i>Totals for 1-6130-1-98, Supplies:</i>				\$1,763.43	\$1,234.63	
1-6130-1-99, Supplies						
04/07/2020	2037650-1	Invoice	04/07/2020	\$13.49	\$13.49	Gloves
05/13/2020	2060616-0	Invoice	05/13/2020	\$452.65	\$131.96	Sanitizer
					\$287.70	Masks
05/20/2020	2063670-0	Invoice	05/20/2020	\$35.97	\$35.97	Soap
05/26/2020	2065219-0	Invoice	05/26/2020	\$463.92	\$89.99	Temporal thermometer
					\$25.99	Germicidal cleaner
05/26/2020	2052846-1	Invoice	05/26/2020	\$55.96	\$55.96	Hand sanitizer
06/01/2020	2067662-0	Invoice	06/01/2020	\$25.99	\$25.99	Paper towels
06/01/2020	2067648-0	Invoice	06/01/2020	\$87.16	\$59.96	Hand sanitizer
06/16/2020	2067648-1	Invoice	06/16/2020	\$20.69	\$20.69	Facial tissue
06/16/2020	2065219-1	Invoice	06/16/2020	\$17.56	\$17.56	Gloves
06/29/2020	2071298-1	Invoice	06/29/2020	\$50.38	\$50.38	Paper towels
<i>Totals for 1-6130-1-99, Supplies:</i>				\$1,223.77	\$815.64	
Grand Totals:				\$2,987.20		

If you have any questions regarding the PPE, please email: chelseaw@gulfcoastlegal.org.
 Thank you,
 Chelsea Wait, Grants Manager

Pinellas County
 501 First Ave. N, Suite 420
 St. Petersburg, FL 33701
 T: (727) 821-0726
 F: (727) 821-3340

Sarasota & Manatee Counties
 1112 Manatee Ave. E
 Bradenton, FL 34208
 T: (941) 746-6151
 F: (941) 746-3661

To: Apex

4237
4/27/2020

GULFCOAST LEGAL SERVICES, INC.

INVOICE NUMBER	DATE	DESCRIPTION	AMOUNT	DISCOUNT	NET AMOUNT
2037650-1	4/7/2020	Office Supplies- St. Pete	\$13.49	\$0.00	\$13.49
		Totals:	\$13.49	\$0.00	\$13.49



OFFICE PRODUCTS & FURNITURE

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(800) 227-1563 (800) 875-9059



INVOICE

INVOICE NUMBER	2037650-1	
INVOICE DATE	04/07/20	
ACCOUNT / DEPT	108525	0104
DEPT NAME	FRONT DESK	

BILLING ADDRESS			SHIPPING ADDRESS		
GULF COAST LEGAL SERVICES SUITE 420 501 1ST AVE NORTH ST PETERSBURG FL 33701 727-821-0726			GULF COAST LEGAL SERVICES SUITE 420 501 1st AVE SAINT PETERSBURG FL 33701		
CUSTOMER PURCHASE ORDER	ACCOUNT EXECUTIVE	TYPE	ROUTE	PAYCODE	ORDER TAKER
	123	REPRINT	7	CHARGE	WEB



Packages Delivered _____

ITEM NUMBER	MFG	ITEM DESCRIPTION	UM	ORD QTY	B/O QTY	SHIP QTY	SELL PRICE	EXTEND PRICE
6CUR9225	MII	Who Called : Emely Laporte GLOVE, EXAM, STRETCH VINYL, M General	BX	1		1	13.490	13.49
26085	GJO	TISSUE, FAC, 85CT, WH General	CT	1	1		29.980	.00
L100	TXL	WIPE, GYM, ANTBCL, 6"X8" General Phone: 727-821-0726 x 200 Email: emelyl@gulfcoastlegal.org	EA	1	1		63.690	.00

RECEIVED
APR 08 2020
FINANCE DEPT.

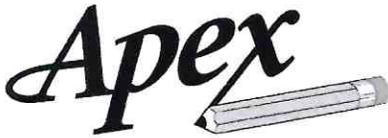
1-6130-1-99 p.1000 \$13.49.

Purchaser agrees to pay all cost of collecting or securing or attempting to collect or secure this account, including reasonable attorney's fees, whether the same is to be collected or secured by suit or otherwise. Service charge of 1.5% per month (18% per annum) shall be charged on all accounts which show a balance owed after (30) days.	Subtotal	13.49
	Tax	
	Less Deposit	
	Total Due	13.49

Received By: _____
Signature may appear on our delivery manifest. Page 1 of 1

GULF COAST LEGAL SERVICES, INC.

INVOICE NUMBER	DATE	DESCRIPTION	AMOUNT	DISCOUNT	NET AMOUNT
2058285-0	5/7/2020	Office Supplies- St. Pete	\$10.92	\$0.00	\$10.92
2060616-0	5/13/2020	Office Supplies- St. Pete	\$452.65	\$0.00	\$452.65
2063670-0	5/20/2020	Office Supplies- St. Pete	\$35.97	\$0.00	\$35.97
		Totals:	\$499.54	\$0.00	\$499.54



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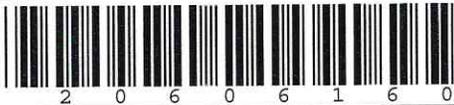
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INVOICE

INVOICE NUMBER	2060616-0	
INVOICE DATE	05/13/20	
ACCOUNT / DEPT	108525	0104
DEPT NAME	FRONT DESK	

BILLING ADDRESS			SHIPPING ADDRESS		
GULF COAST LEGAL SERVICES SUITE 420 501 1ST AVE NORTH ST PETERSBURG FL 33701 727-821-0726			GULF COAST LEGAL SERVICES SUITE 420 501 1st AVE SAINT PETERSBURG FL 33701		
CUSTOMER PURCHASE ORDER	ACCOUNT EXECUTIVE	TYPE	ROUTE	PAYCODE	ORDER TAKER
	123	REPRINT	7	CHARGE	WEB



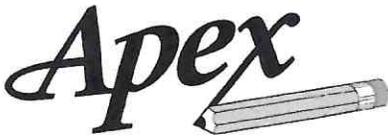
Packages Delivered _____

ITEM NUMBER	MFG	ITEM DESCRIPTION	UM	ORD QTY	B/O QTY	SHIP QTY	SELL PRICE	EXTEND PRICE
7550400	BET	Who Called : Emely Laporte SANITIZER, FOAM, HAND, ALCOHOL	EA	5		5	32.990	164.95
85166	SPZ	DISPOSABLE, FACE, MASK, BLUE Phone: 727-821-0726 x 200 Email: emelyl@gulfcoastlegal.org	BX	6		6	47.950	287.70
<p><i>1-6130-1-99 p. 1000 \$452.65</i></p> <p><i>1 to Bradenbn.</i></p>								

Purchaser agrees to pay all cost of collecting or securing or attempting to collect or secure this account, including reasonable attorney's fees, whether the same is to be collected or secured by suit or otherwise. Service charge of 1.5% per month (18% per annum) shall be charged on all accounts which show a balance owed after (30) days. .

Subtotal	452.65
Tax	
Less Deposit	
Total Due	452.65

Received By: _____
Signature may appear on our delivery manifest.



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INVOICE

INVOICE NUMBER	2063670-0	
INVOICE DATE	05/20/20	
ACCOUNT / DEPT	108525	0104
DEPT NAME	FRONT DESK	

BILLING ADDRESS			SHIPPING ADDRESS		
GULF COAST LEGAL SERVICES SUITE 420 501 1ST AVE NORTH ST PETERSBURG FL 33701 727-821-0726			GULF COAST LEGAL SERVICES SUITE 420 501 1st AVE SAINT PETERSBURG FL 33701		
CUSTOMER PURCHASE ORDER	ACCOUNT EXECUTIVE	TYPE	ROUTE	PAYCODE	ORDER TAKER
	123	REPRINT	7	CHARGE	WEB



Packages Delivered _____

ITEM NUMBER	MFG	ITEM DESCRIPTION	UM	ORD QTY	B/O QTY	SHIP QTY	SELL PRICE	EXTEND PRICE
4440110EA	APX	Who Called : Emely Laporte ANTIBAC SOAP GAL Phone: 727-821-0726 x 200 Email: emelyl@gulfcoastlegal.org	EA	3		3	11.990	35.97
		<p>1-6130-1-99 p.1000 \$ 35.97</p>						

Purchaser agrees to pay all cost of collecting or securing or attempting to collect or secure this account, including reasonable attorney's fees, whether the same is to be collected or secured by suit or otherwise. Service charge of 1.5% per month (18% per annum) shall be charged on all accounts which show a balance owed after (30) days.

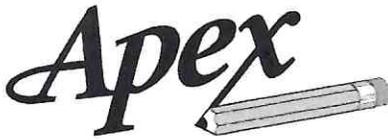
Subtotal	35.97
Tax	
Less Deposit	
Total Due	35.97

Received By:

Signature may appear on our delivery manifest.

GULF COAST LEGAL SERVICES, INC.

INVOICE NUMBER	DATE	DESCRIPTION	AMOUNT	DISCOUNT	NET AMOUNT
2065219-0	5/26/2020	Office Supplies- St. Pete_Covid	\$463.92	\$0.00	\$463.92
2052846-1	5/26/2020	Office Supplies- St. Pete	\$55.96	\$0.00	\$55.96
2067662-0	6/1/2020	Office Supplies- St. Pete	\$25.99	\$0.00	\$25.99
2067704-0	6/1/2020	Office Supplies- Lealman	\$52.97	\$0.00	\$52.97
2067648-0	6/1/2020	Office Supplies- St. Pete	\$87.16	\$0.00	\$87.16
		Totals:	\$686.00	\$0.00	\$686.00



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INVOICE

INVOICE NUMBER	2065219-0
INVOICE DATE	05/26/20
ACCOUNT / DEPT	108525 0104
DEPT NAME	FRONT DESK

BILLING ADDRESS			SHIPPING ADDRESS		
GULF COAST LEGAL SERVICES SUITE 420 501 1ST AVE NORTH ST PETERSBURG FL 33701 727-821-0726			GULF COAST LEGAL SERVICES SUITE 420 501 1st AVE SAINT PETERSBURG FL 33701		
CUSTOMER PURCHASE ORDER	ACCOUNT EXECUTIVE	TYPE	ROUTE	PAYCODE	ORDER TAKER
	123	REPRINT	7	CHARGE	WEB



Packages Delivered _____

ITEM NUMBER	MFG	ITEM DESCRIPTION	UM	ORD QTY	B/O QTY	SHIP QTY	SELL PRICE	EXTEND PRICE
JXB178	APX	Who Called : Emely Laporte THERMOMETER, NON-CONTACT, INFRAR	EA	4		4	89.990	359.96
633712928	BMT	CLEANER, GERMICIDAL, 1 GAL	EA	4		4	25.990	103.96
8961L	PDF	GLOVE, DISPOSABLE, VINYL, L Phone: 727-821-0726 x 200 Email: emelyl@gulfcoastlegal.org	BX	4	4		4.390	.00

1-6130-1-99 p.1000 \$463.92

1 to Bradenton

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MAY 28 2020
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Purchaser agrees to pay all cost of collecting or securing or attempting to collect or secure this account, including reasonable attorney's fees, whether the same is to be collected or secured by suit or otherwise. Service charge of 1.5% per month (18% per annum) shall be charged on all accounts which show a balance owed after (30) days. .

Subtotal	463.92
Tax	
Less Deposit	
Total Due	463.92

Received By:
Signature may appear on our delivery manifest.



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INVOICE

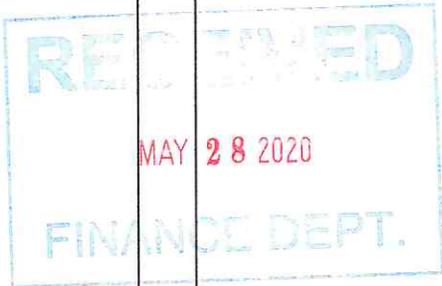
INVOICE NUMBER	2052846-1
INVOICE DATE	05/26/20
ACCOUNT / DEPT	108525 0104
DEPT NAME	FRONT DESK

BILLING ADDRESS		SHIPPING ADDRESS			
GULF COAST LEGAL SERVICES SUITE 420 501 1ST AVE NORTH ST PETERSBURG FL 33701 727-821-0726		GULF COAST LEGAL SERVICES SUITE 420 501 1st AVE SAINT PETERSBURG FL 33701			
CUSTOMER PURCHASE ORDER	ACCOUNT EXECUTIVE	TYPE	ROUTE	PAYCODE	ORDER TAKER
	123	REPRINT	7	CHARGE	WEB



Packages Delivered _____

ITEM NUMBER	MFG	ITEM DESCRIPTION	UM	ORD QTY	B/O QTY	SHIP QTY	SELL PRICE	EXTEND PRICE
215608	GOJ	Who Called : Emely Laporte REFILL, PURELL NXT, 1000ML General Phone: 727-821-0726 x 200 Email: emelyl@gulfcoastlegal.org	EA	4		4	13.990	55.96



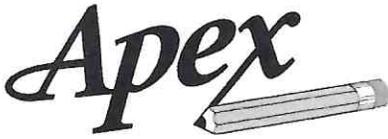
1-6130-1-99 p. 1000 \$ 55.96

[Handwritten signature]

Purchaser agrees to pay all cost of collecting or securing or attempting to collect or secure this account, including reasonable attorney's fees, whether the same is to be collected or secured by suit or otherwise. Service charge of 1.5% per month (18% per annum) shall be charged on all accounts which show a balance owed after (30) days.

