

2026

Accommodations Tax Funds Request Application

Organization Name: Hilton Head Island Recreation Association

Project/Event Name: ATAX Application for Events

Executive Summary

An ATAX Effectiveness Measurement form has been attached to this application.

2026 Accommodations Tax Funds Request Application

Date Received: 08/15/2025

Time Received: 10:22 AM

By: Online Submittal

Applications will not be accepted if submitted after 4 pm on September 5, 2025

A. SUMMARY OF GRANT REQUEST:

ORGANIZATION NAME: Hilton Head Island Recreation Association

Project/Event Name: ATAX Application for Events

Contact Name: Leah Arnold

Title: Deputy Parks and Recreation Executive Director

Address: PO Box 22593, Hilton Head Island, SC 29925

Email Address:

leah.arnold@islandreccenter.org

Contact Phone: 843-681-7273

Event Date(s): March 21, 2026 , October 10, 2026, November 13th & 14th

Event Location(s): Lowcountry Celebration Park / Shelter Cove Community Park Head Island, SC 29928

Total Budget: \$463,110.00

Grant Requested: \$75,000.00

Provide a brief summary on the intended use of the grant and how the money would be used. (100 words or less)

This grant will support regional marketing and operations for three signature events: Wingfest, Jeep Island, and the Hilton Head Oyster Festival. Over the past 25 years, these events have grown into some of the most prominent community gatherings in the region. Wingfest has become the "Super Bowl" of the local chicken wing scene, drawing restaurants and wing enthusiasts from across the area. Jeep Island is a unique Lowcountry celebration that brings together jeep lovers of all kinds, held in conjunction with the popular Kiwanis Chili Cookoff. The Oyster Festival is a quintessential Lowcountry event, highlighting the region's coastal heritage with fresh local oysters. The primary objective is to attract visitors to the Island for an unforgettable weekend getaway while boosting tourism during the shoulder seasons—ultimately increasing overnight stays and supporting

How does the organization/project/event either drive tourism to Hilton Head Island or enhance the visitor experience on Hilton Head Island? How is this impact being measured? (100 words or less)

Tourism thrives on unique attractions and memorable events, which often inspire people to explore new destinations. On Hilton Head Island, signature events like Wingfest, Jeep Island, and the Oyster Festival serve as major draws, taking place at two of the Island's most scenic venues—Lowcountry Celebration Park, nestled in the heart of Hilton Head, and Shelter Cove Community Park, with its stunning views of Broad Creek. These events offer attendees the full Lowcountry experience, combining breathtaking natural beauty with the region's finest food and live entertainment. Visitors from across the nation and around the world travel to attend, and surveys consistently show a diverse geographic reach. These events have not only boosted local tourism but have also brought national recognition to the Lowcountry.

A. Total Number of Physical Tourists Served: 3750

A Tourist is considered a non-resident, traveling more than 50 miles to the Town of Hilton Head Island.

B. Total Number of Physical Visitors Served: 4030

A Visitor is considered a non-resident, who travels 50 miles or less to visit the Town of Hilton Head Island.

C. Total Number of Physical Residents Served: 4188

A Resident is considered any person who claims their property address within the limits of the Town of Hilton Head Island as their primary residence.

D. Total Number of Physical Patrons Served (A+B+C=D): 11968

How was the Number of visitors documented? (250 words or less)

The number of visitors is documented by documenting presale ticket sales, collecting zip codes / admission at the entrances and the surveying done at each event.

B. DESCRIPTION OF OPERATIONS:

1. For state reporting purposes, give a brief description of the organization. (250 words or less)

As a nonprofit organization, the Hilton Head Island Recreation Association is dedicated to enhancing the quality of life for residents of all ages. It provides, produces, and coordinates public recreation programs and community events while continuously assessing and responding to the evolving recreational needs of the community.

One of the Association's signature events, the 28th Annual Wingfest, will take place on March 21st at Lowcountry Celebration Park. This fan-favorite event will feature over 9,500 pounds of chicken wings served by more than 25 local restaurants, all competing for the title of "Best Wing of Hilton Head 2026." Guests can enjoy a full day of fun, including a kid's zone, rock climbing wall, and bungee jump, as well as March Madness games on a

big screen. The event also features the popular Wing Bobbing Contest for kids and the Wing Eating Contest, alongside live music from regional and national performers.

On October 10th, the 9th Annual Jeep Island returns to Lowcountry Celebration Park in partnership with the Kiwanis Chili Cookoff. This unique event will showcase one-of-a-kind jeeps from across the Southeast, with a jeep raffle adding to the excitement. Guests can also sample and vote on a wide variety of chilis prepared by Kiwanis Chili Cookoff participants.

Rounding out the season is the 23rd Annual Hilton Head Oyster Festival, taking place at Shelter Cove Park from 5–8 PM on Friday, November 13th, and continuing at Lowcountry Celebration Park on Saturday, November 14th from 11 AM–5 PM. This celebration of Lowcountry culture features a wide variety of local oysters, live entertainment, and a Pop-Up Shop showcasing handmade goods from local artisans.

2. Describe in detail how the requested grant funding would be used? *(250 words or less)*

Extensive research on current travel trends indicates that many visitors are now planning trips less than a month in advance and are primarily driving rather than flying. As a result, we anticipate increased vehicle traffic, making these events ideally positioned for a drive-market audience.

With the support of the requested ATAX grant funding, the Association aims to expand media outreach to key regional markets—including Atlanta, GA; Charlotte, NC; Columbia, Charleston, and Greenville, SC—using a mix of digital billboards, mobile billboard advertising, and targeted web-based marketing. In addition, dedicated event websites will be developed to further amplify promotional efforts.

To ensure effective use of grant funds, the Association has invested in both staff and equipment to conduct on-site surveys during events. These surveys will help identify where attendees are traveling from and guide future marketing efforts. Continued advertising investments will include regional media outlets such as WTOG and “Eat It and Like It” with Jesse Blanco.

The primary goal of the ATAX grant is to promote Hilton Head Island and the Lowcountry to regional visitors. By attracting new and returning guests, we aim to boost local tourism, stimulate the economy, and encourage future overnight stays and day trips.

An additional objective of the grant is to elevate the cultural arts component of our events by securing more regional musical acts. The Association will also partner with local hotels to promote the events and offer special lodging discounts. Marketing efforts will extend to visitors already on the Island during event weeks to enhance their stay and showcase the warmth and hospitality that defines the Lowcountry experience.

3. What impact would partial funding have on the activities, if full funding were not received? What would the organization change to account for partial funding? (100 words or less)

If the grant is not fully funded, we will need to carefully prioritize our regional marketing efforts to maximize visitor impact. Strategic decisions would also be required regarding which bands to feature, balancing audience appeal with budget constraints to ensure the greatest return on investment.

4. What is expected economic impact and benefit to the Island's tourism? (100 words or less)

The impact on tourism from these events is evident through zip code data collected at event entrances, which shows that nearly 50% of attendees are visitors. To further assess their effectiveness, the Association will again conduct surveys during Wingfest, Jeep Island, and the Oyster Festival weekends to gather insights and measure how these events influence travel to Hilton Head Island.

Historical data indicates that, whether or not attendees initially came specifically for the events, their overall experience on Hilton Head was enhanced by participating in these vibrant community gatherings. These events contribute meaningfully to visitor satisfaction and the Island's reputation as a welcoming, engaging destination.

5. In order to comply with the State's Tourism Expenditure Review Committee annual reporting requirements, **please classify your current grant request into the following authorized categories:**

1 - Destination Advertising/Promotion

Advertising and promotion of tourism so as to develop and increase tourist attendance through the generation of publicity.

85 %

2 - Tourism-Related Events

Promotion of the arts and cultural events.

15 %

3 - Tourism-Related Facilities

Construction, maintenance and operation of facilities for civic and cultural activities including construction and maintenance of access and other nearby roads and utilities for the facilities.

0 %

4 - Tourism-Related Public Services

The criminal justice system, law enforcement, fire protection, solid waste collection and health facilities when required to serve tourists and tourist facilities. This is based on the estimated percentage of costs directly attributed to tourist. Also includes public facilities such as restrooms, dressing rooms, parks and parking lots.

0 %

5 - Tourist Public Transportation

Tourist shuttle transportation.

0 %

6 - Waterfront Erosion/Control/Repair <i>Control and repair of waterfront erosion.</i>	0 %
7 - Operation of Visitor Information Centers <i>Operating visitor information centers.</i>	0 %
Total:	100 %

6. If not covered elsewhere in the application, please describe (a) how the organization will collaborate with other organizations to enhance tourism efforts, and (b) provide a venue or service not otherwise available to visitors to the Town of Hilton Head Island. (250 words or less)

The Association will partner with SCPRT, WTOC, and "Eat It and Like It" with Jesse Blanco to promote Hilton Head Island and elevate the visibility of Wingfest 2025, Jeep Island 2025, and the 2025 Hilton Head Oyster Festival. In addition, the Association will collaborate with local hotels to offer special room rates during these event weekends, encouraging extended stays and increased overnight tourism.

These events will also provide a significant boost to the local food and beverage industry, with over 40 local vendors and restaurants participating at no cost, engaging more than 15,000 attendees. From serving their best wings and showcasing a wide array of jeeps to highlighting the Lowcountry's freshest oysters, these businesses will have a valuable platform to promote their offerings.

To ensure a well-rounded experience, the Association will also engage a variety of community organizations as vendors, providing attendees with an authentic glimpse into the culture, flavor, and hospitality that make Hilton Head Island and the Lowcountry so special.

Each event will take full advantage of the stunning surroundings at Lowcountry Celebration Park and Shelter Cove Community Park, two of the Island's most scenic venues.

Guided by the Island Recreation Center's mission of "*We Build Community*," the goal of these events is simple: "*We Promote Our Community*."

7. Additional comments. (250 words or less)

C. FUNDING:

1. Please describe how the organization is currently funded. (100 words or less)

The Hilton Head Island Recreation Association is primarily funded through program fees, sponsorships, and grants. In 2024, Beaufort County contributed 4% and the Town of Hilton Head Island contributed 35% of the Association's overall budget. The remaining 61% is generated by the Association's Board of Directors through program revenues, fundraising efforts, and community events.

As outlined in our budget, the Association relies significantly on these community events to support children's scholarships, ensuring that no child is ever denied access to recreational or educational programs offered at the Island Recreation Center due to financial need.

2. Please also estimate, as a percentage, the source of the organization's total annual funding.

<u>39</u>	Government Sources	<u>10</u>	Private Contributions, Donations and Grants
15	Corporate Support, Sponsors	<u>12</u>	Membership, Dues, Subscriptions
<u>24</u>	Ticket Sales, or Sales and Services	<u>0</u>	Other

3. Has the organization requested other ATAX or any other funding from other public sources or organizations?

Yes ☐ No ☒

If so, please list top 3 sources and amounts.

D. FINANCIAL INFORMATION:

Fiscal Year Disclosure: Start Month: **July** End Month: **June**

Financial Statement Requirements:

1. The upcoming fiscal year's **operating budget** for the organization.

Budget Provided: **Yes**

2. The previous two fiscal years and current year-to-date **profit and loss reports** for the organization.

Current fiscal year Profit Loss Report Provided: **Yes**

Previous fiscal year Profit Loss Reports Provided:

2024- Previous FY 1

2025- Previous FY 2

3. The previous two fiscal years and current year-to-date **balance sheets**.

Current fiscal year Balance Sheet Provided: **Yes**

Previous fiscal year Balance Sheets Provided:

2024 - Previous FY 1

2025 - Previous FY 2

2023 - Previous FY 2

4. The previous two years and current year **IRS Form 990 or 990T**.

Current year IRS Form 990 or 990T Provided: **Yes**

Previous IRS Form 990 or 990T Years Provided:

2023 - Previous FY 1

2022 - Previous FY 2

2021 - Previous FY 2

E. FINANCIAL GUARANTEES AND PROCEDURES:

1. Provide a copy of the **official minutes** wherein the organization approves the submission of this application.

An official set of minutes have been attached to this application.

2. Indicate whether your organization has procurement guidelines, which are utilized and followed in the expenditure of ATAX grant funds.

☒ Utilize and follow organization's own procurement guidelines

☐ Our organization does not have or follow procurement guidelines

F. MEASURING EFFECTIVENESS:

If you received 2024 or 2025 HHI ATAX funds

1. List any ATAX award amounts received in 2024 and/or 2025.

2023	\$60,000.00	Wingfest, Jeep Island and Oyster Festival
2024	\$60,000.00	Wingfest, Jeep Island and Oyster Festival
2025	\$75,000.00	Wingfest, Jeep Island and Oyster Festival

2. How were the ATAX funds used? To what extent were the objectives achieved? The ATAX Effectiveness Measurement spreadsheet available in the application portal will show the numerics. Use the space below for verbal comments. *(200 words or less)*

ATAX funds awarded to the Hilton Head Island Recreation Association have been instrumental in supporting regional marketing efforts for both Hilton Head Island and its signature events. We have partnered with prominent regional media outlets including the Charlotte Observer, The Local Palate, The Post and Courier, and WTOC to expand our reach and attract visitors.