Subtotal	55.96
Tax	
Less Deposit	
Total Due	55.96

Received By: _____
Signature may appear on our delivery manifest.



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INVOICE

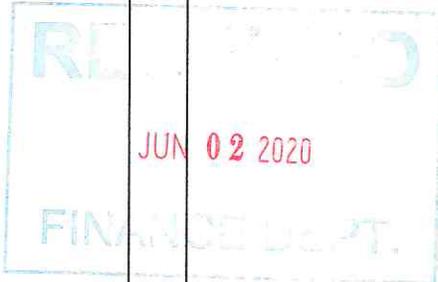
INVOICE NUMBER	2067662-0	
INVOICE DATE	06/01/20	
ACCOUNT / DEPT	108525	0405
DEPT NAME	MANATEE	

BILLING ADDRESS			SHIPPING ADDRESS			
GULFCOAST LEGAL SERVICES SUITE 420 501 1ST AVE NORTH ST PETERSBURG FL 33701 941-746-6151			GULF COAST LEGAL SERVICES 2ND FLOOR 1112 MANATEE AVE E BRADENTON FL 34208			
CUSTOMER PURCHASE ORDER	ACCOUNT EXECUTIVE	TYPE	ROUTE	PAYCODE	ORDER TAKER	
	123	REPRINT	C001	CHARGE	WEB	



Packages Delivered _____

ITEM NUMBER	MFG	ITEM DESCRIPTION	UM	ORD QTY	B/O QTY	SHIP QTY	SELL PRICE	EXTEND PRICE
24085	GJO	Who Called : Emely Laporte TOWEL, KITCHEN, 9X11, 85 SHTS General Phone: 727-821-0726 x 200 Email: emelyl@gulfcoastlegal.org	CT	1		1	25.990	25.99



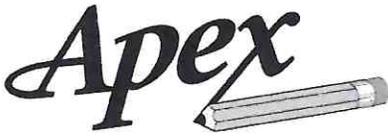
1-6130-1-99 p. 1000\$ 25.99.

Purchaser agrees to pay all cost of collecting or securing or attempting to collect or secure this account, including reasonable attorney's fees, whether the same is to be collected or secured by suit or otherwise. Service charge of 1.5% per month (18% per annum) shall be charged on all accounts which show a balance owed after (30) days.

Subtotal	25.99
Tax	
Less Deposit	
Total Due	25.99

Received By:

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INVOICE

INVOICE NUMBER	2067648-0	
INVOICE DATE	06/01/20	
ACCOUNT / DEPT	108525	0104
DEPT NAME	FRONT DESK	

BILLING ADDRESS	SHIPPING ADDRESS
GULF COAST LEGAL SERVICES SUITE 420 501 1ST AVE NORTH ST PETERSBURG FL 33701 727-821-0726	GULF COAST LEGAL SERVICES SUITE 420 501 1st AVE SAINT PETERSBURG FL 33701

CUSTOMER PURCHASE ORDER	ACCOUNT EXECUTIVE	TYPE	ROUTE	PAYCODE	ORDER TAKER
	123	REPRINT	7	CHARGE	WEB



Packages Delivered _____

ITEM NUMBER	MFG	ITEM DESCRIPTION	UM	ORD QTY	B/O QTY	SHIP QTY	SELL PRICE	EXTEND PRICE
41504	SOL	Who Called : Emely Laporte TOWEL, KITCHEN, 2PLY, WHEEL	CT	1	1		31.210	.00
26085	GJO	TISSUE, FAC, 85CT, WH	CT	1	1		27.890	.00
EN92	EVE	BATTERY, ALKA, INDUST, AAA, 24	BX	1		1	13.310	13.31
EN91	EVE	BATTERY, ALKA, INDUST, AA, 24PK	BX	1		1	13.890	13.89
215608	GOJ	REFILL, PURELL NXT, 1000ML Phone: 727-821-0726 x 200 Email: emelyl@gulfcoastlegal.org	EA	4		4	14.990	59.96
<p>1-6130-1-99 p. 1000 \$ 87.16.</p>								

Purchaser agrees to pay all cost of collecting or securing or attempting to collect or secure this account, including reasonable attorney's fees, whether the same is to be collected or secured by suit or otherwise. Service charge of 1.5% per month (18% per annum) shall be charged on all accounts which show a balance owed after (30) days.

Subtotal 87.16
Tax
Less Deposit

Received By: _____

Signature may appear on our delivery manifest.

Total Due 87.16

GULF COAST LEGAL SERVICES, INC.

INVOICE NUMBER	DATE	DESCRIPTION	AMOUNT	DISCOUNT	NET AMOUNT
2067656-0	6/4/2020	Office supplies- Wimauma	\$25.99	\$0.00	\$25.99
2071342-0	6/9/2020	Office Supplies- Lealman	\$4.40	\$0.00	\$4.40
2072311-0	6/11/2020	Office Supplies- St. Pete	\$16.38	\$0.00	\$16.38
2067648-1	6/16/2020	Office Supplies- St. Pete	\$20.69	\$0.00	\$20.69
2065219-1	6/16/2020	Office Supplies- St. Pete	\$17.56	\$0.00	\$17.56
2074731-0	6/17/2020	Office Supplies- Chelsea	\$24.13	\$0.00	\$24.13
2075882-0	6/19/2020	Office Supplies- St. Pete	\$43.73	\$0.00	\$43.73
		Totals:	\$152.88	\$0.00	\$152.88



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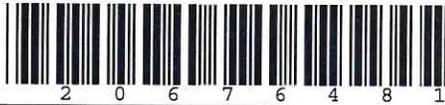
5209 N. Howard Ave - Tampa, FL 33603
(800) 227-1563 (800) 875-9059



INVOICE

INVOICE NUMBER	2067648-1	
INVOICE DATE	06/16/20	
ACCOUNT / DEPT	108525	0104
DEPT NAME	FRONT DESK	

BILLING ADDRESS		SHIPPING ADDRESS			
GULF COAST LEGAL SERVICES SUITE 420 501 1ST AVE NORTH ST PETERSBURG FL 33701 727-821-0726		GULF COAST LEGAL SERVICES SUITE 420 501 1st AVE SAINT PETERSBURG FL 33701			
CUSTOMER PURCHASE ORDER	ACCOUNT EXECUTIVE	TYPE	ROUTE	PAYCODE	ORDER TAKER
	123	REPRINT	7	CHARGE	204



Packages Delivered _____

ITEM NUMBER	MFG	ITEM DESCRIPTION	UM	ORD QTY	B/O QTY	SHIP QTY	SELL PRICE	EXTEND PRICE
26100	GJO	Who Called : Emely Laporte TISSUE, FACIAL, 2PLY, 100SH, WE Phone: 727-821-0726 x 200 Email: emelyl@gulfcoastlegal.org	CT	1		1	20.690	20.69

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1-6130-1-99 p. 1000 \$ 20.69

Purchaser agrees to pay all cost of collecting or securing or attempting to collect or secure this account, including reasonable attorney's fees, whether the same is to be collected or secured by suit or otherwise. Service charge of 1.5% per month (18% per annum) shall be charged on all accounts which show a balance owed after (30) days. .

Subtotal	20.69
Tax	
Less Deposit	
Total Due	20.69

Received By: _____
Signature may appear on our delivery manifest. Page 1 of 1

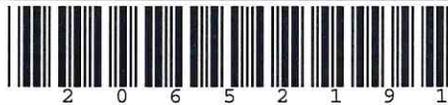


INVOICE

INVOICE NUMBER	2065219-1
INVOICE DATE	06/16/20
ACCOUNT / DEPT	108525 0104
DEPT NAME	FRONT DESK

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BILLING ADDRESS			SHIPPING ADDRESS		
GULF COAST LEGAL SERVICES SUITE 420 501 1ST AVE NORTH ST PETERSBURG FL 33701 727-821-0726			GULF COAST LEGAL SERVICES SUITE 420 501 1st AVE SAINT PETERSBURG FL 33701		
CUSTOMER PURCHASE ORDER	ACCOUNT EXECUTIVE	TYPE	ROUTE	PAYCODE	ORDER TAKER
	123	REPRINT	7	CHARGE	WEB



Packages Delivered _____

ITEM NUMBER	MFG	ITEM DESCRIPTION	UM	ORD QTY	B/O QTY	SHIP QTY	SELL PRICE	EXTEND PRICE
8961L	PDF	Who Called : Emely Laporte GLOVE, DISPOSABLE, VINYL, L Phone: 727-821-0726 x 200 Email: emelyl@gulfcoastlegal.org	BX	4		4	4.390	17.56
								1-6130-1-99 p.1000 \$ 17.56.

RECEIVED
 JUN 17 2020
 FINANCE DEPT.

Ⓢ
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Purchaser agrees to pay all cost of collecting or securing or attempting to collect or secure this account, including reasonable attorney's fees, whether the same is to be collected or secured by suit or otherwise. Service charge of 1.5% per month (18% per annum) shall be charged on all accounts which show a balance owed after (30) days.

Received By: _____
 Signature may appear on our delivery manifest.

Subtotal 17.56
 Tax
 Less Deposit
 Total Due 17.56

GULFCOAST LEGAL SERVICES, INC.

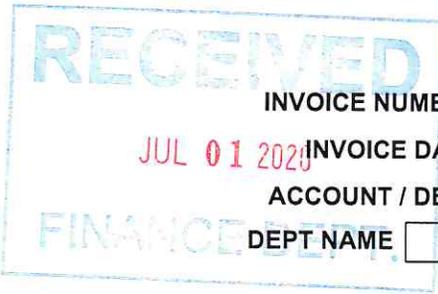
INVOICE NUMBER	DATE	DESCRIPTION	AMOUNT	DISCOUNT	NET AMOUNT
2071298-0	6/9/2020	Office Supplies- St. Pete	\$42.39	\$0.00	\$42.39
2076417-0	6/22/2020	Office Supplies- Lealman	\$13.31	\$0.00	\$13.31
2071298-1	6/29/2020	Office Supplies- St. Pete	\$50.38	\$0.00	\$50.38
2079613-0	6/29/2020	Office Supplies- St. Pete	\$48.01	\$0.00	\$48.01
		Totals:	\$154.09	\$0.00	\$154.09



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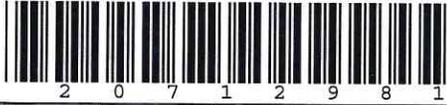
5209 N. Howard Ave - Tampa, FL 33603
(800) 227-1563 (800) 875-9059



INVOICE

INVOICE NUMBER	2071298-1
INVOICE DATE	06/29/20
ACCOUNT / DEPT	108525 0104
DEPT NAME	FRONT DESK

BILLING ADDRESS		SHIPPING ADDRESS			
GULF COAST LEGAL SERVICES SUITE 420 501 1ST AVE NORTH ST PETERSBURG FL 33701 727-821-0726		GULF COAST LEGAL SERVICES SUITE 420 501 1st AVE SAINT PETERSBURG FL 33701			
CUSTOMER PURCHASE ORDER	ACCOUNT EXECUTIVE	TYPE	ROUTE	PAYCODE	ORDER TAKER
	123	REPRINT	7	CHARGE	WEB



Packages Delivered _____

ITEM NUMBER	MFG	ITEM DESCRIPTION	UM	ORD QTY	B/O QTY	SHIP QTY	SELL PRICE	EXTEND PRICE
36371	KCC	Who Called : Emely Laporte TOWEL, KTCHN, RL, 1PL, 102SH, WH General Phone: 727-821-0726 x 200 Email: emelyl@gulfcoastlegal.org	PK	2		2	25.190	50.38
1-6130-1-99 p. 1000 \$ 50.38								

Purchaser agrees to pay all cost of collecting or securing or attempting to collect or secure this account, including reasonable attorney's fees, whether the same is to be collected or secured by suit or otherwise. Service charge of 1.5% per month (18% per annum) shall be charged on all accounts which show a balance owed after (30) days. . Received By: _____ Signature may appear on our delivery manifest.	Subtotal	50.38
	Tax	
	Less Deposit	
	Total Due	50.38



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(800) 227-1563 (800) 875-9059

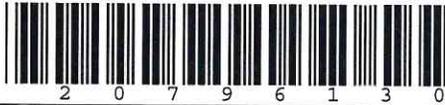


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JUL 01 2020
FINANCE DEPT.

INVOICE

INVOICE NUMBER	2079613-0
INVOICE DATE	06/29/20
ACCOUNT / DEPT	108525 0104
DEPT NAME	FRONT DESK

BILLING ADDRESS		SHIPPING ADDRESS			
GULF COAST LEGAL SERVICES SUITE 420 501 1ST AVE NORTH ST PETERSBURG FL 33701 727-821-0726		GULF COAST LEGAL SERVICES SUITE 420 501 1st AVE SAINT PETERSBURG FL 33701			
CUSTOMER PURCHASE ORDER	ACCOUNT EXECUTIVE	TYPE	ROUTE	PAYCODE	ORDER TAKER
	123	REPRINT	7	CHARGE	WEB



Packages Delivered _____

ITEM NUMBER	MFG	ITEM DESCRIPTION	UM	ORD QTY	B/O QTY	SHIP QTY	SELL PRICE	EXTEND PRICE
183135	ZEP	Who Called : Emely Laporte WATER, SPRING, ZEPH, 16.9OZ Board Room	PK	2		2	7.680	15.36
8811	APX	*****APEX PAPER 92/20***** General	CT	1		1	29.980	29.98
65649	BSN	STAPLES, STNDRD, CHSLPNT, 5000 General Phone: 727-821-0726 x 200 Email: emelyl@gulfcoastlegal.org	BX	3		3	.890	2.67
		1-6130-199 p. 1000 \$ 48.01						

Purchaser agrees to pay all cost of collecting or securing or attempting to collect or secure this account, including reasonable attorney's fees, whether the same is to be collected or secured by suit or otherwise. Service charge of 1.5% per month (18% per annum) shall be charged on all accounts which show a balance owed after (30) days. . Received By: _____ Signature may appear on our delivery manifest.	Subtotal	48.01
	Tax	
	Less Deposit	
	Total Due	48.01

amazon.com



Your order of May 8, 2020 (Order ID 114-5366354-3095408)

Qty.	Item	Item Price	Total
1	Natural Concepts Hand Sanitizer Gel, Bulk Pack of 4, 32 oz Bottles, 65% Ethyl Alcohol, Protect Against Germs On-The-Go W... Health and Beauty X002HYV7J1 FNC65-320-4P 067153948023 (Sold by GuardProducts)	\$54.99	\$54.99
This shipment completes your order.		Subtotal	\$54.99
		Order Total	\$54.99
		Paid via credit/debit	\$54.99

Return or replace your item
Visit Amazon.com/returns

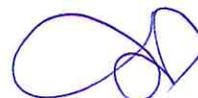


0/UBcCtTlgT/-1 of 1-//CVG9/std-us/0/0527-14:00/0527-09:03

1AE

PPE

1 container to Bradenton.





Final Details for Order #114-1944035-6162628

Paid By: Gulfcoast Legal Services
Placed By: Gulfcoast Legal
Order Placed: May 20, 2020
Amazon.com order number: 114-1944035-6162628
Seller's order number: 14642856
Order Total: \$219.89

Shipped on May 22, 2020	
Items Ordered	Price
11 of: 4PCS Liquid Soap Dispenser Pump Lotion Refillable Empty Bottle Plastic Jars 10oz	\$19.99
Sold by: AllTopBargains (seller profile)	
Condition: New	
Shipping Address: Emely Laporte 501 1ST AVE N STE 420 ST PETERSBURG, FL 33701-3714 United States	Item(s) Subtotal: \$219.89 Shipping & Handling: \$0.00 ----- Total before tax: \$219.89 Sales Tax: \$0.00 -----
Shipping Speed: Standard Shipping	Total for This Shipment: \$219.89 -----

Payment Information	
Payment Method: Visa Last digits: 7642	Item(s) Subtotal: \$219.89 Shipping & Handling: \$0.00 ----- Total before tax: \$219.89 Estimated tax to be collected: \$0.00 -----
	Grand Total: \$219.89

To view the status of your order, return to [Order Summary](#).



Order Details

Ordered on May 20, 2020 | Order# 114-1944035-6162628

Shipping Address

Emely Laporte
501 1ST AVE N STE 420
ST PETERSBURG, FL 33701-3714
United States

Payment Method

 **** 7642

Order Summary

Item(s) Subtotal:
Shipping & Handling
Total before tax:
Estimated tax to be collected:
Grand Total:
See ta:
Refund Total:

^ Transactions

Refund: Completed May 29, 2020 - \$219.89

Amount	Payment Method	Status
\$219.89	Visa ending in 7642	Charged on May 22, 2020

Total: \$219.89

Requested by
Order method

Gulfcoast Legal
Business

FIVE BELOW
fivebelow.com

06047 ST PETERSBURG, FL
7715 9TH STREET NORTH
SAINT PETERSBURG, FL 33702
727.217.0895
SALE

046412102963 30Z SOFT TOUCH DISPE \$23.00T
23 @ \$1.00 = \$23.00

Subtotal \$23.00
Sales Tax 7.000% \$1.61

Total \$24.61

Visa \$24.61

Card No. XXXXXXXXXXXX7642
Expiration Date XX/XX
Auth. No. 08634G
ENTRY METHOD: Chip Read
CHIP IND: CONTACT
AID: A0000000031010
APPL: VISA CREDIT
ARC: 00

Store: 06047 Reg: 03 Tran: 041072
Date: 5/31/2020 4:14:43 PM Assoc: 575726

the answer is "yes!"

exchange unopened or defective products
for the same item or another item of equal
value any time. Receive a full refund in
the original form of payment with receipt.

11 went to Bradenton

Thank You For Shopping!

Now Hiring! Go to FIVEBELOW.COM/CAREERS



(Handwritten mark)

(Handwritten signature)

amazon.com



2 packs to Bradenton

Your order of June 1, 2020 (Order ID 112-9084078-3765003)

Qty.	Item	Item Price	Total
4	Sismate Disposable 3 Ply Face Mask, Pack of 50 Misc. B086RP7G38 B086RP7G38 304825320047	\$29.99	\$119.96

This shipment completes your order.		Subtotal	\$119.96
		Order Total	\$119.96
		Paid via credit/debit	\$119.96

Return or replace your item
Visit Amazon.com/returns



0/Uv7MlxpMt/-4 of 4-//DTP2-A/next-1dc/0/0601-19:30/0601-10:14

N3

PPE

amazon.com



Your order of June 1, 2020 (Order ID 114-2065273-7755405)

Qty.	Item	Item Price	Total
4	Bekith 12 Pack Foaming Soap Dispensers Pump-Bottles for Liquid Soap, 8.5oz / 250ml, Use with Castile Soap, DIY Liquid So... X001NHJNXZ FoamingSoapDispensers-6pc (Sold by bekith)	\$29.99	\$119.96

We've sent this part of your order to ensure quicker service. The other items will ship separately.

Subtotal	\$119.96
Shipment Total	\$119.96
Paid via credit/debit	\$119.96

Return or replace your item
Visit Amazon.com/returns



0/UHKM7frkt/-4 of 4-//DTP2-A/next-1dc/0/0601-19:30/0601-11:49

1BA

11 went to Bradenton

②

Handwritten signature



Final Details for Order #114-6406367-2680215

Paid By: Gulfcoast Legal Services
Placed By: Gulfcoast Legal
Order Placed: June 1, 2020
Amazon.com order number: 114-6406367-2680215
Order Total: \$147.50

Shipped on June 2, 2020	
Items Ordered 5 of: <i>Please Keep Safe 6 Foot Distance Social Distancing Indoor Floor Decal. 12" x 12". 5 Pack (5-Decals) Blue Color Version. Industrial UV Grade Anti-Slip. Health Measures. Made in USA. Free Shipping</i> Sold by: Sala Graphics (seller profile) Business Price Condition: New	Price \$29.50
1 pack went to Bradenton	
Shipping Address: Emely Laporte 501 1ST AVE N STE 420 ST PETERSBURG, FL 33701-3714 United States	Item(s) Subtotal: \$147.50 Shipping & Handling: \$0.00 ----- Total before tax: \$147.50 Sales Tax: \$0.00 ----- Total for This Shipment: \$147.50 -----
Shipping Speed: Economy Shipping	

Payment Information	
Payment Method: Visa Last digits: 7642	Item(s) Subtotal: \$147.50 Shipping & Handling: \$0.00 ----- Total before tax: \$147.50 Estimated tax to be collected: \$0.00 ----- Grand Total: \$147.50 -----

To view the status of your order, return to [Order Summary](#).



Details for Order #112-1535736-9237068

Paid By: Gulfcoast Legal Services
Placed By: Francis Berrios
Order Placed: June 2, 2020
Amazon.com order number: 112-1535736-9237068
Order Total: \$45.98

Not Yet Shipped	
Items Ordered	Price
2 of: 100 Pcs Gloves, Disposable, Powder Free Industrial Gloves, Latex Free, Cleaning Glove for Family Use, US Shipping Arrive in 7-10 Days, White (M) <small>Sold by: Asymden (seller profile) Condition: New</small>	\$22.99
<i>1 box to Bradenton</i>	
Shipping Address: Emely Laporte 501 1ST AVE N STE 420 ST PETERSBURG, FL 33701-3714 United States	Item(s) Subtotal: \$45.98 Shipping & Handling: \$0.00 ----- Total before tax: \$45.98 Sales Tax: \$0.00 -----
Shipping Speed: Standard Shipping	Total for This Shipment: \$45.98 -----

Payment Information	
Payment Method: Visa Last digits: 7642	Item(s) Subtotal: \$45.98 Shipping & Handling: \$0.00 ----- Total before tax: \$45.98 Estimated tax to be collected: \$0.00 -----
	Grand Total: \$45.98

To view the status of your order, return to [Order Summary](#).

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Details for Order #112-4324281-5361057

Paid By: Gulfcoast Legal Services
Placed By: Francis Berrios
Order Placed: June 2, 2020
Amazon.com order number: 112-4324281-5361057
Order Total: \$15.96

Not Yet Shipped

Items Ordered	Price
4 of: <i>Healthcare Conversions, Weight Conversions, Temperature Conversions, and Common IV Drug calculations Horizontal Badge Card - Excellent Resource for Nurses, Nursing Clinicals, and RN Students</i>	\$3.99
Sold by: Embarket (seller profile) Product question? (Ask Seller)	
Condition: New	

I sent to Bradenton.

Shipping Address:
Emely Laporte
501 1ST AVE N STE 420
ST PETERSBURG, FL 33701-3714
United States

Shipping Speed:
Standard Shipping

Payment Information

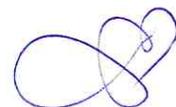
Payment Method: Visa Last digits: 7642	Item(s) Subtotal: \$15.96
	Shipping & Handling: \$0.00

	Total before tax: \$15.96
	Estimated tax to be collected: \$0.00

	Grand Total: \$15.96

To view the status of your order, return to [Order Summary](#).

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All ▾ Enter keyword or product number

Deliver to Emely
St Peters... 33701

Departments

Buy Again

EN

Hello, Tara
Account for Gulfcoast Le...

Lists

Business Prime

0

Your Account > Your Orders > Order Details

Order Details

Ordered on June 1, 2020 Order# 114-2065273-7755405

[Printable Order Summary](#)

Shipping Address	Payment Method	Order Summary										
Emely Laporte 501 1ST AVE N STE 420 ST PETERSBURG, FL 33701-3714 United States	VISA **** 7642	<table border="0"> <tr><td>Item(s) Subtotal:</td><td>\$158.44</td></tr> <tr><td>Shipping & Handling:</td><td>\$0.00</td></tr> <tr><td>Total before tax:</td><td>\$158.44</td></tr> <tr><td>Estimated tax to be collected:</td><td>\$0.00</td></tr> <tr><td>Grand Total:</td><td>\$158.44</td></tr> </table>	Item(s) Subtotal:	\$158.44	Shipping & Handling:	\$0.00	Total before tax:	\$158.44	Estimated tax to be collected:	\$0.00	Grand Total:	\$158.44
Item(s) Subtotal:	\$158.44											
Shipping & Handling:	\$0.00											
Total before tax:	\$158.44											
Estimated tax to be collected:	\$0.00											
Grand Total:	\$158.44											
Transactions												
Amount	Payment Method	Status										
\$38.48	Visa ending in 7642	Charged on June 4, 2020										
Shipped on Jun 04, 2020	(3 Pack) 16 Ounce Soap Dispenser Bottles Clear Plastic Countertop Lotion-Soap Pump Bottles for Liquid Organic Soap Hand Dispensers Kitchen and Bathroom	Item: \$17.49 Total: \$17.49										
Shipped on Jun 01, 2020	SoLID (TM) Spray Bottle (4 Pack,16 Oz), Commercial Grade/Industrial/Household Use, No Leak and Clog, Adjustable Nozzle, Bleach/Vinegar/BBQ/Rubbing Alc	Item: \$20.99 Total: \$20.99										
		<table border="0"> <tr><td>Item(s) subtotal:</td><td>\$38.48</td></tr> <tr><td>Shipping and handling:</td><td>\$0.00</td></tr> <tr><td>Total before tax:</td><td>\$38.48</td></tr> <tr><td>Sales tax:</td><td>\$0.00</td></tr> <tr><td>Transaction total:</td><td>\$38.48</td></tr> </table>	Item(s) subtotal:	\$38.48	Shipping and handling:	\$0.00	Total before tax:	\$38.48	Sales tax:	\$0.00	Transaction total:	\$38.48
Item(s) subtotal:	\$38.48											
Shipping and handling:	\$0.00											
Total before tax:	\$38.48											
Sales tax:	\$0.00											
Transaction total:	\$38.48											
\$119.96	Visa ending in 7642	Charged on June 1, 2020										
Total: \$158.44												
Requested by	Gulfcoast Legal											
Order method	Business											

1 to Bradenton

3 SHIPMENTS

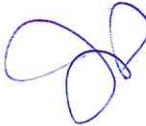
Delivered Jun 5, 2020
Your package was left in the mail room.