In the past year, we also allocated a portion of the funds to cover operating costs, specifically to bring in regional bands that elevate the entertainment value of our events. We remain committed to continuously exploring new opportunities to enhance regional marketing and actively seek collaborative partnerships with other organizations to maximize the impact of our promotional efforts.

3. What impact did this have on the success of the organization/event and how did it benefit the community? *(200 words or less)*

The Island Recreation Association successfully expanded its regional marketing reach this year, thanks to a modest increase in ATAX funding. The growing attendance at events and positive survey feedback demonstrate the continued success and impact of these efforts.

These events take place during traditionally slower tourism seasons, providing a valuable boost to the hospitality industry. By promoting Hilton Head Island regionally, the events attract more visitors during these key times. Local hotels, restaurants, and venues are encouraged to participate as vendors and sponsors, offering them the opportunity to showcase their businesses directly to attendees.

The impact extends beyond tourism. All proceeds from these events support The Carmine's Family Children's Scholarship Fund, ensuring that no child is denied access to recreational or educational programs at the Island Recreation Center due to financial limitations. These events not only strengthen the local economy but also enrich the community as a whole.

4. How does the organization measure the effectiveness of both the overall activity and of individual programs? *(200 words or less)*

The Hilton Head Island Recreation Association conducts attendee surveys to ensure the events provide a high-quality community experience. These surveys also help evaluate the effectiveness of our marketing efforts by asking participants which promotional channels influenced their decision to attend and whether the event was the primary reason for their visit to the area.

G. EXECUTIVE SUMMARY

Provide an executive summary using the "ATAX Effectiveness Measurement" form provided via the link on the left, or by utilizing the text area provided below to report uses of the organization's prior ATAX grant, if applicable. If you create your own format, please refer to the "ATAX Effectiveness Measurement" form and use the criteria as a guideline in developing your executive summary below.

(1300 words or less)

An ATAX Effectiveness Measurement form has been attached to this application.

Signature: Leah Arnold

Title/Position: Deputy Executive Director

Mailing Address: PO Box 22593, Hilton Head Island, SC 29925

Email Address: leah.arnold@islandreccenter.org

Office Phone Number: 843-681-7273

Home Phone Number: 812-686-0643

ATAX EFFECTIVENESS MEASUREMENT

Please refer to the SAMPLE ATAX Effectiveness Measurement Form for examples. When completing this form, please expand, contract, or add to the sections as needed (but contain the form to a total of approximately 2 pages). You may choose to use your own format instead of this form, and if doing so, please use the criteria below as a guideline. Regardless of format, **each applicant should choose how they measure degree of success. Applicants need to explain why this is an effective measurement technique that reflects results and how that relates to the objective.**

TOPIC	THE PLAN	BUDGET	ACTUAL SPENT	RESULTS - When possible, provide planned results vs. actual results, and/or current year vs. prior year results .
Marketing to Increase Tourist Attendance				
Bands	Event Operations	\$ 12,500.00	\$ 9,000.00	We were able to bring in larger bands from outside of the area that have a following to Wingfest and Oyster Festival.
WTOC	Campaign Strategy	\$ 33,500.00	\$ 30,000.00	Target people interested in attending festivals who live in a 50 mile radius outside of Hilton Head Island. Enhance your reach by targeting specific locations, searches online, & keywords. Utilize email marketing to send an email blast to potential visitors out of market
Lowcountry Radio Group	Radio Ads-Regional	\$ 1,500.00	\$ 1,000.00	99.1 Pure Oldies / 104.9 The Surf / SC 103.1
Eat It and Like It	Television Ads	\$ 7,500.00	\$ 5,000.00	*Production of three :15 second television spots to air during Eat It and Like It with Jesse Blanco. Saturdays at noon on WTOC-TV promoting Oyster Festival and Wingfest *Production of segment featuring Hudson's and one other local restaurant and their oyster program for Oyster Festival and segment for Wingfest featuring Orchid Paullmeier winner of Wingfest for the past 5 years. Segment will air during Eat It and Like It and will be distributed via social media. * logo placement on EIALI Newsletter. 8,300 subscribers as well as on website home page.
Facebook / Instagram	Social Media Marketing	\$ 20,000.00	\$ 15,000.00	Social media marketing through Geofilter
Total		\$ 75,000.00	\$ 60,000.00	

Jeep Island 2024 Festival Survey

111 responses

[Publish analytics](#)

Demographics

What is your primary zip code or country (if out of USA)

111 responses

29910

29928

29926

31410

29935

31312

30052

29909

46805

29072

31088

28625

29851

29102



29672

29906

29332

29330

29927

31419

29483

29907

32210

29650

33480

28056

30096

31326

30041

31407

83544

48193

29148

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29303

07764

29678

29492

80222

29301

29501

29420

41537

3198

29432

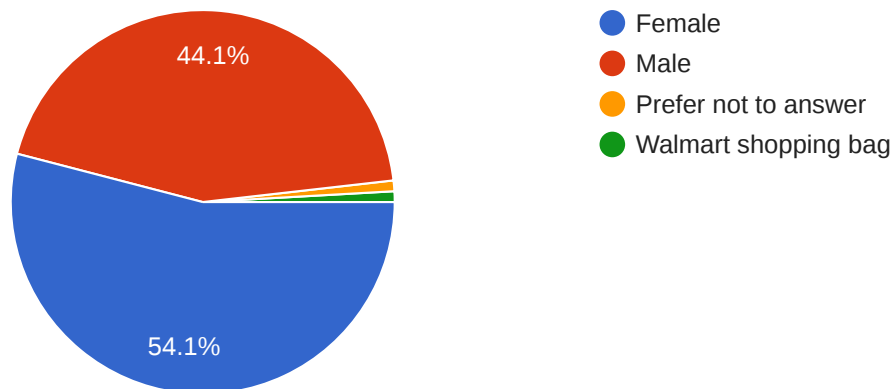
29669

24185

44662

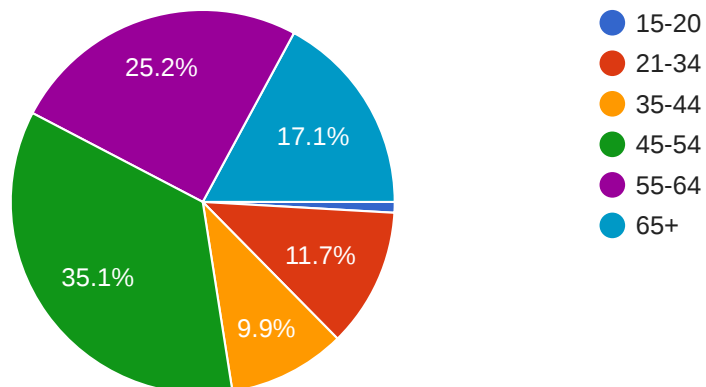
What is your gender?

111 responses



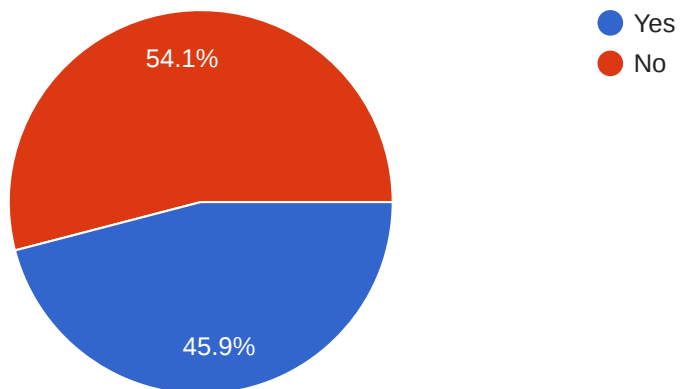
What is your age?

111 responses



Do you live in the Hilton Head/Bluffton Area?

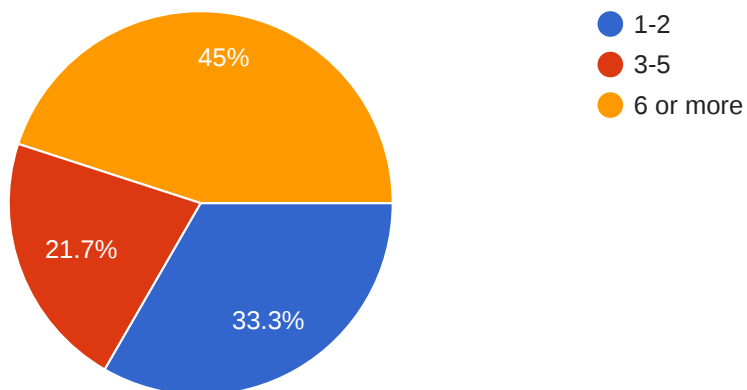
111 responses



Visitor & Accommodation Information

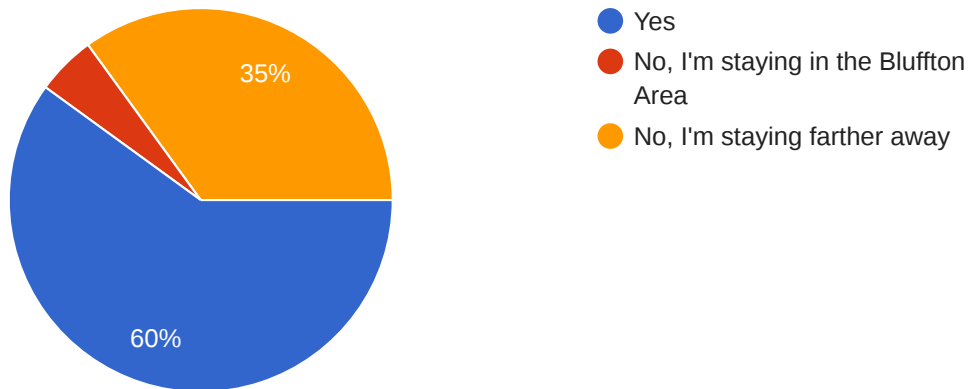
Including this visit, how many trips have you taken to Hilton Head?

60 responses



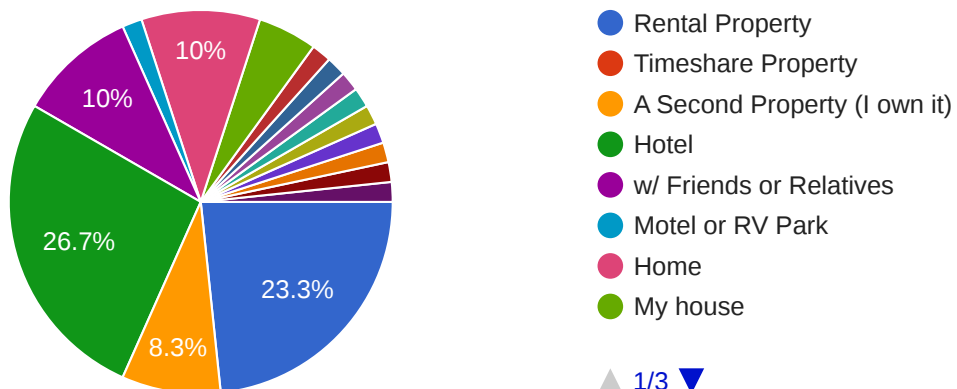
Are you staying on the Island on your trip?

60 responses



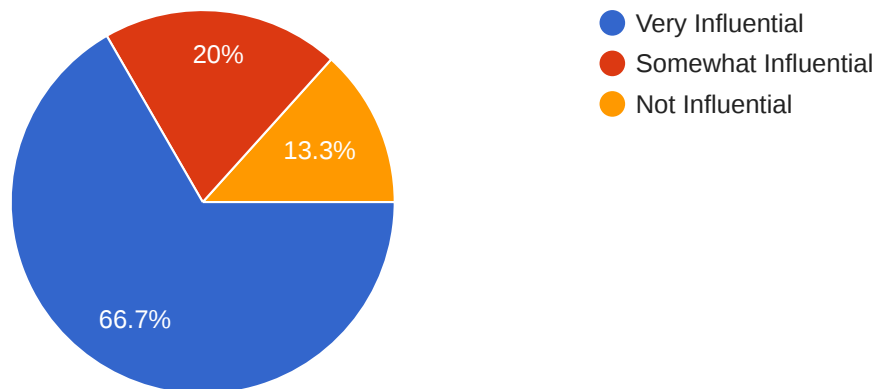
What type of lodging are you staying in?

60 responses



How influential was Jeep Island when planning your trip?

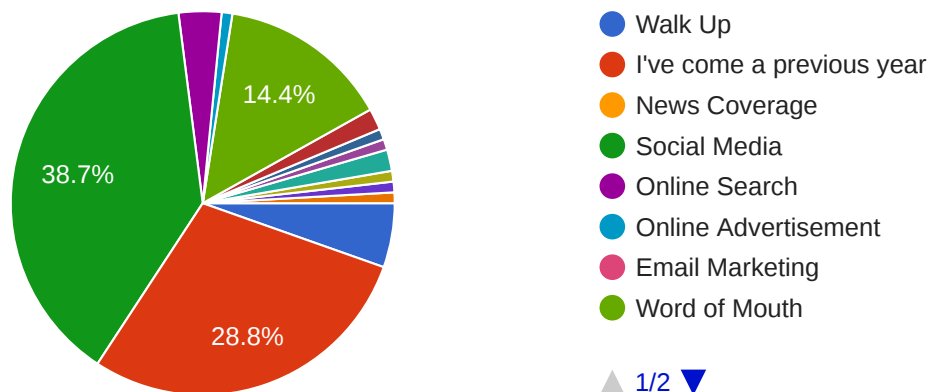
60 responses



Event Feedback

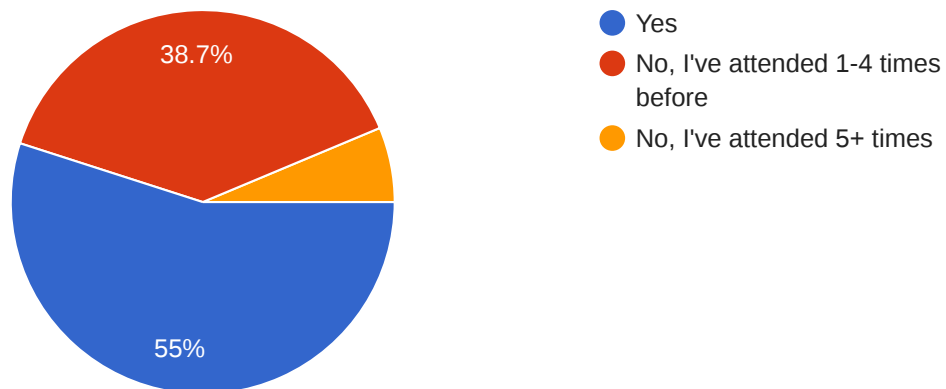
How did you first learn about Jeep Island?

111 responses



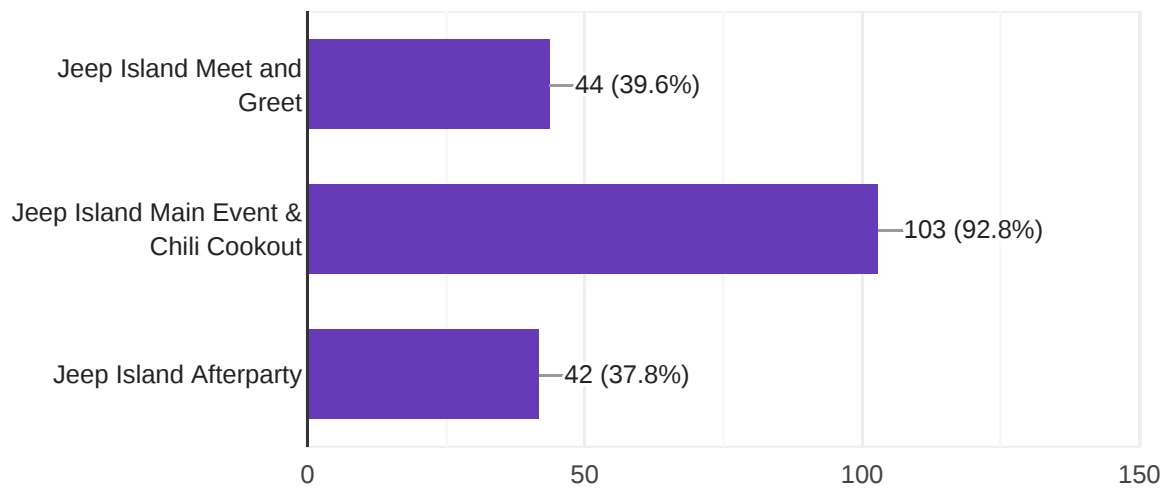
Was this your first time at Jeep Island?

111 responses



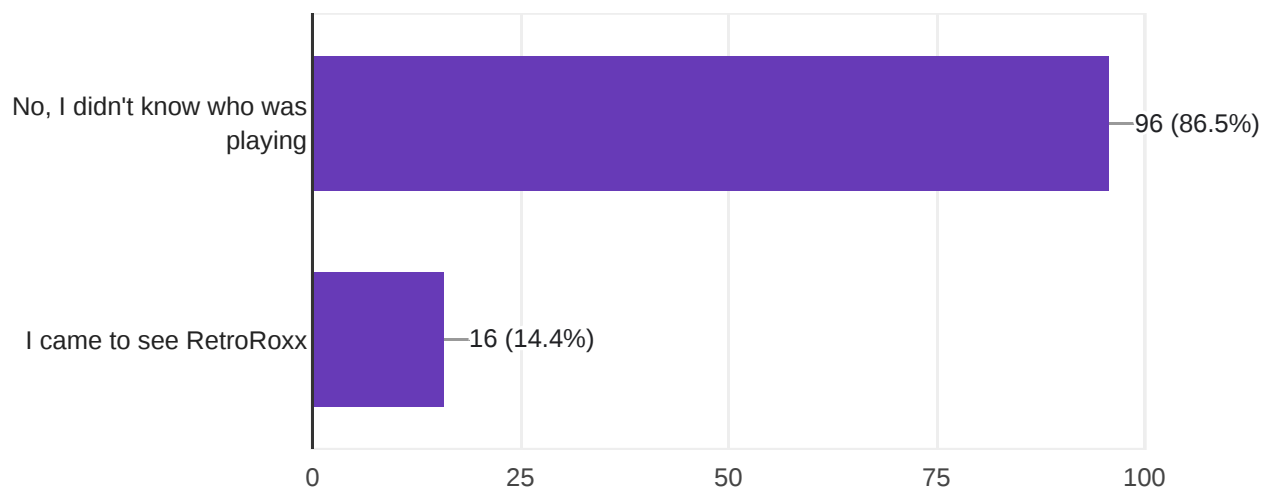
What event(s) did/are you attending?

111 responses



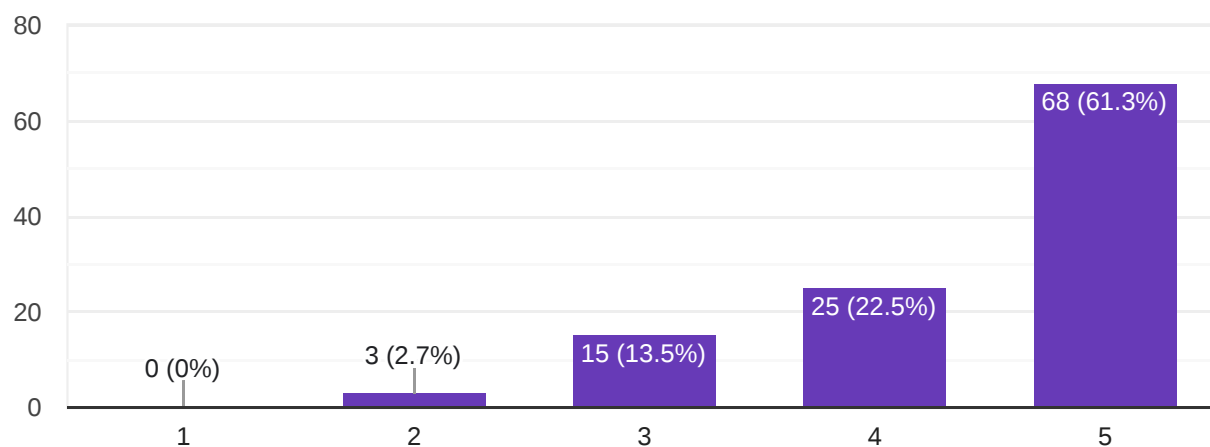
Did you come to see any of the bands?

111 responses



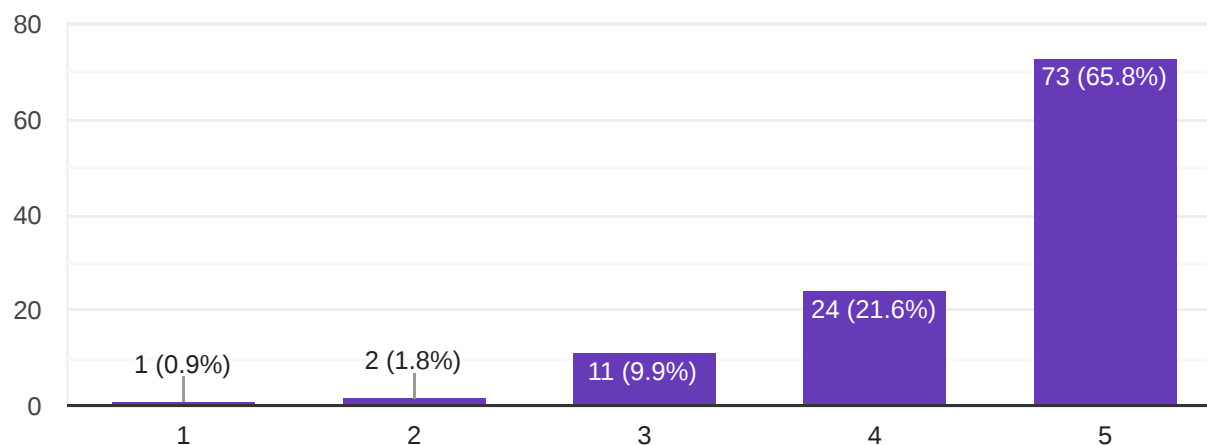
How would you rate the music at Jeep Island?

111 responses



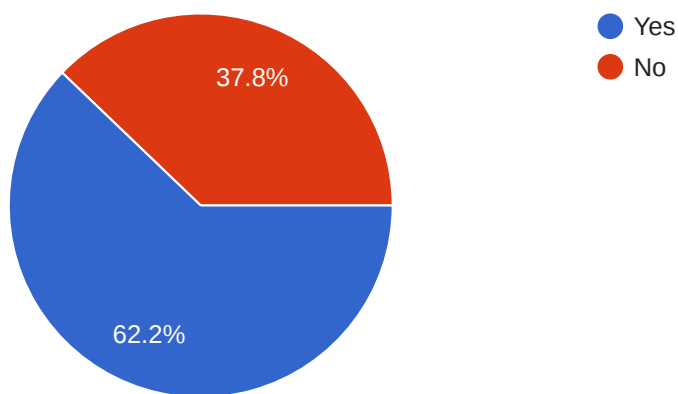
How would you rate the ambiance/location(s) of Jeep Island?

111 responses



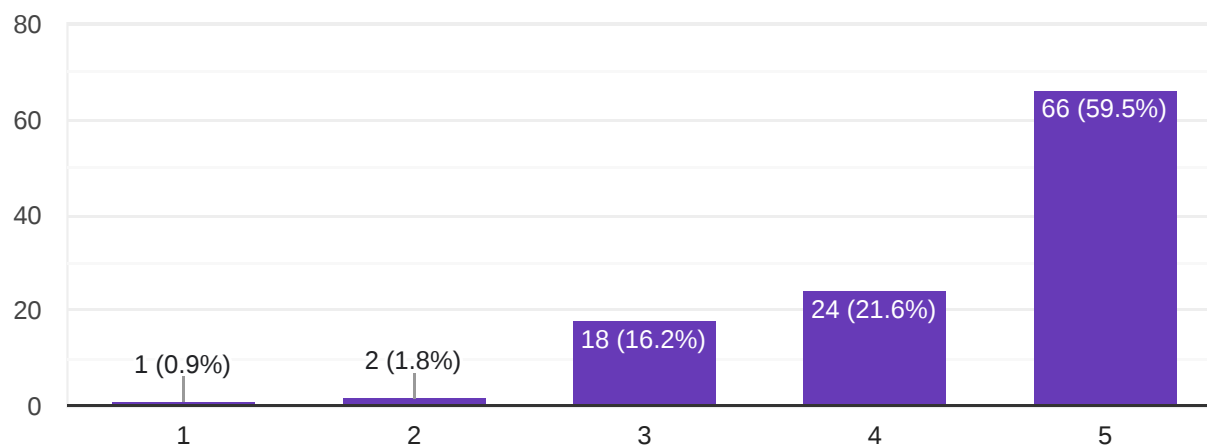
Did you know Jeep Island is a fundraiser for the Island Rec Children's Scholarship Fund?