(3 Pack) 16 Ounce Soap Dispenser Bottles Clear Plastic Countertop Lotion-Soap Pump Bottles for Liquid Organic Soap Hand Dispensers Kitchen and Bathroom Soaps Shampoo and Lotions
Sold by: Bay State Importers
Return eligible through Jul 5, 2020
\$17.49
Condition: New



Delivered Jun 2, 2020
Package was left in a secure location



Track package

Print packing slip

Return or replace items

Share gift receipt

Write a product review

Track package



Final Details for Order #114-5922061-8548203

Paid By: Gulfcoast Legal Services
Placed By: Gulfcoast Legal
Order Placed: April 27, 2020
Amazon.com order number: 114-5922061-8548203
Order Total: \$71.98

Shipped on April 29, 2020	
Items Ordered	Price
2 of: <i>Face Mask, Pack of 50</i>	\$35.99
Sold by: Amazon.com Services LLC (seller profile)	
Business Price	
Condition: New	
Shipping Address:	Item(s) Subtotal: \$71.98
Emely Laporte	Shipping & Handling: \$0.00
501 1ST AVE N STE 420	-----
ST PETERSBURG, FL 33701-3714	Total before tax: \$71.98
United States	Sales Tax: \$0.00

Shipping Speed:	Total for This Shipment: \$71.98
One-Day Shipping	-----

Payment Information	
Payment Method:	Item(s) Subtotal: \$71.98
Visa Last digits: 7642	Shipping & Handling: \$0.00

	Total before tax: \$71.98
	Estimated tax to be collected: \$0.00

	Grand Total: \$71.98

To view the status of your order, return to [Order Summary](#).

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BIG FROG CUSTOM T-SHIRTS
 1018 CENTRAL AVE
 ST PETERSBURG, FL 33705
 Phone: (727)350-1919
 Email: STPETE@BIGFROG.COM

INVOICE

Invoice Number: 8,585
 Date: 05/20/2020 5:55 PM
 Billing Terms: Due upon receipt
 PO: 1 Color Masks

Bill To:

Gulfcoast Legal Services
 Tammy Greer
 501 First Ave. N
 Suite 420
 Saint Petersburg, FL 33701

Customer: Gulfcoast Legal Services
 Tammy Greer
 Phone: 727-821-0726
 E-mail: tammyg@gulfcoastlegal.org

Reference Number:

Quantity Sold	Item Description	Unit Price	Line Total
100	MASKS - Ultra Print WHITE 100 OS	18.00 5.00	500.00
		Sub Total	500.00
		Total Tax	0.00
		Total	500.00
		Credit Card	500.00
		Total Tendered	500.00
		Change	0.00
		Amount Due	0.00

1 Color (BLACK) print on white masks

Tara Meyer

From: Emely Laporte
Sent: Wednesday, May 13, 2020 4:27 PM
To: Tara Meyer; Jodi Duda
Cc: Tammy Greer
Subject: FW: Your DGS Retail Order Confirmation (#237802)

Receipt for sneeze guards paid with my credit card.

From: DGS Retail <customerservice@dgsretail.com>
Sent: Wednesday, May 13, 2020 4:08 PM
To: Emely Laporte <emelyl@gulfcoastlegal.org>
Subject: Your DGS Retail Order Confirmation (#237802)



Thank you for your order! NOTE: We Are Experiencing High Demand For Sneeze Guards From Essential Businesses. Current Lead-Time Is 5 To 7 Business Days To Ship Out Order. We Will Email You With Tracking Info When Your Order Ships. Thank You For Your Understanding.

Your order ID is #237802. A summary of your order is shown below. To view the status of your order [click here](#).

Shipping Address

Emely Laporte
Gulfcoast Legal Services
501 1st Avenue North
suite 420
St.petersburg, Florida 33701
United States
7278210726

Billing Address

Emely Laporte
Gulfcoast Legal Services
501 1st Avenue North
suite 420
St.petersburg, Florida 33701
United States
7278210726

Your Order Contains...

Cart Items	SKU	Qty	Item Price	Item Total
Portable Freestanding Sneeze Guard Desk & Counters, Acrylic W/Base 24x32H	P1712	3 (1 is for Bradenton)	\$66.99 USD	\$200.97 USD



Portable Freestanding Sneeze
Guard Desk Countertops,
Acrylic W/Base 24x24H

P1711

8

\$49.99 USD

\$399.92 USD

(2 are for Bradenton)

Subtotal: \$600.89 USD

Shipping: \$23.12 USD

Grand Total: \$624.01 USD

Payment Method: Credit Card

How Long Will My Delivery Take

DGS Retail

<https://www.dgsretail.com/>



**EMERGENCY MANAGEMENT
AND CONTINUATION OF
OPERATIONS PLAN**

Revised 07/31/2020



Gulfcoast Legal Services, Inc.
**EMERGENCY MANAGEMENT & CONTINUATION
OF OPERATIONS PLAN**

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Gulfcoast Legal Services, Inc.
**EMERGENCY MANAGEMENT & CONTINUATION
 OF OPERATIONS PLAN**

I. INTRODUCTION

Gulfcoast Legal Services (GLS) is a non-profit corporation providing free legal assistance to vulnerable residents of Pinellas, Manatee, and Sarasota Counties. GLS is dedicated to providing high quality legal services to protect the safety, rights, and interests of low-income vulnerable persons with regard to health, basic shelter, income, and quality of life.

GLS’s Emergency Management & Continuation of Operations Plan outlines the steps the agency will take for preparation, response, and recovery from an emergency or natural disaster such as a hurricane. The goal of the plan is to ensure that GLS returns to operations as soon as possible following an emergency interruption of services as legal services for vulnerable populations are critical following such crises.

II. EMERGENCY COORDINATORS

Emergency/Disaster Coordinator	Alternate Coordinator
Tammy D. Greer Executive Director 501 1 st Avenue North, Ste. 420 St. Petersburg, FL 33701 Tel: (727) 821-0726 ext. 271 Fax: (727) 821-3340 Cell: (561) 704-2376	Tara Meyer Fiscal & Human Resource Coordinator 501 1 st Avenue North, Ste. 420 St. Petersburg, FL 33701 Tel: (727) 821-0726 ext. 222 Fax: (727) 821-3340 Cell: (727) 557-9141
Emely Laporte Compliance & Systems Manager 501 1 st Avenue North, Ste. 420 St. Petersburg, FL 33701 Tel: (727) 821-0726 ext. 200 Fax: (727) 821-3340 Cell: (727) 520-3112	Chelsea Wait Grants & Development Manager 501 1 st Avenue North, Ste. 420 St. Petersburg, FL 33701 Tel: (727) 821-0726 ext. 249 Fax: (727) 821-3340 Cell: (908) 242-8027

In the event of the executive director’s absence during an emergency, the Deputy Director for Family Law will oversee the day-to-day operations of the Saint Petersburg office, and the Deputy Director for Immigration and Human Rights will oversee the day-to-day operations for the Bradenton office.

III. CLIENT AWARENESS AND EDUCATION

A. Printed Materials

GLS will distribute any emergency information that is received from the National Weather Service and/or local emergency management agencies in printed form to staff and clients in GLS offices, as appropriate, during business hours. Printed materials will be distributed to GLS staff and will be available in the reception areas as well regarding emergency awareness and related preparations. In addition, GLS has a television in its reception area in the main St. Petersburg office, which plays only Bay News 9 – a local news affiliate that broadcasts up-to-the-minute weather and emergency coverage. GLS will maintain updates regarding services via its website and social media outlets until offices or alternate locations are opened following an emergency event.

B. Client Planning

GLS provides direct civil legal services and will continue operations as soon as possible and practical. Following a natural disaster/hurricane, legal aid will be crucial for protecting the rights of vulnerable clients particularly with regard to ensuring access to fair housing, intervening in landlord/tenant disputes, protecting clients from consumer scams/price gouging, helping access public benefits or insurance payouts, etc. In addition, when non-legal needs become evident to staff, GLS will make the appropriate referrals to other local support service providers to assure that the clients are served. GLS will also recommend to clients that they register with the special needs registry if applicable.

C. Disaster Coordination

GLS will work cooperatively with the following:

- All partner and contracted service provider agencies;
- Other service providers and volunteer networks;
- Funding agencies;
- Appropriate State of Florida Departments and agencies including the Department of Elder Affairs, Department of Children and Families, Agency for Health Care Administration; and
- Local emergency management agencies.

IV. EMERGENCY/HURRICANE OFFICE PREPARATION CHECKLIST

A. Supplies

Each office will be supplied with the following items which are to be used *only for evacuation or hurricane preparation*.

- **Boxes, flat & unassembled** – for packing and transport of vital client and/or corporate records, emergency supplies, and equipment (needed at an alternate site). Note: all client

records are stored in steel file cabinets in the office. Any records that cannot be thus stored or which are critical and will be needed for some immediate action after the emergency event should be boxed and removed to a safe place/alternative site.

- **Box Tape** (several rolls) for assembly of above.
- **Plastic Sheeting Material** – (2 rolls) for covering unmovable/large equipment, bookcases, desks, etc.
- **Trash Bags** – (2 boxes) large size plastic; use to carefully *double bag* (avoiding tears, holes) office equipment (computers, printers, etc.) which are not being moved at the time.
- **Duct Tape** – (four 2" rolls) to be used to seal plastic sheeting over files, desks, equipment, bookcases, etc.

B. Guidelines

Generally, take only those items absolutely necessary to be able to conduct business for a short period of time (1-7 days) in the event that the offices cannot be re-entered or accessed. Those items should include basic office supplies, bond paper, letterhead, forms, pencils, paper clips, etc.; current/critical client case files; calendars; postage machine, scale, and tapes; and a computer system and printer if at all possible.

C. Office Preparation

Preparations should begin as soon as it is evident that an event is imminent or when notified by an authorized local agency that evacuation or other preparatory operations/actions are necessary.

D. Checklist

- All GLS staff notified
- Other agencies/funders notified (if/as needed)
- Clients notified of situation (if/as needed)
- Emergency supplies distributed to staff
- Files reviewed for criticality and filed in steel cabinet or boxed and moved (if/as needed)
- Equipment to be moved is prepared and moved
- Equipment remaining is sealed/secured
- Windows and doors prepared
- Desks, files, books, etc., covered with plastic sheeting
- All phones, electrical equipment, and cords unplugged/off floors
- Staff telephone numbers for call tree are verified
- A/C and/or heat turned off

V. OPERATIONS DIRECTION AND CONTROL

A. Emergency Operations

During the emergency/hurricane conditions, GLS may undergo a revision of titles for some positions of the organization so that tasks can be accomplished through an effective emergency organizational structure and centralized facility to provide the direction, control, and coordination of all phases of GLS emergency operation.

B. Notification

During an emergency, staff will be notified by his/her supervisor as to conditions, office preparations, and plans for communication after the event. It is strongly recommended that if families of staff must be evacuated that this be accomplished early so that staff's location, telephone number, etc. can be coordinated with their supervisor for purposes of recall after the emergency has passed. A call tree of phone numbers, designating who calls whom, is distributed to all managers and is updated at least annually.

C. Manager Responsibilities

It is the responsibility of each manager/supervisor to maintain a current telephone listing of their direct-reports and to see that a copy is sent to the Fiscal & Human Resources Coordinator for overall coordination. Local office managers will also be asked to assist the operations team with identifying, coordinating with, and obtaining approval for the use of a secondary alternate site(s) to conduct GLS business during the recovery phase of a disaster/hurricane in the event GLS offices are uninhabitable.

D. Staff Responsibilities

It is critical for all GLS staff members to realize that a disaster/hurricane event is not a holiday situation. The need for GLS to be able to recover and continue serving our clients is a high priority. It is the responsibility of each staff member to keep his/her manager and the Fiscal & Human Resources Coordinator advised of current telephone/address information. It is the responsibility of all staff members to make themselves available for GLS preparation and recovery operations at the direction of the appropriate emergency manager/administrator. Temporary office reassignments may be required following an event.