111 responses



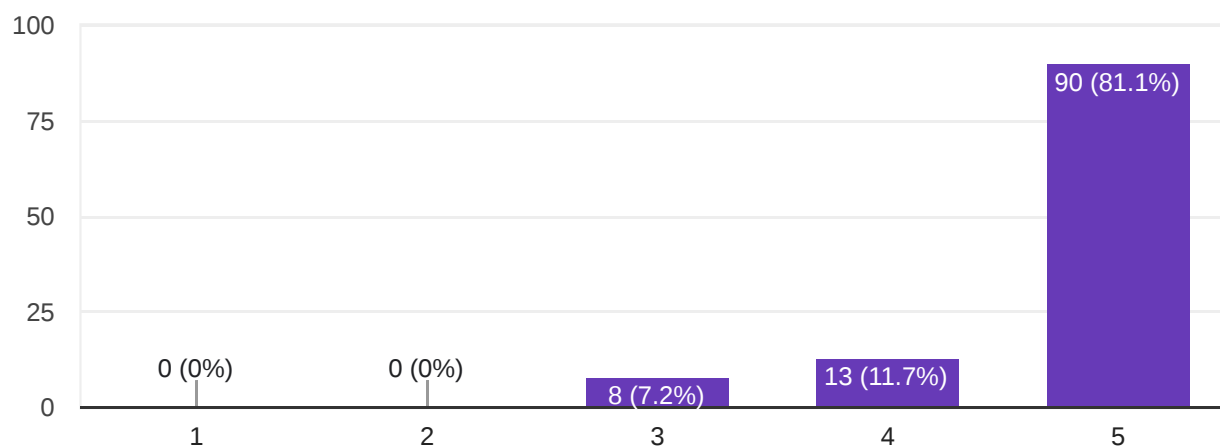
How would you rate the cost/pricing of Jeep Island?

111 responses



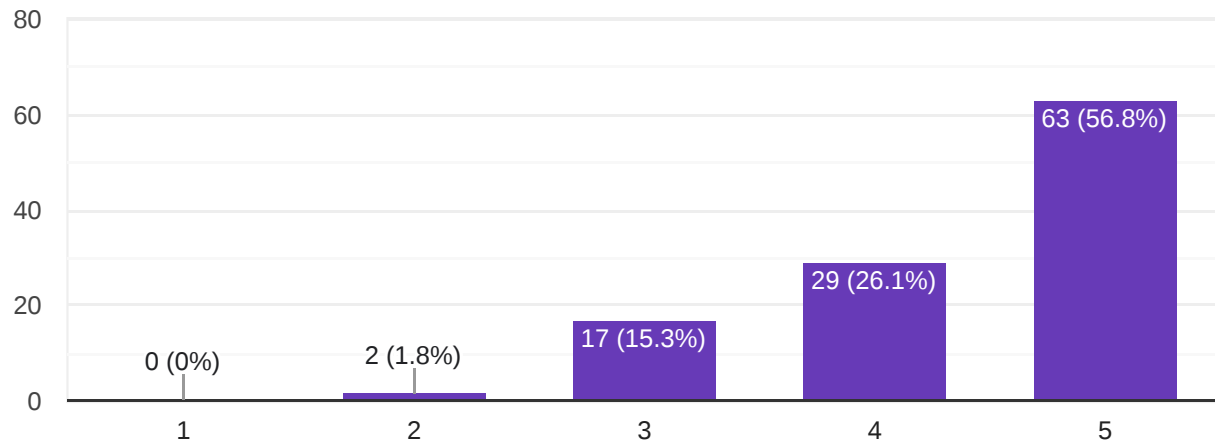
How would you rate the staff friendliness of Jeep Island?

111 responses



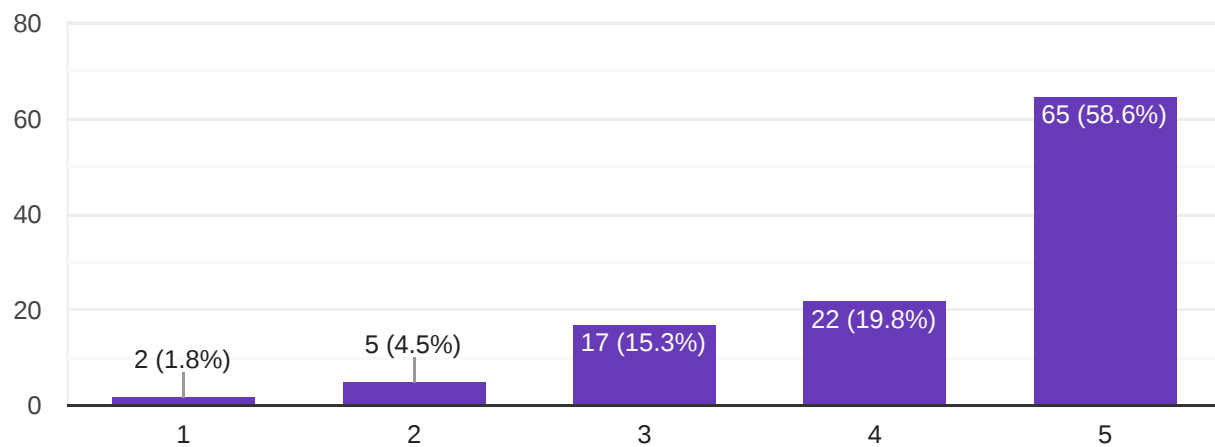
How would you rate the quality of the food of Jeep Island?

111 responses



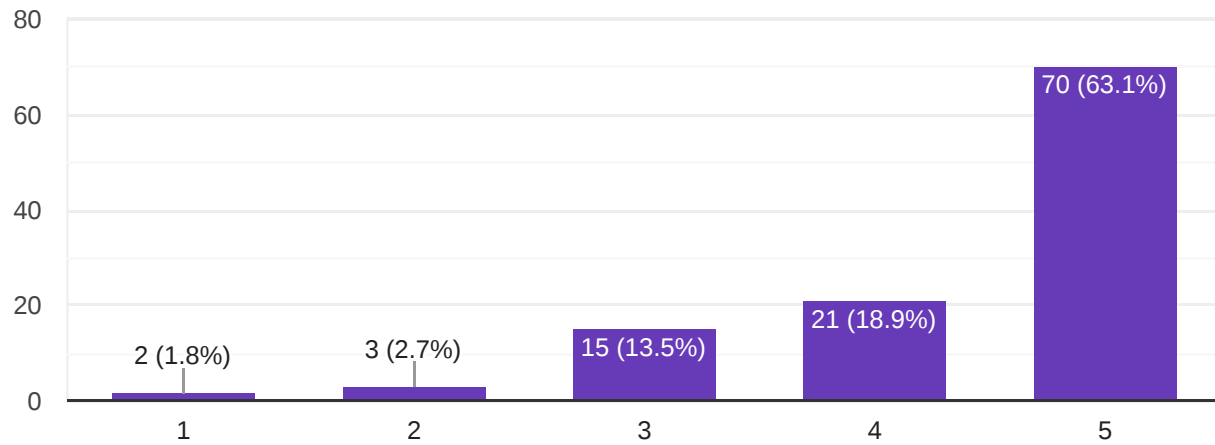
How would you rate the parking of Jeep Island?

111 responses



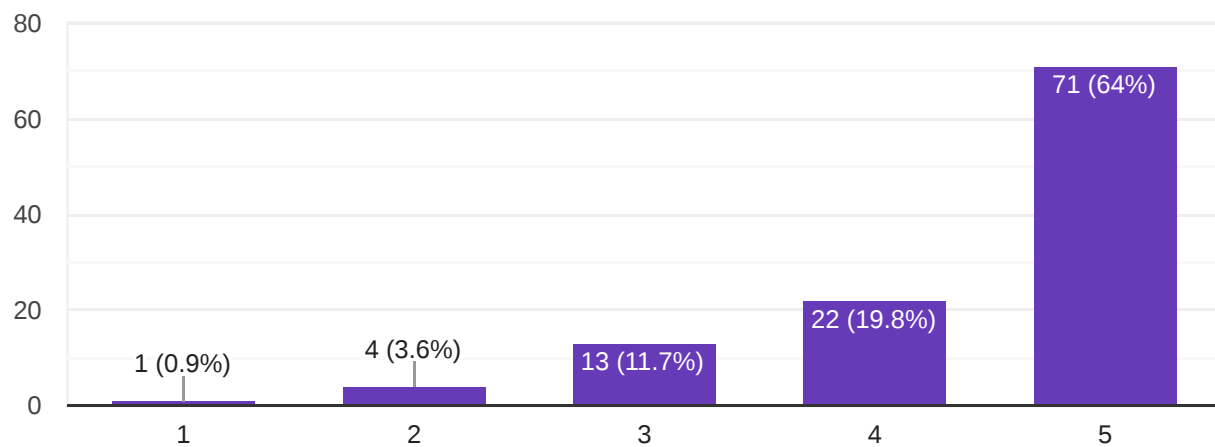
How would you rate the seating and layout of Jeep Island?

111 responses



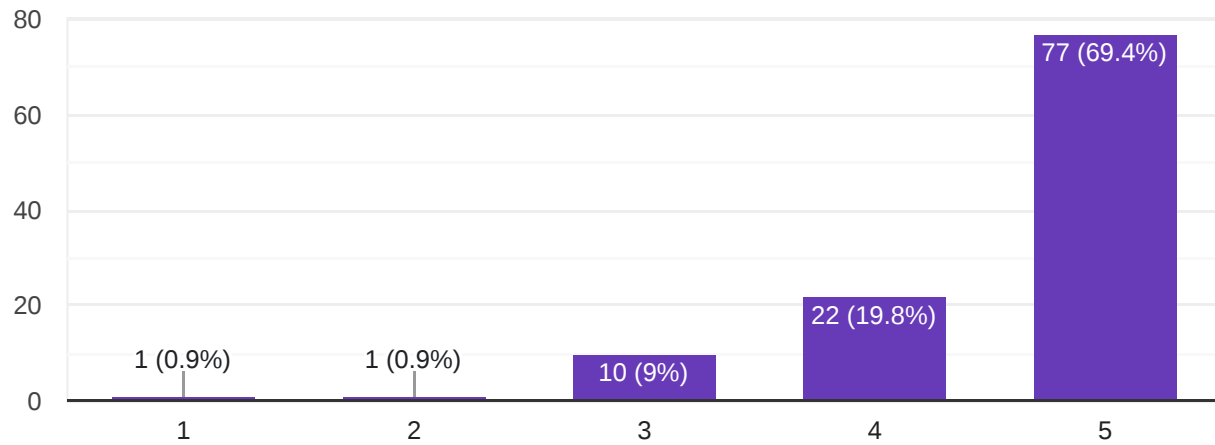
How would you rate the crowdfow of Jeep Island?

111 responses



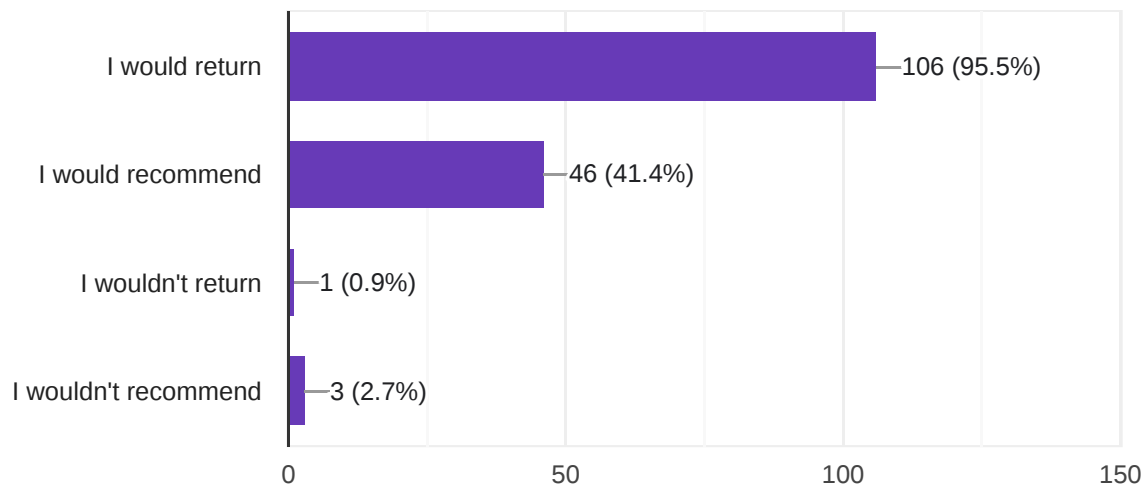
How would you rate the OVERALL VALUE of Jeep Island?

111 responses



Would you recommend or return to Jeep Island?

111 responses



Any final thoughts or comments?

111 responses

None

No

Love it

Great event

N/a

Awesome

Awesome

NA

Nope

Perfect

Good

Nice

I love it

Thanks for an enjoyable event!

Just a larger venue location would be nice so the jeeps could be a bit more spread out.

Thank you

N/A

Day of fun

Prefer to bring own chairs

Will come again

I love coming ecVery year

I had a good time. Since it is combined with a chili cook off, it would be nice to do it later in October or early November.

Great Event. Thank you so much!

Love this years lo

Love it, so much fun

I liked the event is "moving around" the area a bit but think the pervious location was better simply due to space. This location, although smaller, in proximity to the beach and such was potentially a better draw for those who just wondered in to enjoy the event. The above will have benefits and drawbacks.

Not enough places to get a drink any drink

Did not like the raffle format. Seemed like same people won over and over since tickets were not appropriately mixed. Did not like the brewery set up.

Great event!