VI. RECOVERY OPERATIONS GOALS

A. Immediate Recovery

Includes the assessment of damages to GLS facilities, equipment and records; the restoration of minimal operating capability at GLS offices and; the stabilization of GLS offices and/or equipment and records so that further damages are avoided.

B. Short-term Recovery

Focuses on returning GLS to as near normal conditions as may be possible through restoration of GLS offices, equipment and records; the clean-up of any debris from the event; and a damage assessment and data collection for damage reports/claims. Services will be provided at functional offices, emergency/community centers, and outreach sites. The entire staff is expected to participate in the delivery of legal services, absent compelling personal reasons. Information, referrals, and legal assistance will be provided to assist clients with the following matters: application for disaster aid, insurance settlements, and other legal situations relevant to receipt of relief.

C. Long-term Recovery

Is defined as the return of GLS to its condition prior to the disaster event.

VII. OFFICE LOCATIONS AND ALTERNATE SITES

Because hurricanes, floods, and tornadoes are major threats to Florida each year, it is important to note that GLS offices are located in evacuation zones.

Office Location	Evacuation Zone Potential Threat
Main Office & Administration 501 1 st Ave. North, Suite 420 St. Petersburg, FL 33701 Tel: 727-821-0726 Fax: 727-821-3340	<u>Evacuation Zone E</u> Must evacuate for Cat.5 or above; flooding, wind and/or rain damage
Bradenton Branch Office 1112 Manatee Ave E., 2 nd Floor Bradenton, FL 34208 Tel: 941-746-61 51 Fax: 941 -746-3661	<u>Evacuation Zone C</u> Must evacuate for Cat. 4 or above; flooding, wind and/or rain damage

GLS offices will close either when the local courthouse closes or at such earlier time as the executive director may determine to ensure staff and client safety. Offices will reopen when the executive director or his/her designee determines that it is safe to do so, based upon weather and

road conditions, staff availability, conditions of the office facilities, etc. As soon as the determination is made to reopen the offices, administrative and support staff from the affected location (i.e., St. Petersburg or Bradenton) will be notified via the phone tree process. If one of the two office locations is operational before the other, staff will be asked to report to the open office if – and only if – it is safe and practical to do so.

All GLS legal and administrative staff have agency-issued laptops as well, which enables them to work from home or other locations throughout the community. Staff may, at the discretion of their supervisors and on a case-by-case basis dependent on circumstances (e.g., staff have evacuated, their homes are damaged, they are in shelter, etc.), be allowed to work remotely as needed.

In addition, some staff may be assigned to offer GLS services at local partner agencies, community centers, and/or other local venues to be identified and arranged by the operations team as soon as possible following the disaster, during the immediate recovery phase and until all affected GLS offices are reopened. The operations team will work with county agencies to identify alternate office space and will notify staff accordingly via the phone tree.

VIII. PROTECTING DATA FILES AND PAPER DOCUMENTS

It is imperative that GLS have access to its files including but not limited to client files, donor information, programming details, financial records, and other pertinent information that is used on a daily basis. Therefore, all desktop computer and server-based data is backed up regularly, at the end of every business day using basic network back-up devices and through online backup vendors with redundant servers in other states. All data is safely stored off-site and allows GLS to retrieve backup data and use it at a remote location if needed.

Legal and administrative staff have secure access to GLS servers and data via password protected, encrypted virtual private network (VPN) connections when they are offsite. Furthermore, GLS utilizes cloud-based programs for as many functions as possible. All client case information is stored in Legal Server; all financial data is in Financial Edge; payroll is processed by ADP; and all email and basic office software capability is via Office 365 – all of which are cloud-based programs.

Despite GLS's intent to be 'paperless,' the agency still has some paper files, such as contracts, insurance documents, client files and original case documents, information, correspondence, employee files, board manuals, and more. Sensitive legal and human resource documents are stored in a fire proof safe or cabinet and are on the 4th floor of a building so they are safe from most disasters. All information is also scanned and stored on the server as backup.

IX. REGION IV LEGAL SERVICE COORDINATION

A. Introduction

The Region IV Disaster Plan is an agreement among the four legal aid providers in Region IV (i.e., west central Florida): Gulfcoast Legal Services, Legal Aid of Manasota, Community Law Program, and Bay Area Legal Services (BALS), to fully cooperate in providing services in the event of a disaster. It is essential for programs to cooperate in the provision of services to low income clients.

B. Communication

In the event of a disaster, each program will designate a person and an alternate to be the point of contact for communication among programs. That person will communicate the extent of the damage to their program offices as appropriate and any specific needs that the program has. The designated contact for GLS is the Interim Executive Director for Operations.

C. Service Locations

Each program will identify important community sites and share the addresses of such sites for distribution of flyers and other information including information about where existing or prospective clients should go for help.

D. Program Recovery Support

As soon as possible after a disaster, each program contact person will communicate with the other designees. In the event that a program has suffered severe destruction to its physical plant and cannot accommodate the legal needs of the community by shifting services to another office, the regional partners agree to discuss temporary use of their offices. At a minimum, one office will be provided for a migrating staff member in order for existing clients to have a means of contact with the appropriate program. In such circumstances, further accommodation will be made such as forwarding of mail or telephonic message for the office offering space.

E. Staff Support

In case of significant disaster, the regional partners will discuss reassignment of staff from one program to another to assist with client needs. Staff salary will continue to be paid by the donor (original) program.

F. Community Damage Assessment

As soon as possible after a disaster, program contacts will meet to assess local damage. Program contacts will gather information from county disaster management programs and will share this among the regional partners.

G. Client Outreach

Programs will undertake outreach to clients in coordination with county FEMA services. This will include informational flyers and client intake to identify disaster related problems including housing, insurance, and eligibility for FEMA assistance.

H. Pro Bono Legal Assistance

Regional Partners will coordinate with the Florida Bar Association to develop pro bono resources to assist with disaster related problems. Program contacts will identify needs for the pro bono volunteers.

X. ACTIVE SHOOTER PLAN

A. Profile of an Active Shooter

An “active shooter” is an individual actively engaged in killing or attempting to kill people in a confined and populated area; in most cases, active shooters use firearms(s) and there is no pattern or method to their selection of victims.

Active shooter situations are unpredictable and evolve quickly. Typically, the immediate deployment of law enforcement is required to stop the shooting and mitigate harm to victims.

Because active shooter situations are often over within 10 to 15 minutes, before law enforcement arrives on the scene, individuals must be prepared both mentally and physically to deal with an active shooter.

B. How to respond to an active shooter is in your vicinity

Quickly determine the most reasonable way to protect your own life. Remember that customers and clients are likely to follow the lead of employees and managers during an active shooter situation.

1. Evacuate

If there is an accessible escape path, attempt to evacuate the premises. Be sure to:

- Have an escape route and plan in mind
- Evacuate regardless of whether others agree to follow
- Leave your belongings behind
- Help others escape, if possible
- Prevent individuals from entering an area where the active shooter may be
- Keep your hands visible

- Follow the instructions of any police officers
- Do not attempt to move wounded people
- Call 911 when you are safe

2. Hide out

If evacuation is not possible, find a place to hide where the active shooter is less likely to find you. Your hiding place should:

- Be out of the active shooter's view
- Provide protection if shots are fired in your direction (i.e., an office with a closed and locked door)
- Not trap you or restrict your options for movement
- To prevent an active shooter from entering your hiding place:
 - Lock the door
 - Blockade the door with heavy furniture
- If the active shooter is nearby:
 - Lock the door
 - Silence your cell phone and/or pager
 - Turn off any source of noise (i.e., radios, televisions)
 - Hide behind large items (i.e., cabinets, desks)
 - Remain quiet
- If evacuation and hiding out are not possible:
 - Remain calm
 - Dial 911, if possible, to alert police to the active shooter's location
 - If you cannot speak, leave the line open and allow the dispatcher to listen

3. Take action against the active shooter.

As a last resort, and only when your life is in imminent danger, attempt to disrupt and/or incapacitate the active shooter by:

- Acting as aggressively as possible against him/her
- Throwing items and improvising weapons
- Yelling
- Committing to your actions

C. How To Respond When Law Enforcement Arrives

Law enforcement's purpose is to stop the active shooter as soon as possible. Officers will proceed directly to the area in which the last shots were heard.

- Officers usually arrive in teams of four (4)
- Officers may wear regular patrol uniforms or external bulletproof vests, Kevlar helmets, and other tactical equipment
- Officers may be armed with rifles, shotguns, handguns

- Officers may use pepper spray or tear gas to control the situation
- Officers may shout commands, and may push individuals to the ground for their safety

1. How to react when law enforcement arrives:

- Remain calm, and follow officers' instructions
- Put down any items in your hands (i.e., bags, jackets)
- Immediately raise hands and spread fingers
- Keep hands visible at all times
- Avoid making quick movements toward officers such as holding on to them for safety
- Avoid pointing, screaming and/or yelling
- Do not stop to ask officers for help or direction when evacuating, just proceed in the direction from which officers are entering the premises

2. Information to provide to law enforcement or 911 operator:

- Location of the active shooter
- Number of shooters, if more than one
- Physical description of shooter/s
- Number and type of weapons held by the shooter/s
- Number of potential victims at the location

The first officers to arrive to the scene will not stop to help injured persons. Expect rescue teams comprised of additional officers and emergency medical personnel to follow the initial officers. These rescue teams will treat and remove any injured persons. They may also call upon able-bodied individuals to assist in removing the wounded from the premises.

Once you have reached a safe location or an assembly point, you will likely be held in that area by law enforcement until the situation is under control, and all witnesses have been identified and questioned. Do not leave until law enforcement authorities have instructed you to do so.

3. Good practices for coping with an active shooter situation:

- Be aware of your environment and any possible dangers
- Take note of the two nearest exits in any facility you visit
- If you are in an office, stay there and secure the door
- If you are in a hallway, get into a room and secure the door
- As a last resort, attempt to take the active shooter down. When the shooter is at close range and you cannot flee, your chance of survival is much greater if you try to incapacitate him/her.

XI. PERSONAL/PHYSICAL SAFETY PRECAUTIONS

- In case of an emergency, do not hesitate to call 911.
- Be aware of your surroundings and report any suspicious behavior to your supervisor. S/he can contact building security if needed.
- Keep all doors leading to the outer hallway/elevator area locked so that all visitors must check in with the receptionist.

- Listen for your office neighbor ... be prepared to intervene or call authorities if s/he is being threatened.
- If you witness a dangerous situation, close and lock your office door, call 911, and send an email to all staff in the office to alert them if needed.
- Know where the emergency exits, stairs, and fire extinguishers are located in your office.
- Keep your office space tidy and free of cords or other tripping hazards, which can be dangerous not only to you but also to clients or coworkers.

XII. FIRE AND EMERGENCY EVACUATION PLAN

A. Employee Responsibilities

- You are responsible for your own safety.
- In every instance, if an alarm sounds you should react as though it is a real emergency.
- Evacuate the building by following the posted evacuation routes to the indicated areas of assembly. When you are safely out of the building work your way back to the designated assembly area designated to your office.
- The designated assembly areas are assigned by the managers at each location.
- Alert fellow occupants to evacuate if you are not in immediate danger.
- Close, but DO NOT LOCK doors as you leave. Items requiring security may be placed in a safe, locker, locking file, or desk drawer on the way out. Turn off unnecessary equipment. These can be done only if not putting you in danger.
- Take your personal items with you such as bags and car keys. You may not be able to get back into the building.
- PLEASE NOTE: Your safety is most important. Do not return to your workstation to retrieve personal items if you are going to be at a remote location until the all clear has been sounded.
- DO NOT re-enter the building unless you have been notified to do so by the authorized official.

B. Fire Reporting Procedures

Any person discovering fire or smoke should (IN ORDER OF IMPORTANCE):

- Activate the manual fire alarm pull station.
- Notify Building Security and call 911.
- Information to Give to Operator
 - A. Your name, organization, and exact location of fire or smoke such as floor, department, room number, room name, north, south etc.
 - B. Type and extent of fire or smoke.
 - C. If you are trapped or cannot find an escape route.
 - D. Other information requested by the operator.

DO NOT SPEND TIME ON THE PHONE IF IT IS GOING TO PUT YOU IN DANGER.

- Use a fire extinguisher if it is a small controllable fire. Be sure to be between the fire and the exit to retreat if necessary.
- Secure Fire Area if possible by closing the door, if not occupied, in order to confine fire.

C. Fire Notification Procedures

Should you receive a notification of a fire, always ask the following information and write it down so you can relay it to fire officials:

- Person's Name
- Location of emergency
- Type of emergency
- If they are trapped or injured

Alert Building Security with the information received from caller and call 911.

D. FIRE EVACUATION PROCEDURES

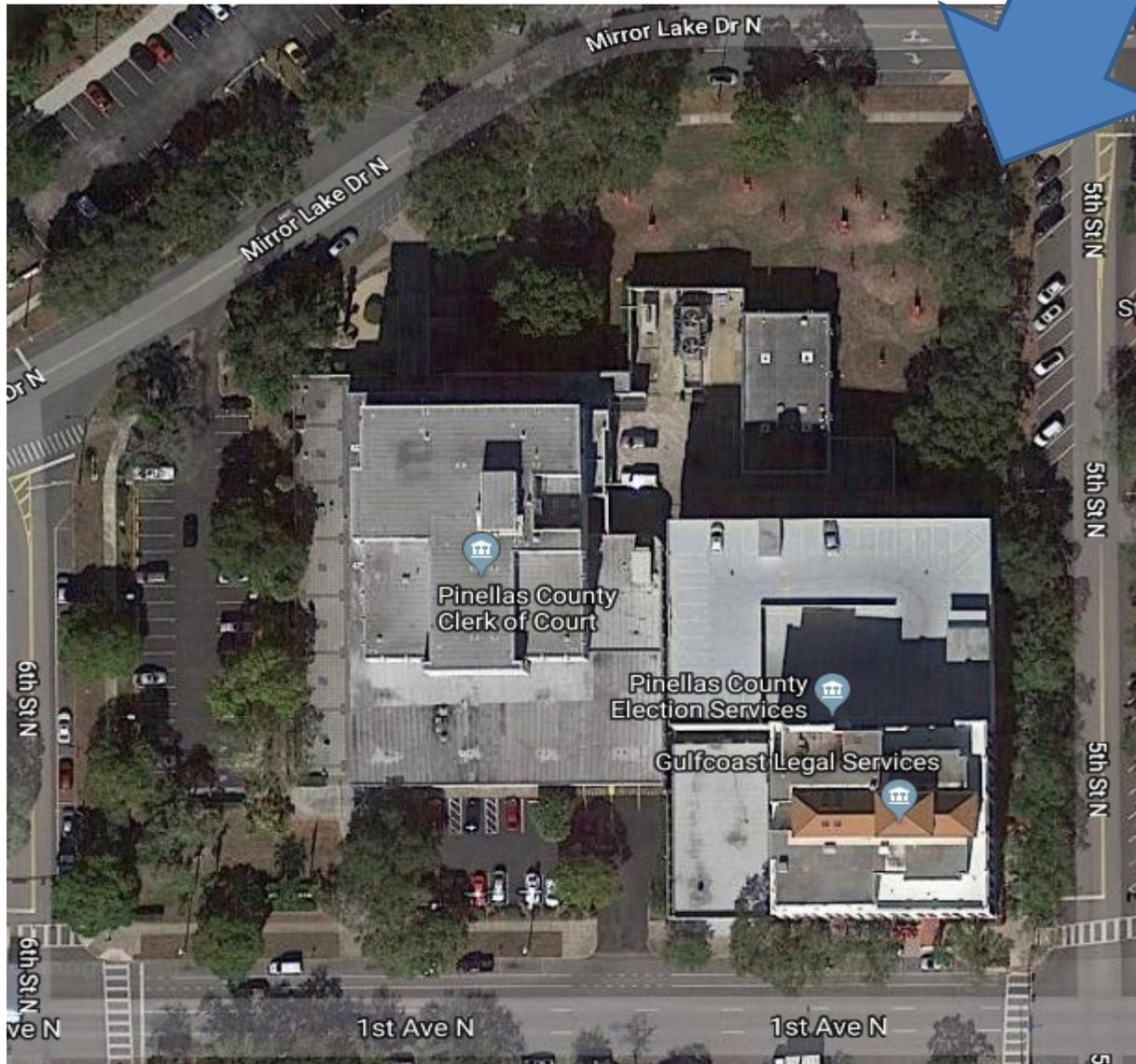
- When you are given the notification of a fire, leave the building immediately by the closest and safest route available.
- Use the stairways indicated for fire evacuation.
- DO NOT USE ELEVATORS
- After leaving the building, assemble in the parking lot across the street from the building entrance. Do not stand next to the building.
- Be aware of Emergency Vehicles.

E. SURVIVAL TIPS

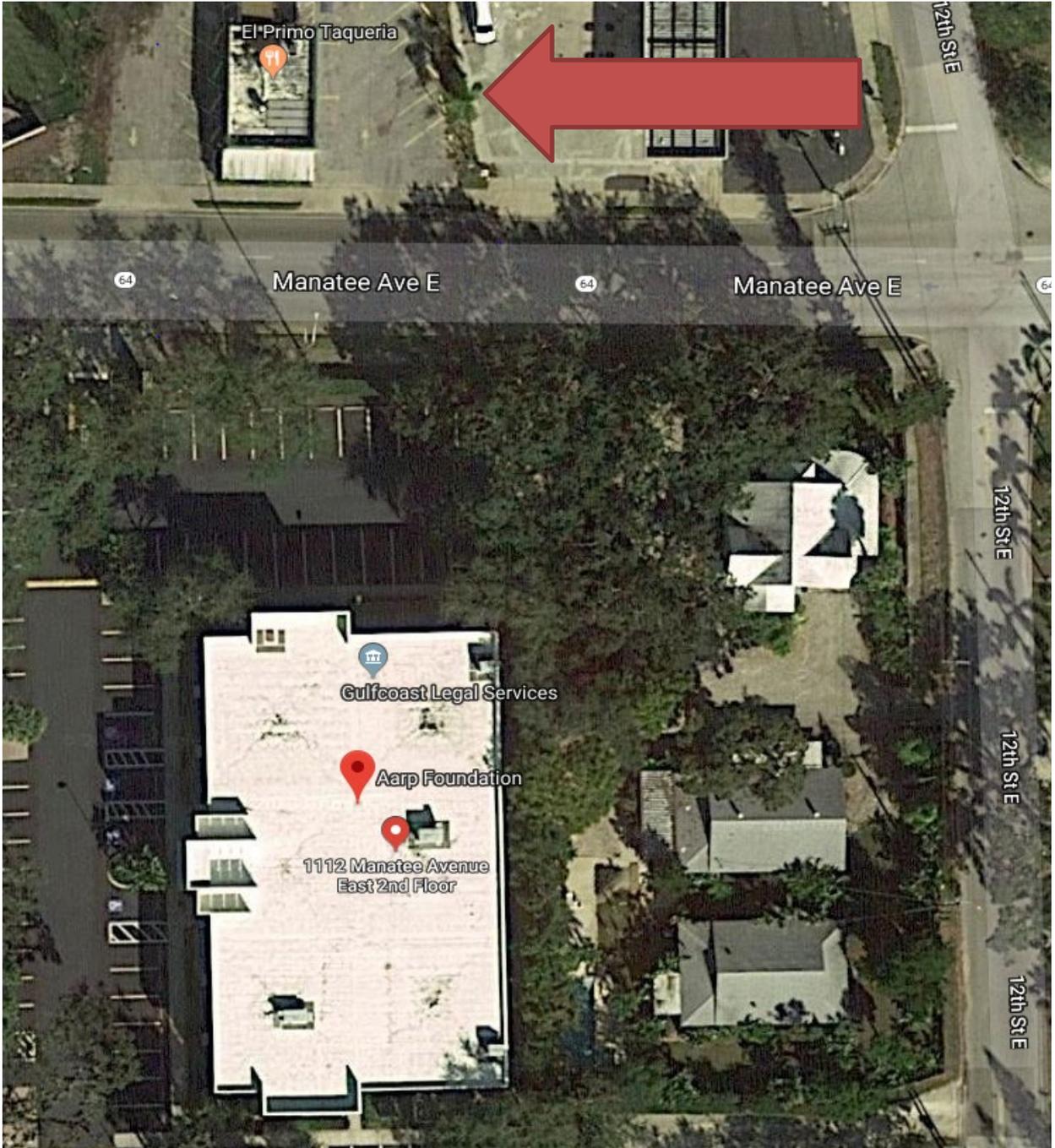
Use these procedures should you become trapped in the building during a fire:

- Use towels or clothing to block openings around doors or vents where smoke might get in.
- Put a wet cloth over your mouth or nose. Remember hot air can scorch the lungs, and smoke may contain toxic fumes.
- Place a signal in the window. The signal can be anything that will call attention to your location. Phone in your location to 911 if possible.
- Stay low to the floor to breathe the best air. While crawling, use walls as a guide to exit the building.
- It is advisable not to break windows. Often smoke from the outside of the building can enter through open windows. Breaking windows will put you at great risk from smoke entering from the outside, and will hamper rescue efforts.
- If trying to move an injured person, utilize a chair with wheels.
- Check doors before opening. If the door is hot, DO NOT OPEN IT. If the door is cool, open it slowly keeping your head to one side to avoid any blast of hot air.
- If clothes catch fire, "stop, drop, and roll."

F. EMERGENCY EVACUATION MEETING AREA FOR PINELLAS



G. EMERGENCY EVACUATION MEETING AREA FOR BRADENTON



XIII. EMERGENCY CONTACTS (“PHONE TREE”)

Supervisors will contact their direct-reports immediately upon notification of initiation of emergency protocols. GLS staff will use cell phones, text messaging, and Facebook social media to communicate as needed.

Baltodano	Betsy	[REDACTED]
Berrios	Arleen	[REDACTED]
Berrios	Francis	[REDACTED]
Blair	Jena	[REDACTED]
Bradford	Jacquelyn	[REDACTED]
Brown	Mishell	[REDACTED]
Camacho	Daniela	[REDACTED]
Chico	Tania	[REDACTED]
Clegg	James	[REDACTED]
Coet	Haley	[REDACTED]
Cuebas	Cynthia	[REDACTED]
Echeverri	Luis	[REDACTED]
Feinberg-Brown	Mara	[REDACTED]
Fry	Vilma	[REDACTED]
Greer	Tammy	[REDACTED]
Hauber	Elizabeth	[REDACTED]
Hendricks	Rebecca	[REDACTED]
Hewitt	Nora	[REDACTED]
Hynes	Kathryn	[REDACTED]
Ibasfalean	Cody	[REDACTED]
Jenkins	Cynthia	[REDACTED]
Jones	Sara	[REDACTED]
Karamalakos	Alex	[REDACTED]
Kushner	James	[REDACTED]
Laporte	Emely	[REDACTED]

Lee	Joanne	██████████
Meyer	Tara	██████████
Murray	Lisa	██████████
Nelson	Sarah	██████████
Pearce	Margaret	██████████
Pena Wells	William	██████████
Rivers	Brenda	██████████
Roosa	Monica	██████████
Rosencrantz	Caren	██████████
Ruiz	Sergio	██████████
Stover	Robin	██████████
Tashi	Malvina	██████████
Wait	Chelsea	██████████
Wilson	Rebecca	██████████



XIV. SUCCESSION PLAN FOR EXECUTIVE DIRECTOR

A. Background

In the event of the disability, death or departure of any of GLS's executive director, the following succession plan will be followed in order to facilitate the transition to either an interim or longer-term, permanent new executive director.

B. Temporary Absence of Executive

In the case of a temporary absence (less than three months), the most senior Deputy Director will be appointed by the Board of Directors as the acting executive director. Re-appointment will be required following an initial 90-day period. The interim executive director may be offered: (1) a temporary salary increase or (2) a bonus at the conclusion of the appointment and will report directly to the Board President during the interim period.

C. Permanent Departure of Executive

Upon permanent termination of the executive director, the following formal succession plan should be followed in order to identify the best qualified candidates for the agency and to ensure a productive transition period.

D. Communication Plan

A communication plan will include the preparation of internal and external notifications about the transition period at GLS to such audiences as staff, volunteers, community partners, funders, governmental contract contact persons, civic leaders, print and electronic press, foundation program officers, and major donors. It will be the responsibility of the Executive Committee of the Board of Directors to prepare the appropriate announcements and to delegate responsibility for addressing any future inquires, including from the print and electronic media, until such time that an interim executive director is appointed.

E. Appointment of Search/Transition Committee

The Executive Committee will appoint a Search or Transition Committee comprised of at least one member of the Executive Committee, Chair of Personnel Committee, one or two additional Board Members and at least one senior level GLS staff member as deemed necessary. Members should be recruited to serve after determining a calendar of required meetings and a timeline for the completion of the Committee's work.

F. Internal Board/Senior Management Assessment

Prior to launching an external search, a survey instrument should be developed and administered with the Board of Directors and key management personnel in order to conduct an internal assessment for planning purposes.

G. Appointment of Interim Executive Director

The Search Committee, or one or more representatives of the Committee, may conduct a meeting with the senior-most Deputy Director about his/her availability and the terms for an interim arrangement, and/or may approach a current/past Member of the Board of Directors for the position. The appointment of the interim executive director should be deemed concluded upon the execution of a written letter of appointment of a permanent executive director.

H. Candidate Search Process

Following the appointment of an interim executive director, the Search Committee may choose to utilize a search firm with expertise in legal services or non-profit management to recruit qualified candidates. Once prospective firms have been selected, the Search Committee shall schedule interviews.