Great event!! Would be nice to have some other food options besides chili and to have vegetarian/vegan options

More shade for seating

More shade

This new venue for Jeep Island/Kiwanis chili cookoff was perfect. It's a perfect fit for this event. RetroRoxx was awesome. The vibe of this year's event was great. I wish you included other food options like maybe some food trucks to have more variety of food. Myself and friends enjoyed the chili but a lobster dog, Taco and deli sandwich-salad truck would've been a nice addition. The prestaging of the registered jeeps was different but good. My only complaint was that late arrival jeeps that didn't pre stage were driving up and allowed to jump in line while we were entering the venue. Some of were lined up to park with friends and the late arrivals were allowed to cut the line. They should have been directed to the back of the line. We're looking forward to coming back next year. Thanks so much for all the hard work put into this event.

Fun times love the duck contest

Awesome event, band spectacular!

The location this year was the best location and should be the same location next year

I was very disappointed in the organization of the event. We paid for a Jeep spot and we showed up before noon as the email communications said and we were too late to drive out to our spot. Luckily, we found a worker who saw us in our Jeep frustrated and was able to get us in because without parking the Jeep we would've had to pay again to enter. We were not the only Jeep that did not make it to their spot we were driving around with 3 other Jeeps that were also confused why we couldn't get on even though we were there when the email said. I know this was a new location this year and code wouldn't allow anyone to drive to a spot once the gates closed, but that should have been considered in the time that was sent out in the email communications.

Aaa

Love this event

I am confused on tickets vs voting for chili

Food trucks might be cool

If jeeps could be parked by genre I feel like it would be more fair

Beautiful weather

Funtime

As a Jeep owner, I love it.

N/A

I wish there were more Jeep vendors selling different things for jeeps

Love location

Best weekend of the year,

Enjoyed it

This is awesome

No keep up the good work

I think the jeeps should be spread out a little bit more. Often difficult to see the sides of many jeeps. Overall a fantastic experience - thank you!

More Jeep related vendors

Need more vendors

To hot no shade to many dogs

More trash cans needed

Nice event

N

Na

Great time and perfect location

Great event

It's great!!

Thanks

Excellent event

.

Great fellowship!!

More room for pop up tents and our seating by jeeps

Enjoyed

Look forward to this event every year! I am happy that it is pet-friendly as well!

It's a great event. I've heard of it previously, but this is my first time coming.

Great time

Great event

Cool stuf

Gonna be fun

Was hoping for a vegetarian chili

Cool

Need a vendor to sell ducks to give to exhibitors

More open parking for our tents and equipment

I wish the time to get your jeep in had been made more apparent. I got there at noon and I was not able to park inside the venue. It greatly affected the enjoyment of the event as I had prepared my Jeep and put in a lot of effort. I was very disappointed.

Very good

We are moving to Hardeeville in 2025! Can't wait to attend next year!

Love it here

Excellent

Carriej658@gmail.com

Need more shade

Loved the new location and layout, but details change every year on what included what not, hard to keep up. Didn't know there were tables by the stage or off the side until we were done eating and walked through the jeeps. Not enough tall tables near the chili tastings.. Beer line was too long. While I love improvements some consistency would be nice or better communication over all as to expectations.

Fun day

Very organized and fun event!

Honey horn is a better location. Dogs and don't bring your own chair. Doesn't make sense.

If you'd like to be entered for your chance to win Jeep Island Registration for 2025, enter your email below!

71 responses

Yes

Savhga15@comcast.net

Megamdkids@outlook.com

BETHANNHHI@KW.COM

Amy@4stewarts.com

Denrodbanks@gmail.com

None

Denisek@compunet365.com

movingforward8351@gmail.com

Zehrpropinc@gmail.com

Love this years location

Jhurley232@gmail.com

Miclou281974@yahoo.com

devaub@gmail.com

isbldpaul@gmail.com

erinmhernandez@me.com

traceylpn1@gmail.com

Kim.jettie@yahoo.com

Josepha041122@gmail.com

No thanks.

Moniquevillalona@gmail.com

Mvotery@hotmail.com

bitsypheiffer@aol.com

ngagen07@gmail.com

Hlminnich@gmail.com

Padgett91@gmail.com

katafoxx@gmail.com

cobynzach@yahoo.com

Gm@jakesplacesml.com

Ashleygbest@gmail.com

richarddujes@rocketmail.com

Macam97@verizon.net

No

Dianer101@yahoo.com

mcamp1@yahoo.com

dirtyhtwo0@gmail.com

Smithwlb@aol.com

Jennabwertz@gmail.com

Mekowalski16@gmail.com

Jacobswalker1995@gmai.com

ckilgore1133@gmail.com

Thanks

Jeh2000@mac.com

lonnieewilson@gmail.com

Jsherbert.jas@gmail.com

adsuttles24@yahoo.com

caricasillas@gmail.com

Newriver77@gmail.com

Erinmhernandez@me.com

Brianericksen1960@gmail.com

Caljackm@gmail.com

hartmanc93@gmail.com

Reginabailey782@gmail.com

Nah

Catanzaro7@gmail.com

Scottmorrison1@me.com

1995larson@gmail.com

Lonnieewilson@gmail.com

strangej23@yahoo.com

Tanyagwright@netscape.net

Topken101@yahoo.com

resq202@aol.com

Amyleecee@yahoo.com

Tbehan59@gmail.com

amandaallen.1982@yahoo.com

Kandi-taylor@hotmail.com

Prafetto1@gmail.com

jllaneyrn@gmail.com

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Google Forms

Oyster Festival Survey 2024

322 responses

[Publish analytics](#)

Demographics

What is your primary zip code or country (if out of USA)

322 responses

29926

29928

29910

29927

29803

32163

29909

31804

08318

48144

29708

29455

21797

28025



28031

31545

60481

37185

30078

46037

60190

31419

22079

22191

22407

06812

32084

29212

28739

28027

62236

17847

28078

29485

07946

63376

31407

24171

14750

28036

29201

36853

Us

80601

31322

29935

20186

03894

02052

20121

29369

11101

30458

030894

98112

37013

19904

59anresa@gmail.com

34953

32068

56031

37221

37656

29456

37110

44870

48047

29054

29016

75143

10024

30662

47802

44618

07821

10016

32780

10033

11933

29582

15044

39536

34994

61114

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29902

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60527

78641

21061

22151

29617

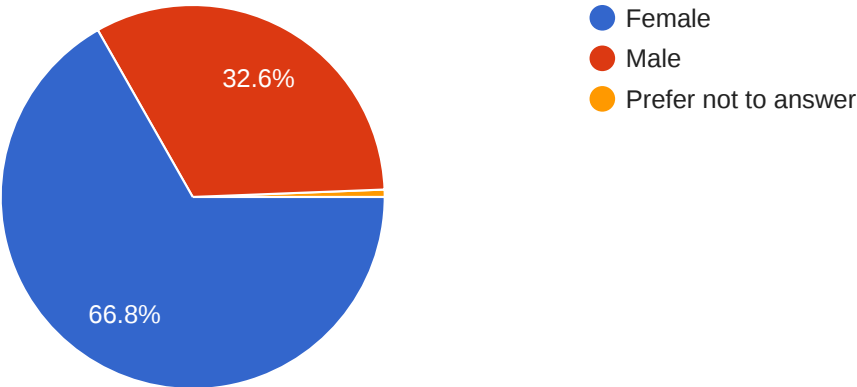
23236

43 more responses are hidden

 Copy

What is your gender?

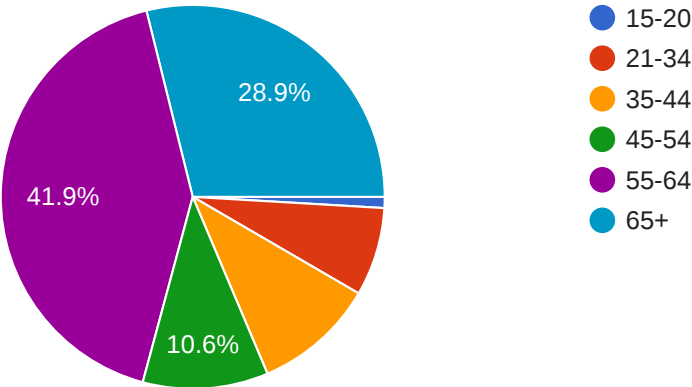
322 responses



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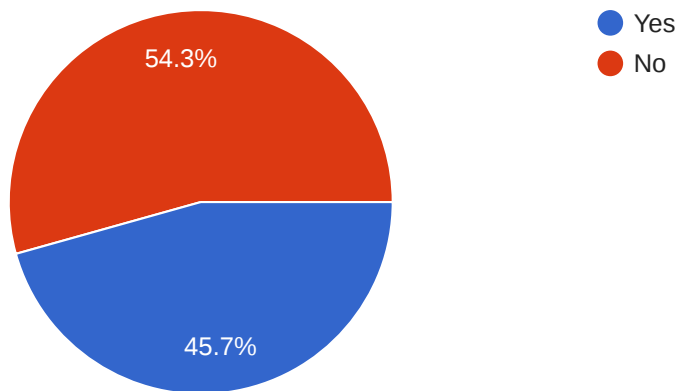
What is your age?

322 responses



Do you live in the Hilton Head/Bluffton Area?

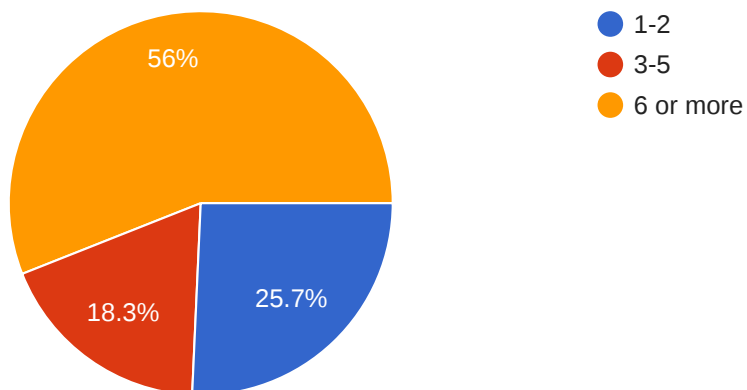
322 responses



Visitor & Accommodation Information

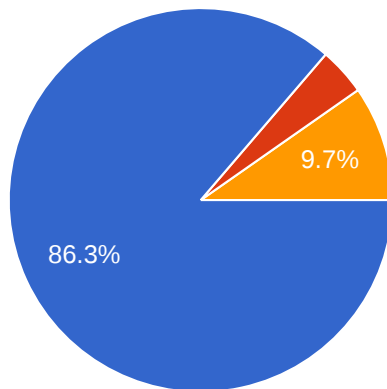
Including this visit, how many trips have you taken to Hilton Head?

175 responses



Are you staying on the Island on your trip?

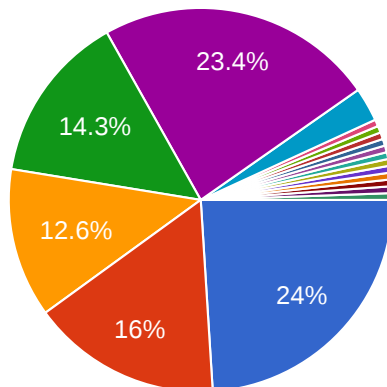
175 responses



- Yes
- No, I'm staying in the Bluffton Area
- No, I'm staying farther away

What type of lodging are you staying in?

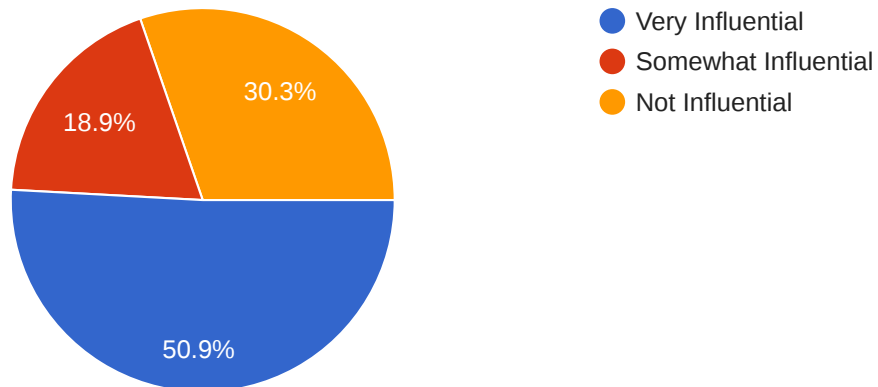
175 responses



- Rental Property
- Timeshare Property
- A Second Property (I own it)
- Hotel
- w/ Friends or Relatives
- Motel or RV Park
- I own on the island
- Drove over from Savannah

How influential was the Oyster Festival when planning your trip?