The following key steps need to be pursued in order to conduct a high-quality and effective executive search process. Steps include the following and should be coordinated in tandem with the final Search firm, if applicable:

- Publication of job advertisement
- Collect resumes for consideration
- Review and score resumes
- Conduct first round of interviews between Search Committee and candidates
- Conduct second round of interviews
- Presentation of Final Candidate to the Board of Directors
- Meeting with senior and program management staff and candidate
- Offer and acceptance of employment
- Announcement of agency selection and start date of new executive
- Development of key elements of a training and orientation period for new Executive Director
- Assemble/update key, vital information for the new Executive Director
- Plan formal welcome/social event to launch the new Executive Director's tenure

I. Annual Review

The Plan will be subject to annual review by the GLS Board of Directors.

POLICIES & PROCEDURES

Pandemic Preparedness & Response Plan

Effective March 17, 2020



In response to the novel coronavirus COVID-19 pandemic, GLS has developed the following workplace policies and procedures, which are subject to change as the situation evolves.

GLS's Pandemic Preparedness & Response Plan is designed to:

- Maintain a safe and healthy workplace while minimizing the transmission of the virus and
- Sustain services to our clients through modified continuing operations.

In compliance with OSHA and CDC guidance, GLS encourages employees to 1) stay home if they are sick, 2) regularly wash their hands and take proper hygienic measures, 3) avoid shaking hands, and 4) avoid close contact with coworkers, among other steps recommended by the CDC. As such, all GLS staff are urged to take basic preventive measures to avoid exposure to or infection by the COVID-19 virus, including but not limited to the following:

- Employees who have symptoms of acute respiratory illness must not come to work until they are free of fever, signs of a fever, and any other symptoms for at least 24 hours, without the use of fever-reducing or other symptom-altering medicines (e.g., Tylenol, cough suppressants, etc.).
- Employees must notify their supervisor and not work while they are sick.
- Employees must notify their supervisor of any planned domestic or international travel and plan not to return to the office for up to two weeks following said travel.
- Employees are encouraged to work remotely to the extent possible and practical, but must coordinate with their supervisor.
- Employees are encouraged to practice self-care to reduce likelihood of infection and to ease feelings of stress or anxiety about these events.

Temporary Leave/Paid Time Off (PTO) Policy

GLS prioritizes the health, safety, and wellbeing of our staff. Therefore, effective immediately, GLS's workplace policies are being modified in consideration of the pandemic. These temporary policy will be revisited regularly, as the public health crisis warrants, and staff will receive updated information via email. Unless otherwise stated, GLS's personnel policies continue to be in effect and should be followed by all staff. PTO policies remain the same and employees with available hours may request leave to their supervisors as appropriate. The following points apply specifically to the current situation:

- Employees may use available PTO for self-isolation or quarantine, when it is required or recommended by public health authorities/guidelines or by health care providers (e.g., for persons over age 60 or who have certain medical issues that put them at increased risk).
- Employees may use PTO to care for immediate family and household members who are not ill but need care due to any COVID-19 related closures of nursing homes, schools, or day care centers, or for other breakdowns in care arrangements. Employees may not bring sick children or elders to work with them.

- Employees who run out of PTO may request approval for additional leave to the supervisor. Employees with insufficient accrued PTO may use up to 75 unearned PTO hours and be permitted to reflect up to 75 hours of negative PTO balance for illness, to meet self-isolation or quarantine requirements, or for the active care of others because of disruptions relating to COVID-19. GLS will review this accommodation periodically as conditions change. GLS will recoup the time borrowed from future accruals or will deduct it from the final paycheck of employees who terminate employment before they rebuild their accrued PTO, provided the deduction does not violate the FLSA.
- Time entries in LegalServer must reflect all hours worked and PTO taken.

Work From Home (WFH) Policy

GLS is instituting a “Work From Home” (WFH) policy to help control infection amongst employees, clients, and vendors. In compliance with EEOC regulations, this policy is applied in an equal manner to all employees. However, there may be circumstances and/or events, which require certain employees to be physically present for a limited amount of time (e.g., court appearance, to pick up mail, etc.). If these rare instances, the executive director and/or the supervisor will coordinate with the employee to establish a plan.

The ability to work from home is based solely upon the extraordinary events related to COVID-19 pandemic. The WFH arrangement is temporary and will be regularly evaluated based upon guidance from the CDC and other government agencies. WFH arrangements are expected to last during the period determined by GLS, and staff should not assume any specified period of time for working remotely. Attendance at your regular office location is an essential function of the job, which is being temporarily waived due to the COVID-19 pandemic and national state of emergency.

Work Assignments: GLS expects that each staff member who works from home will produce a viable work product and adhere to the same level of professionalism and confidentiality as in the office. The employee will meet with their supervisor to receive assignments and to review completed work. Under this policy, these meetings may be virtual, using GoToMeeting, or by phone. The employee will complete all assigned work according to procedures mutually agreed upon with the supervisor.

Work Location: Employees are to work at a GLS office or the WFH location (home address), and not from another unapproved site. If the employee plans to work from a location other than their home, it must be pre-approved by their supervisor to ensure the availability of secure VPN access. Failure to comply with this provision may result in termination of the WFH arrangement and/or other appropriate disciplinary action.

Work Hours: Unless otherwise approved by their supervisor, employees’ work hours should remain the same as usual. Per the FLSA, all hourly employees will be paid for all hours worked, regardless of whether the work is performed at home or in the office. Breaks of thirty minutes or more remain uncompensated as long as the employee is completely off duty. As always, all work time must be reported in LegalServer; there is no working “off the clock.”

No overtime may be worked without advance approval from the employee's supervisor. Failure to obtain proper advance approval for overtime work may result in termination of the WFH arrangement and/or other appropriate disciplinary action.

GLS will monitor hours that employees are logged into LegalServer and the VPN as needed.

Equipment & Applications: Employees are expected to use the GoToConnect app to receive and place client phone calls through GLS's VOIP phone portal and to take their GLS-issued laptop, mouse, and keyboard to their home office for use during the WFH arrangement. GLS equipment must be protected against damage and unauthorized use. GLS equipment will be serviced and maintained by GLS in partnership with our IT vendor, iVenture Solutions. Employees may contact iVenture for assistance in setting up VPN (Virtual Private Network) access, which will allow employees to create a secure connection to the GLS network over the Internet.

Expenses: GLS will not be responsible for operating costs, home maintenance, or any other incidental costs (e.g., utilities, cell phone access, etc.), associated with the use of the employee's residence while working from home. Employees will still be eligible for reimbursement of authorized expenses incurred while conducting official business for GLS.

Liability: GLS will not be liable for damages to the employee's property resulting from participation in the WFH arrangement. Employees must agree to hold GLS harmless against any and all claims, excluding workers' compensation claims while working from home. Each employee must ensure that their home office workspace is free of safety and fire hazards.

Workers' Compensation: Employees are covered by workers' compensation if injured in the course of performing official duties at the WFH location.

Client Records: The employee will apply safeguards to protect confidential client records from unauthorized disclosure or damage. All records, papers and correspondence must be safeguarded for their return to the office. Employees with access to confidential and exempt information who access it from home or who have it in their possession must take additional precautions to protect said confidential/exempt information from disclosure.

GLS, the employee's supervisor, or the employee may terminate a WFH arrangement at any time, and for any reason. If circumstances do not permit the employee to return to the office to work, then the employee who terminates this agreement must take PTO or unpaid leave in accordance with GLS policies and the CBA.

EMPLOYEE ACKNOWLEDGEMENT

I, the undersigned, hereby acknowledge that I have received a copy of the Pandemic Preparedness & Response Plan, which describes important information about GLS's procedures related to the COVID-19 pandemic specifically. I understand that I should consult with my supervisor or Human Resources if I have questions about the policy.

Employee Name (Printed)

Employee Signature

Date

COVID-19 Pandemic Plan for Re-opening



Background

Gulfcoast Legal Services (GLS) moved to operating remotely as of March 17, 2020. We have since implemented advanced threat protection protocols and deployed technology to ensure that clients have continued to have access to GLS services to the greatest extent possible while our physical office locations have been closed. Staff have done an exemplary job working remotely, and we will explore options for making remote work available on a permanent basis whenever possible and practicable. However, we realize that many of our vulnerable clients do not have access to or the skills to use technology to exchange key documents, including eligibility documentation. Our guiding principle is client service.

Moving Forward

The State of Florida began reopening in phases in May of 2020. GLS office buildings were open to the public as of June 1, 2020. As such, and in the interest of being accessible to all clients, GLS will likewise begin our phased reopening on June 1st. The following plan outlines our initial efforts to resume in-office services. The plan is focused, first and foremost, on ensuring staff and client safety to the greatest extent possible.



Staff Scheduling

Many staff indicated that they are doing fine working remotely. Several staff have children at home with no other available childcare. Others have medical concerns. With that said, we will make every effort to accommodate each individual to the best of our ability. However, we must remember why we are here: we serve the most vulnerable members of our community. They will need us more than usual now. We are already seeing a spike in domestic violence calls. Likewise, we have seen an increase in calls regarding life planning from concerned seniors. We are expecting more financial stability calls as unemployed or underemployed workers fall further into debt and begin facing collections or tax issues. And, of course, once the moratorium on evictions and foreclosure filings is lifted, our phones will be ringing off the hook with calls for housing assistance. **We must be ready.**



Paralegals, as frontline staff, were asked to be in the offices for regular business hours, beginning June 1, 2020, on a voluntary basis. We will monitor the situation, particularly once the housing calls increase, and make a decision regarding when all paralegals will be required to return to the office, based up workloads and productivity. The administrative team returned to the office, in staggered shifts to accommodate social distancing, beginning on June 8th.

Deputy Directors will be responsible for working with their teams to determine if and when attorneys should be in the office.

Each unit's Deputy Director will oversee scheduling to ensure coverage. To reduce the number of staff in the office at any given time, units will have a designated day for clients (and/or attorneys as necessary) to be in the office – as needed and by appointment only – as follows:

- ❖ Tuesday & Thursday: Financial Stability and Housing
- ❖ Wednesday & Friday: Family Law and Immigration

We will set up a system for reserving the safe, larger meeting spaces (i.e., conference rooms); no one will meet with clients in a small office. Attorneys will also have the option of meeting, via GoToMeeting or Teams facilitated by on-site paralegals, with clients who are in the office while the attorneys continue to work remotely, if indicated.

Accommodations

The plan for re-opening was informed by the following:

- Staff survey feedback
- State of Florida Department of Health and Governor's Executive Order
- CDC guidelines
- Federal Families First Coronavirus Response Act
- <https://www.eeoc.gov/wysk/what-you-should-know-about-covid-19-and-ada-rehabilitation-act-and-other-eeo-laws>

We consulted our employment lawyers at Johnson Pope for additional guidance with regard to staffing protocols. Under the Families First Coronavirus Response Act (FFCRA) rules, we are required to allow staff who themselves or a household member are subject to self-quarantine to stay home with pay (limitations apply). We are also required to allow staff who have children to stay home as long as their “school or place of care is closed (or child care provider is unavailable) due to COVID-19 related reasons.” *Please see the attached document for more information.*

We are not required to pay employees or even hold their jobs if they simply do not feel safe returning to work. Staff who have a documented disability and seek protection under the ADA may request reasonable accommodation, which may or may not be feasible, if they feel unsafe about returning to work. That's the gist of the legal requirements for GLS.

However, we are a family-friendly organization. We will be as flexible as possible, as long as the work gets done and our clients are served. With that said, if you or a member of your household have a high-risk medical condition that prohibits you from coming to the office at all, under any circumstances, please notify Tara Meyer, our HR Coordinator, in writing via email, copying your supervisor. We will consider your accommodation request and will work with you to coordinate remote work until your/their physician clears you to return to work.

If you have a child who requires care and have no one else to watch your child during any work hours so that you can come to the office even on a limited basis, please also notify Tara and your supervisor so that we can accommodate you to the extent possible. Our goal is to be as fair and equitable as possible to everyone – those who have children or medical needs as well as those who do not.



Personal Protective Equipment (PPE) & Physical Safeguards

GLS is procuring the following PPE to prohibit the spread of the coronavirus in accordance with CDC and Florida Department of Health guidelines:

- **Hand Sanitizer** – each desk and conference room will have a pump dispenser; dispensers will also be mounted throughout the buildings and offices
- **Disinfectant** – cleaning solutions will be available to disinfect areas before and after each use or as needed/desired
- **Disposable Face Masks** – will be available to be given to any visitors permitted to enter the office area
- **Reusable Face Masks** – each staff member will be given two (2) reusable face masks for personal use
- **Face Shields** – staff will be provided with personal face shields for use when meeting with others as desired, in addition to face masks; masks are required to be worn, but shields are optional
- **Sneeze Guards** – will be placed in areas to be used for meetings (i.e., in conference rooms where social distancing of six (6) feet can be implemented safely)
- **Hand Soap** – will be available in the bathrooms and in the staff kitchen areas
- **Drop Boxes** – locked deposit boxes will be used for clients to drop off paperwork without requiring direct contact with staff
- **Signage** – floors will be marked to encourage standing 6 feet apart
- **Screening Questionnaires** – visitors will be required to be screened for possible infection prior to entry
- **Gloves** – for handling paperwork
- **Thermometers** – are available at each office so that staff and clients can be checked for fever prior to entry

Procedures

The following procedures and protocols must be followed to protect staff and client safety beginning immediately and continuing until further notice.