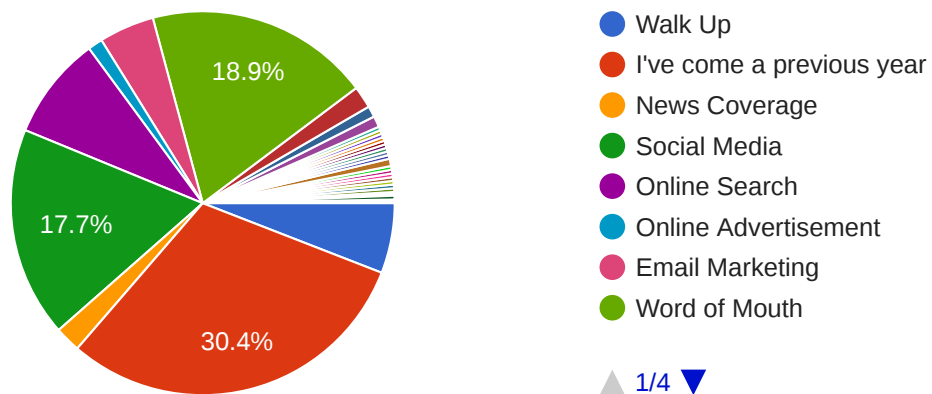
175 responses



Event Feedback

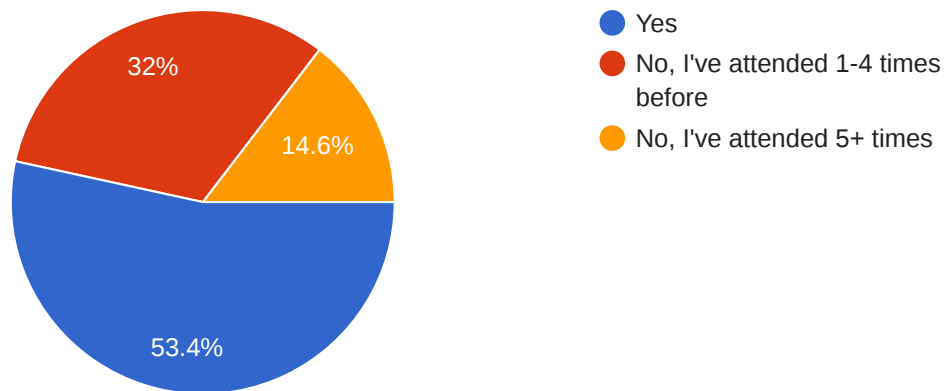
How did you first learn about the Oyster Festival?

322 responses



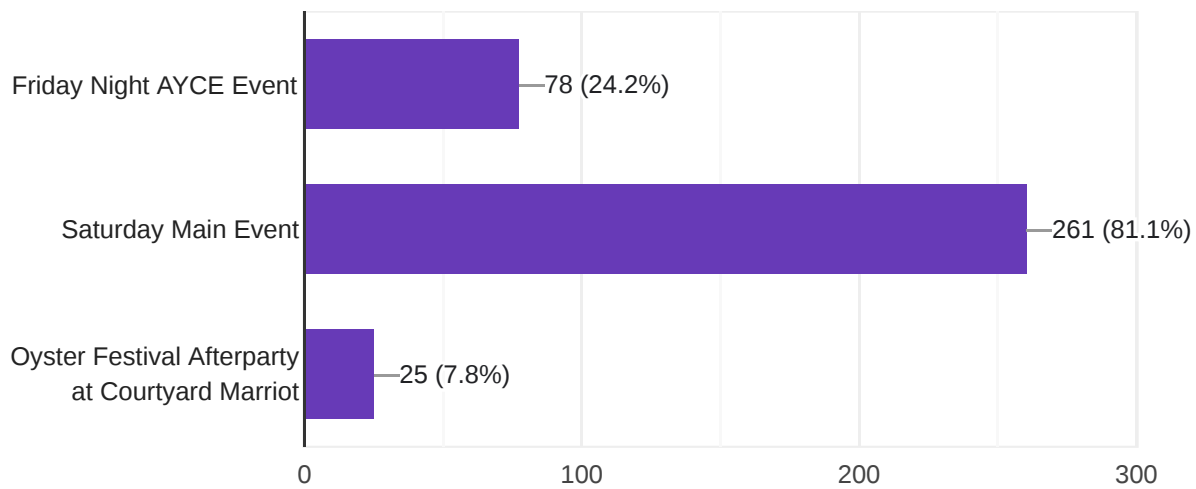
Was this your first time at the Oyster Festival?

322 responses



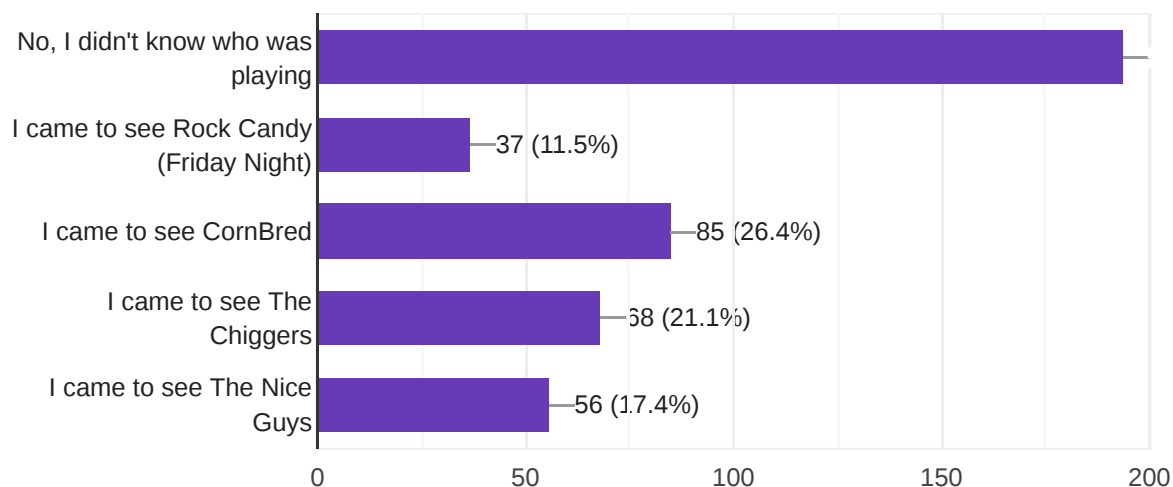
What event(s) did/are you attending?

322 responses



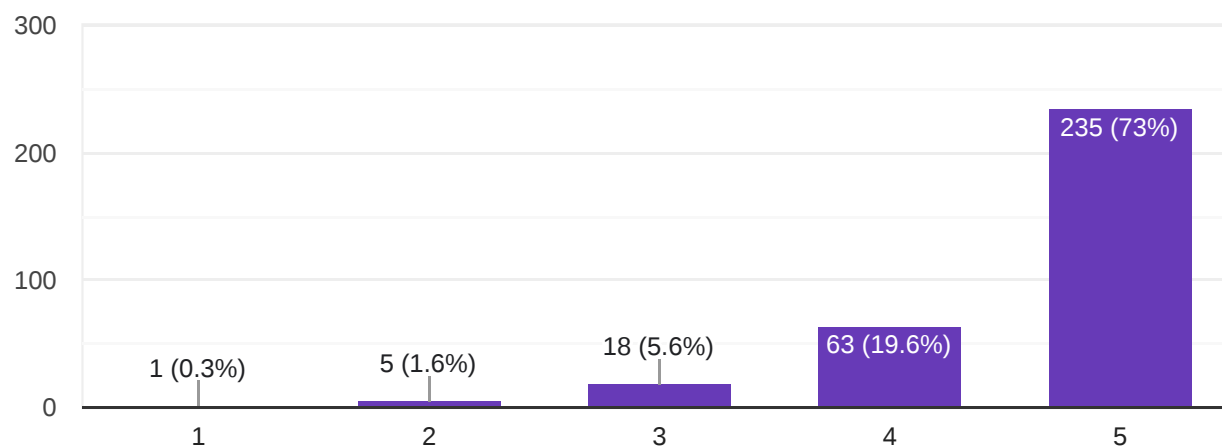
Did you come to see any of the bands?

322 responses



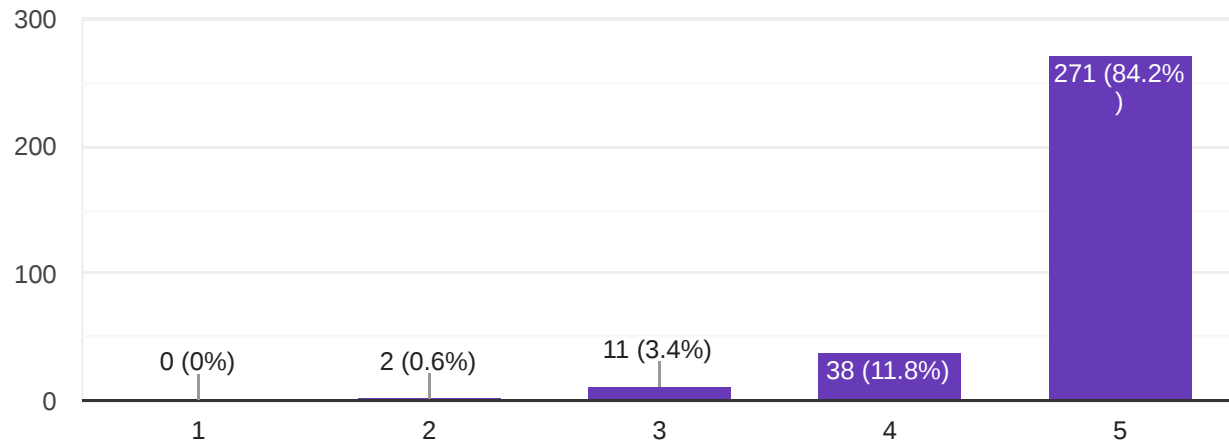
How would you rate the music at Oyster Festival?

322 responses



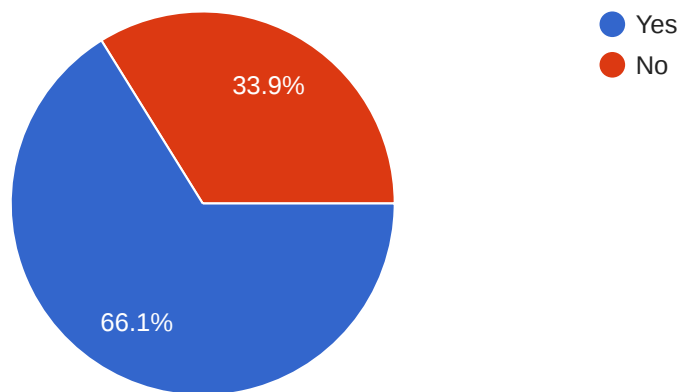
How would you rate the ambiance/location(s) of Oyster Festival?

322 responses



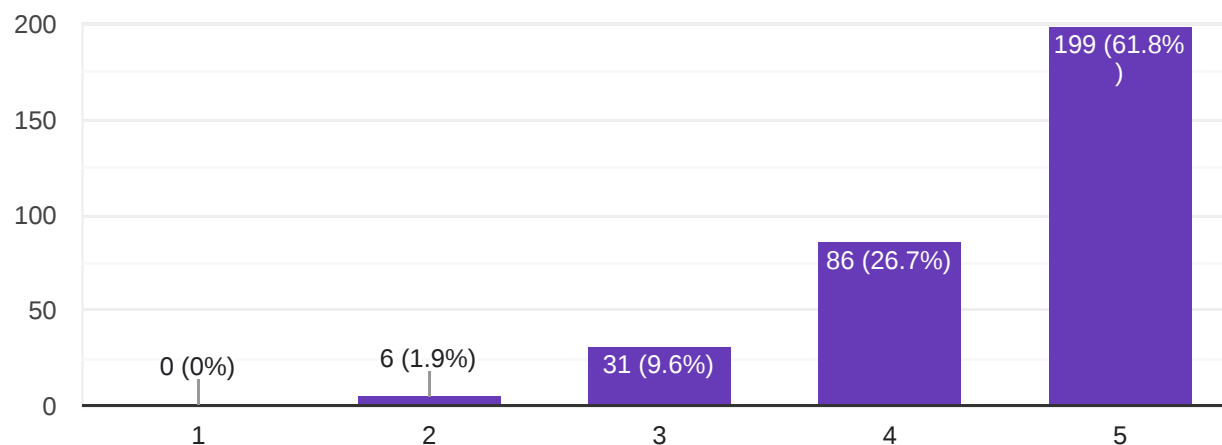
Did you know Oyster Festival is a fundraiser for the Island Rec Children's Scholarship Fund?

322 responses



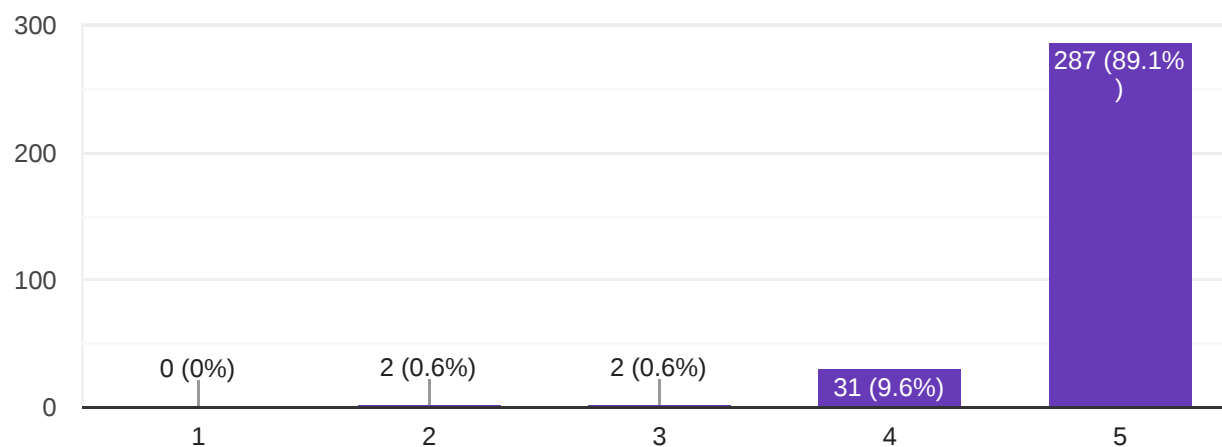
How would you rate the cost/pricing of Oyster Festival?

322 responses



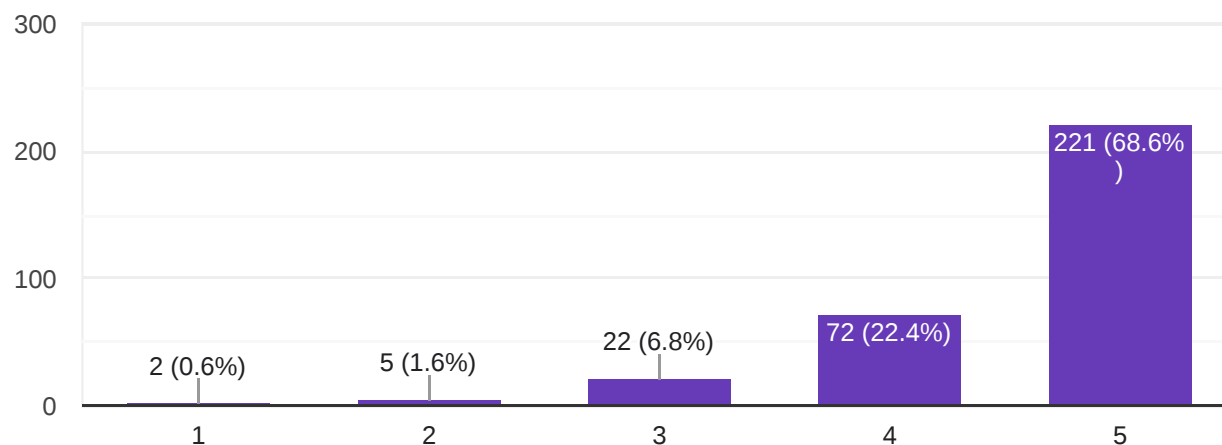
How would you rate the staff friendliness of Oyster Festival?

322 responses



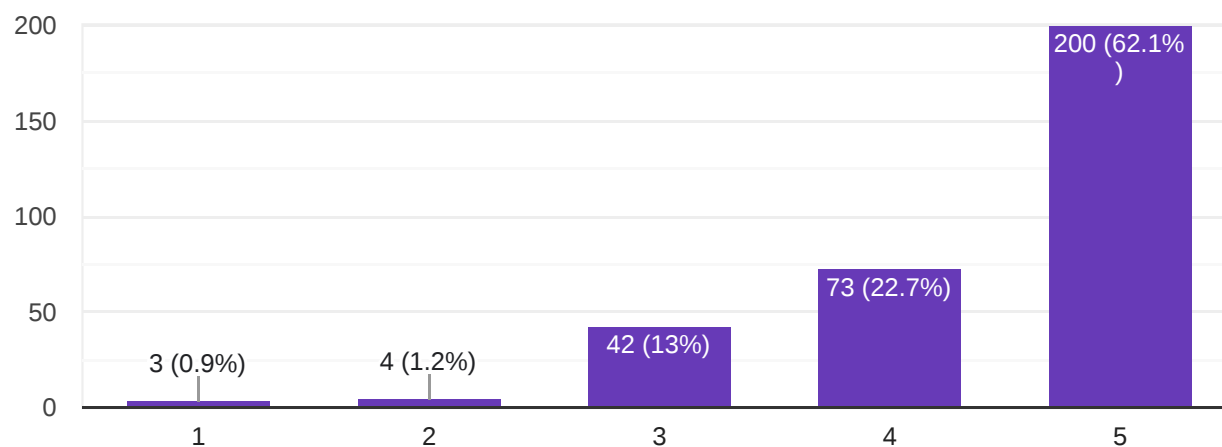
How would you rate the quality of the food of Oyster Festival?

322 responses



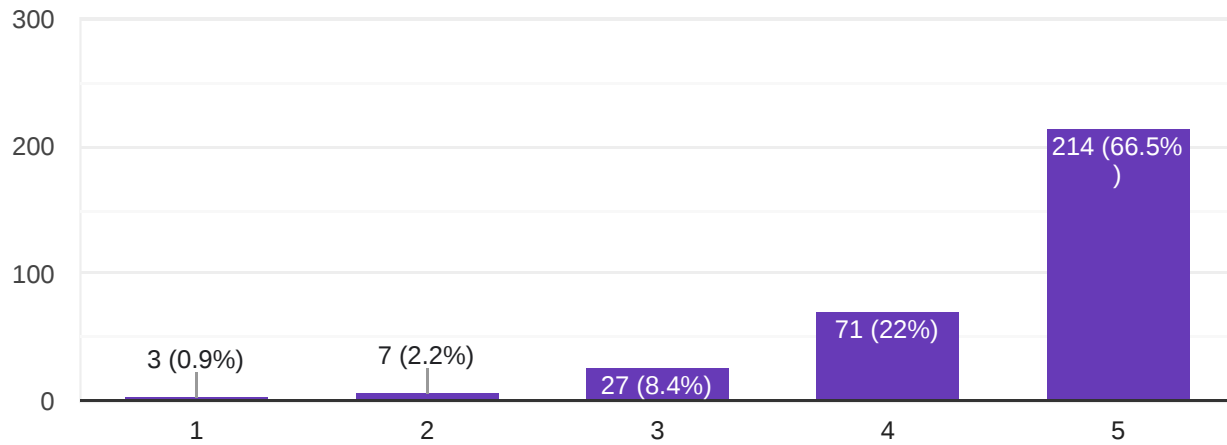
How would you rate the parking of Oyster Festival?

322 responses



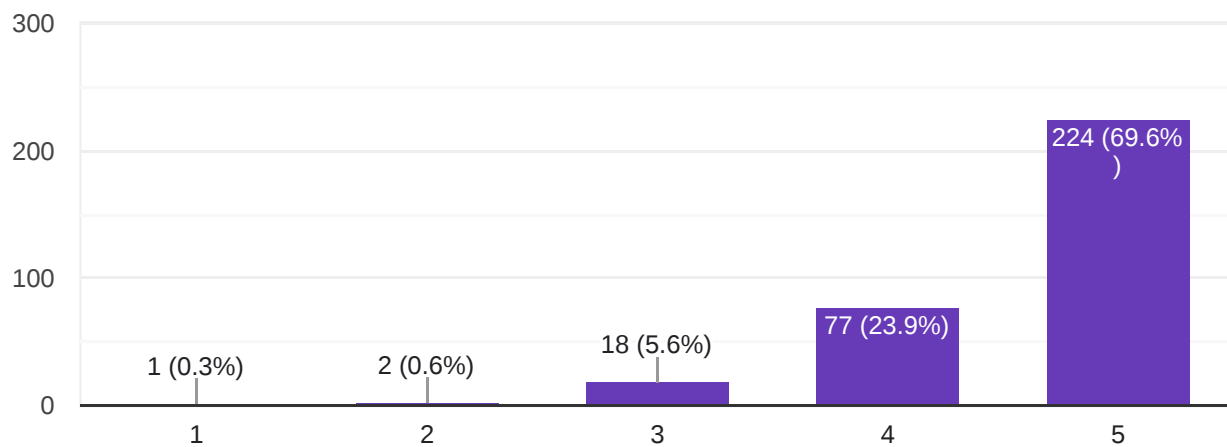
How would you rate the seating and layout of Oyster Festival?

322 responses



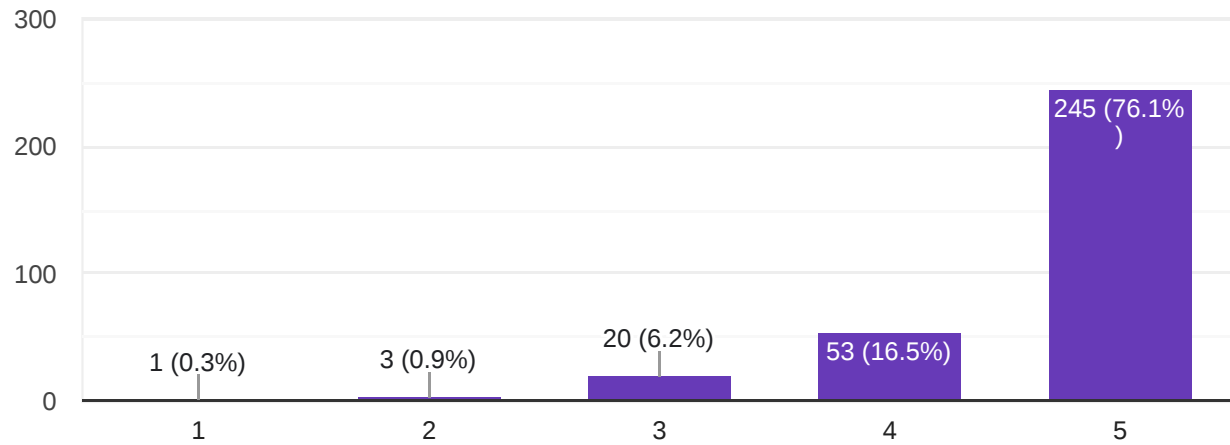
How would you rate the crowdfow of Oyster Festival?

322 responses



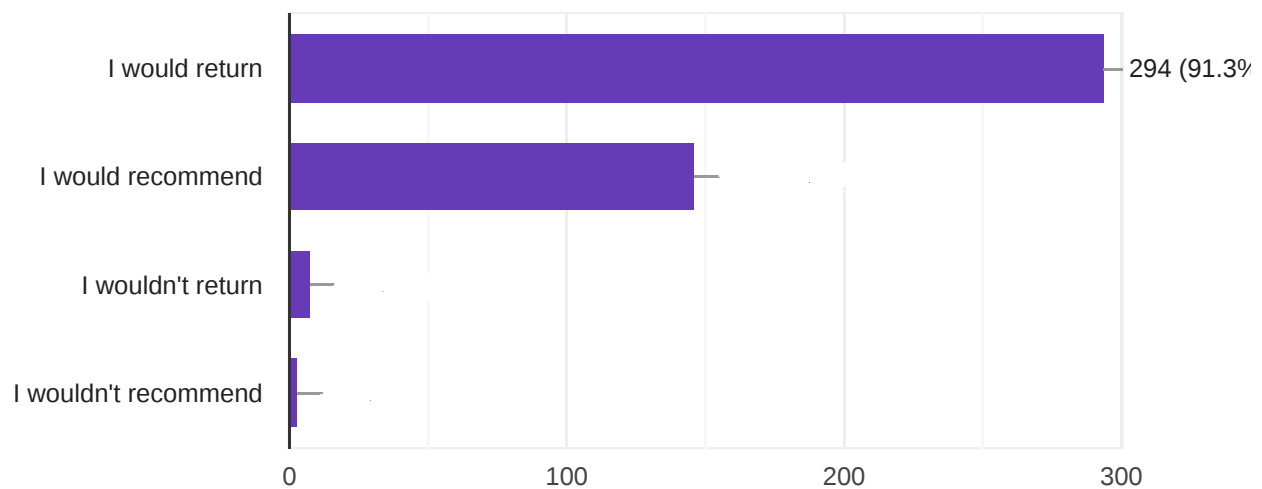
How would you rate the OVERALL VALUE of Oyster Festival?

322 responses



Would you recommend or return to Oyster Festival?

322 responses



Any final thoughts or comments?

322 responses

No

Great event

None

Great

Love it

Nope

Great time

Fun

Fun event

Awesome

Great day

Love

.

Awesome event

Love it!

Na

Lots of fun

Oyster bucket was amazing

I love it

Wonderful

Great festival

All good

Love to see local breweries

I wish I would have known to bring my own supplies to shuck oysters. I didn't have a towel and never shucked oysters before.

Great city great event

Well done

Fun !