- Clients will be scheduled for appointments ONLY if they absolutely *must* be seen in-person and *must* agree to be screened for contagion, use hand sanitizer prior to entry, and wear a GLS-provided disposable mask for the entire duration of their meeting.
- All client and visitor meetings will be held in designated conference rooms. No meetings will be held in staff offices.
- All meetings will be conducted with the use of sneeze guard barriers between the staff and client/visitor.
- Meeting areas must be cleaned after each use.
- Social distancing will be strictly enforced.



The restrooms will be locked so we can control who uses them. They are being cleaned and disinfected frequently by the building management.

The A/C units and all ductwork in our buildings have been cleaned and sanitized. The County has also installed air purifiers to the systems in our St. Pete office building. *We feel confident that staff can return to our offices safely, with minimal concern.*

Clients who simply need to drop off documents should be encouraged to place them in the designated GLS drop boxes. The boxes will be locked and secure. We will develop a schedule for checking the boxes depending on the staffing structure.

Have clients bring their own pen if they will be signing documents!

A note about gloves: The most recent information from the CDC indicates that the risk of contracting coronavirus from surfaces is very low. However, GLS will provide gloves for staff who are tasked with handling client documents. While documents and packages are unlikely to spread disease, gloves may be worn when handling paperwork. It is imperative that gloves be removed properly and discarded immediately. Staff are required to wash their hands after touching surfaces and, always, before touching their face, eyes, nose, or mouth.



Thank you for all that you do for GLS and your clients. We look forward to getting back to our new normal, whatever that looks like. Be safe and stay well.

EMPLOYEE RIGHTS

PAID SICK LEAVE AND EXPANDED FAMILY AND MEDICAL LEAVE UNDER THE FAMILIES FIRST CORONAVIRUS RESPONSE ACT

The **Families First Coronavirus Response Act (FFCRA or Act)** requires certain employers to provide their employees with paid sick leave and expanded family and medical leave for specified reasons related to COVID-19. These provisions will apply from April 1, 2020 through December 31, 2020.

▶ PAID LEAVE ENTITLEMENTS

Generally, employers covered under the Act must provide employees:

Up to two weeks (80 hours, or a part-time employee's two-week equivalent) of paid sick leave based on the higher of their regular rate of pay, or the applicable state or Federal minimum wage, paid at:

- 100% for qualifying reasons #1-3 below, up to \$511 daily and \$5,110 total;
- ⅔ for qualifying reasons #4 and 6 below, up to \$200 daily and \$2,000 total; and
- Up to 12 weeks of paid sick leave and expanded family and medical leave paid at ⅔ for qualifying reason #5 below for up to \$200 daily and \$12,000 total.

A part-time employee is eligible for leave for the number of hours that the employee is normally scheduled to work over that period.

▶ ELIGIBLE EMPLOYEES

In general, employees of private sector employers with fewer than 500 employees, and certain public sector employers, are eligible for up to two weeks of fully or partially paid sick leave for COVID-19 related reasons (see below). *Employees who have been employed for at least 30 days* prior to their leave request may be eligible for up to an additional 10 weeks of partially paid expanded family and medical leave for reason #5 below.

▶ QUALIFYING REASONS FOR LEAVE RELATED TO COVID-19

An employee is entitled to take leave related to COVID-19 if the employee is unable to work, including unable to **telework**, because the employee:

- | | |
|---|---|
| <ol style="list-style-type: none">1. is subject to a Federal, State, or local quarantine or isolation order related to COVID-19;2. has been advised by a health care provider to self-quarantine related to COVID-19;3. is experiencing COVID-19 symptoms and is seeking a medical diagnosis;4. is caring for an individual subject to an order described in (1) or self-quarantine as described in (2); | <ol style="list-style-type: none">5. is caring for his or her child whose school or place of care is closed (or child care provider is unavailable) due to COVID-19 related reasons; or6. is experiencing any other substantially-similar condition specified by the U.S. Department of Health and Human Services. |
|---|---|

▶ ENFORCEMENT

The U.S. Department of Labor's Wage and Hour Division (WHD) has the authority to investigate and enforce compliance with the FFCRA. Employers may not discharge, discipline, or otherwise discriminate against any employee who lawfully takes paid sick leave or expanded family and medical leave under the FFCRA, files a complaint, or institutes a proceeding under or related to this Act. Employers in violation of the provisions of the FFCRA will be subject to penalties and enforcement by WHD.



WAGE AND HOUR DIVISION
UNITED STATES DEPARTMENT OF LABOR

For additional information
or to file a complaint:
1-866-487-9243
TTY: 1-877-889-5627
dol.gov/agencies/whd





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/13/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Wallace Welch & Willingham, Inc. 300 1st Ave. So., 5th Floor Saint Petersburg FL 33701	CONTACT NAME: Suzi Baker PHONE (A/C. No. Ext): 727-522-7777 E-MAIL ADDRESS: certificates@w3ins.com		FAX (A/C. No.): 727-521-2902
	INSURER(S) AFFORDING COVERAGE		
INSURED Gulfcoast Legal Services, Inc. 501 1st Ave N, Suite 420 Saint Petersburg FL 33701	GULFCOA-20	INSURER A : Alliance of Nonprofits for Ins. RRG	NAIC # 10023
		INSURER B : Travelers Casualty & Surety Co	19038
		INSURER C :	
		INSURER D :	
		INSURER E :	

COVERAGES

CERTIFICATE NUMBER: 2030330435

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		202048487	8/22/2020	8/22/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 20,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	<input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			202048487	8/22/2020	8/22/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			202048487UMB	8/22/2020	8/22/2021	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A B	Liquor Liability Crime			202048487 105973011	8/22/2020 8/1/2020	8/22/2021 8/1/2023	Ea Occ/Gen Agg 1,000,000 Employee Theft 300,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Insurer B: #107134305, Cyber Liability, Effective 8-8-20 through 8-8-21, \$1 million Aggregate Limit & \$5,000 deductible.

Insurer A: #202048487 Abuse & Molestation, Effective 8-1-20 through 8-1-21 - \$1,000,000 each occurrence/aggregate & \$0 deductible.

Pinellas County Board of County Commissioners is additional insured with respect to General Liability if required by written contract.

CERTIFICATE HOLDER**CANCELLATION**

Pinellas County Board of County Commissioners
 315 Court Street
 Clearwater FL 33756

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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Pinellas Community Foundation
Pinellas CARES Nonprofit Partnership Fund Grant Application

Organization Name: Gulfcoast Legal Services

Project Name: GLS Eviction Mitigation Project 2020

FROM (date): 9/2020 TO (date): 12/30/2020

Budget Category/Line Item	Organizational Budget - Total	Pinellas CARES Grant
Personnel (<i>salaries, wages, benefits, payroll taxes, time allocation on the project for all personnel involved in program</i>)	\$ 2,278,644	\$ 33,602
Equipment (<i>computers, furniture, etc., less than \$3,000 per item</i>)	\$ 49,500	\$ -
Supplies (<i>office materials, program related purchases, program necessities to deliver services, etc.</i>)	\$ 6,386	-
Occupancy (<i>property rent, mortgage, utilities, telephone, internet, etc. assigned as program expenses</i>)	\$ 223,602	\$ -
Local Travel (<i>mileage, tolls, parking for regular local travel, rental/leasing cost of transportation</i>)	\$ 47,050	\$ -
Training (<i>staff development, conferences, long distance travel</i>)	\$ 15,600	
Design, Printing, Marketing & Postage (<i>for direct program related services only</i>)	\$ 33,680	\$ 7,500
Capital (<i>Buildings, vehicles, equipment \$3,000 or more per item. The purchase of capital must represent the lower cost option for the period during which the purchased asset would be used for COVID-response activities</i>)		\$ -
Purchased Services (<i>consultants, legal, accounting services, logistical partner costs, technology enhancements, computer software licensing/agreements</i>)	\$ 197,524	\$ -
De Minimis Cost (<i>Administration Fee, Indirect Cost, etc.</i>)		\$ 4,110
Misc/Other (<i>Legal Research, Litigation, Membership Dues, etc.</i>)	\$ 127,492	\$ -
In Kind Expenses	\$ 385,000	\$ -
Subcontract (<i>St. Petersburg Free Clinic</i>)		\$ 550,000
TOTAL	\$ 3,364,478	\$ 595,212

Pinellas Community Foundation
PCF CARES Application
BUDGET NARRATIVE FORM

Organization Name: Gulfcoast Legal Services
Project Name: GLS Eviction Mitigation Project 2020
FROM (month/year): 09/2020 TO (month/year): 12/2020

Personnel (salaries, wages, benefits, payroll taxes, time allocation, and a brief description of the responsibilities on the project for all personnel involved in program)

Personnel consists of a .1FTE housing attorney and .1FTE housing paralegal. It also includes a .1FTE financial stability attorney, as well as a .05FTE for the Grants Manager and .2FTE for the Volunteer Manager. Total salary costs are \$25,848.

Salaries	Base	FTE	Comments
Staff Attorney (.1FTE)	\$ 50,500	\$ 5,050	William (housing)
Paralegal 1 (.1FTE)	\$ 34,234	\$ 3,423	Arleen (housing)
Staff Attorney (.1FTE)	\$ 46,000	\$ 4,600	Tania (financial stability)
Grants Manager (.05FTE)	\$ 42,450	\$ 2,123	Chelsea (awareness campaign)
Volunteer Manager (.2FTE)	\$ 53,261	\$ 10,652	Mishell (pro bono coordination)

Personnel costs also include benefits budgeted at 30% which equals \$7,754.

Direct service staff will be responsible for handling cases from start to finish, including interviewing, researching cases, and going to court when necessary. The Grants Manager will lead the public awareness campaign for the program, ensuring landlords and renters are aware of the availability of the rental assistance funds and legal aid assistance. The Volunteer Manager will work with volunteer attorneys to ensure pro bono attorneys are obtained to take cases that are out of our scope or to work with overflow clients. These FTE costs are an expansion of current work. Costs are not included in current budgeted expenditures.

Equipment (computers, phone, furniture, etc., less than \$3,000 per item)

N/A

Supplies (office materials, program related purchases, program necessities to deliver services, etc.)

N/A

Occupancy (property rent, mortgage, utilities, telephone, internet, etc. assigned as program expenses)

N/A

Local Travel (mileage, tolls, parking for regular local travel, rental/leasing cost of transportation)

N/A

Design, Printing, Marketing & Postage (for direct program related services only)

\$7,500 is allocated to market GLS services in print, design, and radio advertising. This is an estimate based on actual past costs from similar campaigns and will include a targeted awareness campaign to local landlords as well as radio spots to target renters. The breakdown of funds is as follows.

\$5,000 for targeted awareness campaign to landlords:

- Postage: \$2,000
 - Vendor: MailCo
- Printing: \$2,500
 - Vendor: West Coast Graphics
- Design: \$500
 - Vendor: Skyway Media

\$2,500 for radio spots to target renters:

- 20 spots at \$125 per 30 second spot (nonprofit rate)
 - Vendors:
 - 92.5 FM, WYUU
 - 107.3 FM, WXGL

Capital (buildings, vehicles, equipment \$3,000 or more per item. The purchase of capital must represent the lower cost option for the period during which the purchased asset would be used for COVID-response activities)

N/A

Purchased Services (consultants, legal, accounting services, logistical partner costs, technology enhancements, computer software licensing/agreements)

N/A

De Minimis Cost (Administrative Fee, Indirect Cost, etc.).

GLS does not have an established percentage rate for De Minimis Cost and uses 10% as the established percentage rate. Total indirect costs are \$4,110.

Subcontract.

\$550,000 will be subcontracted to the St. Petersburg Free Clinic for direct rental assistance to GLS clients. \$500,000 will be direct rental assistance (with an average of \$5,000 per person budgeted) and \$50,000 will be a de minimis cost to assist with the administrative portion of vetting and distributing the rental assistance.

Organization**Address**

The Long Center	1501 N Belcher Rd.	Clearwater, FL 33765
CASA	1011 First Avenue North	St. Petersburg FL 33705
RCS Grace House	1552 S Myrtle Ave	Clearwater, FL 33756
Hispanic Outreach Center	612 Franklin St	Clearwater, FL 33756
St. Petersburg Free Clinic	863 3rd Ave N.	St. Petersburg, FL 33701
Daystar Life Center	1055 28th St S	St. Petersburg, FL 33712