This was very good experience for us

Having fun

Y'all definitely should've handed out the oyster towels so that people didn't get their hands cut all trying to open the oysters

Summits seafood bisque is awesome

Grea

The voucher was a great idea but it didn't work properly for us. We had two 40\$ vouchers and the handhelds never showed the correct amount that was left on our vouchers. And the volunteers running them could have been better trained to trouble shoot. I'll probably just use a credit card next year.

Fan fricking tastic

I nicked my finger on an oyster shell while shucking and cut it, found a worker who got me some antibiotic cream to keep down the infection. Thanks.

Great/

More televisions for football.

It was great as usual

Always a great event. I thought the lay out was much better this year with the food stations spread out. Made easier to get food, and mingling better

N/A

More enjoyable than I anticipated

More tables

Fun day

Family tradition

Fun but need better vendors

Love love

Good time had by all

Would come back

Very nice venue

The sound person for Cornbred told me to fuck off when I asked if he could raise the volume

We had a fantastic time.

No additional thoughts outside of it being great weather

Great time! So glad we happened by!

Very fine effort

Great event,!

It's great

Do not like Cade not like cashless

Looking forward to coming next year!!!

I didn't realize the oyster came in big chunks. We had to stand and it was dark. We had a hard time seeing and getting into the oysters. Also, several oysters I got into was full of muck and nasty....kind of turned me off. I thought there would be fried oysters and other oyster choices. I think if I came back it would be on Saturday where you just buy what you want and have more choices.

Great festival. People are friendly. Food was great. I will definitely come back

Was disappointed that there was no seafood chowder, would move Sat back from Coligny. What is the after party, we were not told about it.

Always fun

So of the food/beverage vendors seemed to struggle with the QR code used for a prepaid ticket, but did get better once they got used to it!! Music was excellent!!,

The only issue we had was there is no shade. I am allergic to the sun but still like to be able to participate

We had a great time

Great weather

Awesome display of our island's talent

It would have been nice to have something sweet in addition to the other food.

Keep it up

You did a great job. The festival was very well managed.

Will be back

It's very Organized..

Needed desserts at the Friday Night all you can eat. Several people said that. Also melted butter is served at oyster roasts I have been to and that is what we eat with them. Everyone doesn't love the sauce.

Handicap parking is non existent 🤔😡😡😡😡😡😡😡 NO EXCUSES, HHI. It's always like that
🤔😡😡😡😡😡😡😡😡😡😡😡😡😡

Either begin the Friday event at 3 p.m. or have MUCH better lighting. Couldn't see to open oysters after dark.

Had a good time

Great work

Parking is tough

Nice way to spend a Saturday in Hilton Head

I love the events HHI promote to support this loving , charitable, sharing community. Love HHI

Great time!

We enjoy this festival, enjoyed nearly all of the music!

So fun

Have one or two non-alcoholic beer options

We love it!

It is an event we love. We come every year and bring friends. I wish you would align it with the lantern festival again

First experience, variety of food option excellent; husband loves oyster, I don't, loved having a food option!

Good clean fun

The pulled pork, chili and grits were not hot , barely warm. Graig's were too watery. Excellent and efficient staff and volunteers cleaning tables and shells

We had a great time and would return. Would prefer a band that played more of a variety of music types.

Wonderful day

Waters should be cheaper. Need more beer options. Beer selection sucks.

The music was awesome. The oysters were hard to get into - harder than previous years - not worth the effort. Not enough seating to try and open oysters on a flimsy surface - or in our laps. It was tough to try and see to get ok to the oysters once it got dark. The chili, low country boil and pork were great!! Towels had been provided in years passed - we want them back for safety reasons. It was not worth the money or the aggravation. Sorry.

Fabulous

It is great

Overall a great day!

Love it every year

Would like a few more tables. Overall it was a great success. Thank you to Rec Center for making it so much fun to live here in the off season! My 13 year old daughter is looking forward to volunteering in the near future!

Hard to shuck oysters in the dark. Friday night was a little dangerous. Please have real wine next year. Canned wine sucks.

It was aweso,e

149 more responses are hidden

If you'd like to be entered for your chance to win a package for 2 to next year's Oyster Festival, enter your email below!

210 responses

Yes

No

Mbarlock@verizon.net

Lawrence11529@gmail.com

Tigerishome@gmail.com

nina.weidle@icloud.com

pletendre14@yahoo.com

Brookedubois22@gmail.com

Hamen16@hotmail.com

Lcollins8675309@gmail.com

Billyg474@gmail.com

Schroeder.686@gmail.com

David.roy18012@gmail.com

MIhc@aol.com

retiredtchr16@gmail.com

textoris7@gmail.com

Ahernandez@lotus823.com

twofunnydog@gmail.com

kbgoldie2@gmail.com

Kelseymcintosh20@gmail.com

Dhage67966@comcast.net

Nancypcombs@thecombsteam.com

Jimcbeer@gmail.comj

Rebeccantompkins@gmail.com

Great event

Jcfielding3@gmail.com

Na

Ryanknx@msn.com

Ldt520@gmail.com

CRCHANCEY65@GMAIL.COM

d.legerboop64@icloud.com

dhage67966@comcast.net

Leibbobby@yahoo.com

amandy7798@gmail.com

Billpetrak@msn.com

FinchumLG@gmail.com

59anresa@gmail.com

terrycrider05@gmail.com

Mychal.rogers@gmail.com

Mwilliamsom27@gmail.com

snook0219@yahoo.com

Donna@bridalshowcase.com

Tcwarob@gmail.com

Mrsfoggy9607@aol.com

jcorcoran80@gmail.com

Mcneilsue@hotmail.com

Tonilopresti@gmail.com

timpeachy@yahoo.com

Guinnk1@yahoo.com

luvlifesc2015@gmail.com

Terrilweiss@gmail.com

Annettebadour@yahoo.com

Annabigjims@aol.com

Sigginst@outlook.com

Tlknowles@benlomand.net

rpdesantis@verizon.net

Gtrenary56@gmail.com

prengel@bex.net

Carlyelizabeth1593@gmail.com

rob.mendenall@gmail.com

Retiredtchr16@gmail.com

Rpdesantis@verizon.net

Thallwilson@gmail.com

derek_chu@hotmail.com

Jilldubois@comcast.net

lyopa191@gmail.com

Jjkebh@aol.com

schilling.tim@gmail.com

Obrien5nc@gmail.com

Cwh7010@gmail.com

5 Deixler Ln 29928

No thanks

Foremel2@zoominternet.net

Kappadeltadn@gmail.com

Sherijosparks@gmail.com

sugalulm@gmail.com

genesnelling@gmail.com

brian.blickley@yahoo.com

Npavona@verizon.net

Dixie1213@msn.com

Stach2@comcast.net

Kvcclark@msn.com

shelly1926@gmail.com

joeg@joeygiii.com

fishandjj@sbcglobal.net

Bethgallagher011@gmail.com

pyeah3@aol.com

nataliewolff@live.com

Elainenishioka@yahoo.com

Melissamarkey13@gmail.com

Nyneve02@yahoo.com

Schilling.amie@gmail.com

MKriste

Leahjohnson0707@gmail.com

Lkf1017@gmail.com

astridbarth10@gmail.com

Jtjcar@aol.com

Sure

Javabean44@verizon.net

ashleybhumphries@gmail.com

90 more responses are hidden

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Does this form look suspicious? [Report](#)

Google Forms

Wingfest '25 Survey

227 responses

[Publish analytics](#)

Demographics

What is your primary zip code or country (if out of USA)

227 responses

29926

29928

29910

29909

29927

31407

44481

31088

29681

32082

43230

30662

29461

49091



32095

28904

28387

37659

31408

80513

30452

31216

29902

30033

55082

27610

02059

31321

12901

14227

43452

29412

02645

30533

31324

30520

29925

43130

29860

299

30909

14534

37663

37656

29420

14052

27617

Canada

11758

28303

20876

29483

30458

55045

30060

17109

4464.3

28210

30548

28209

44870

29063

44643

29492

Thomas szelc

30467

14450

29928-2911

31405

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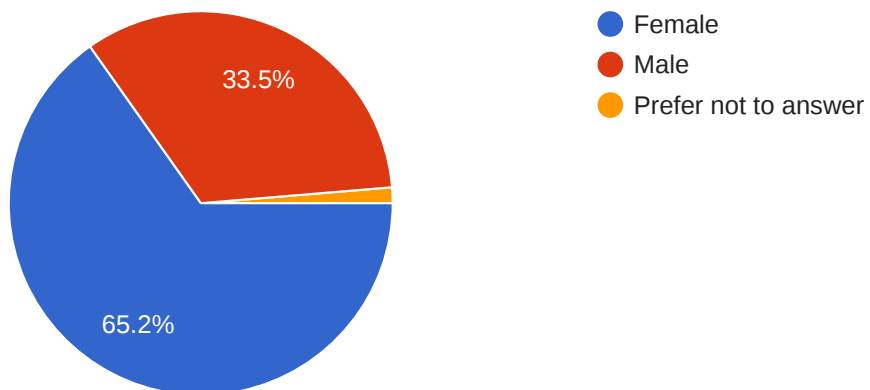
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77429

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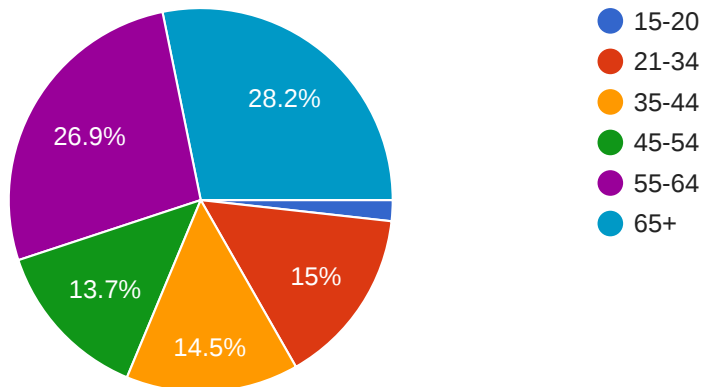
What is your gender?

227 responses



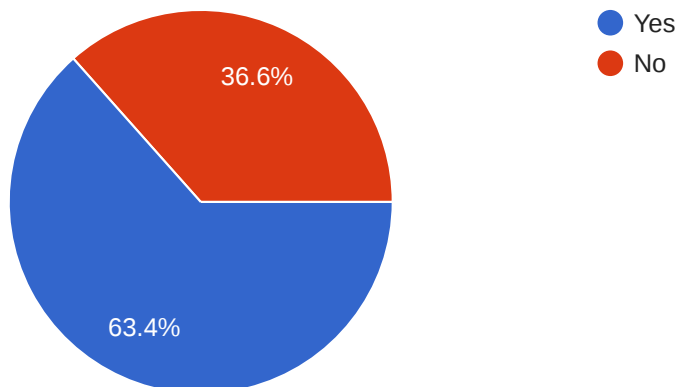
What is your age?

227 responses



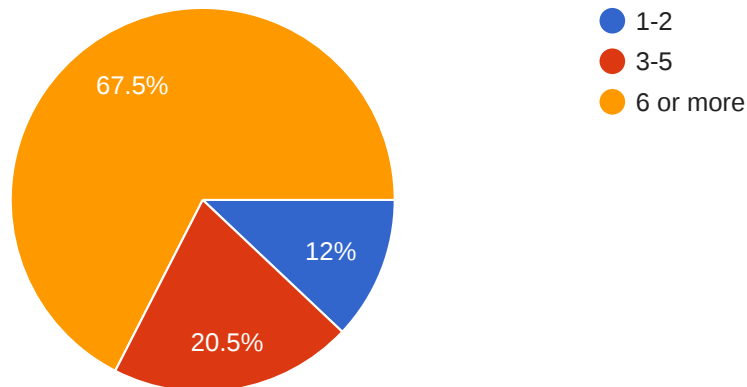
Do you live in the Hilton Head/Bluffton Area?

227 responses



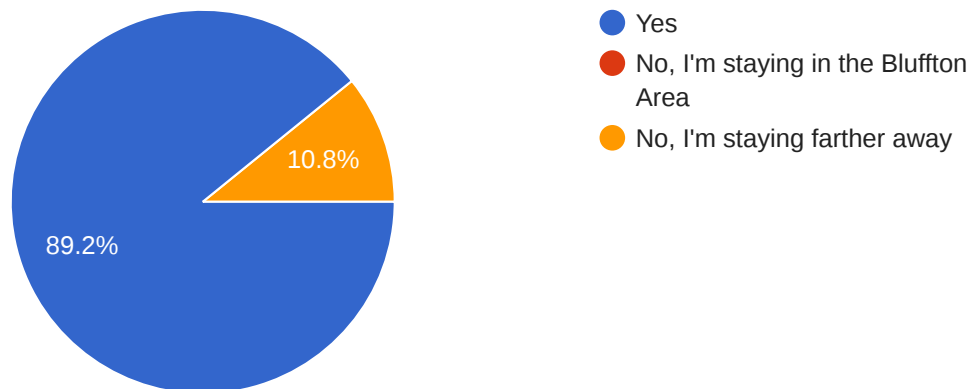
Including this visit, how many trips have you taken to Hilton Head?

83 responses



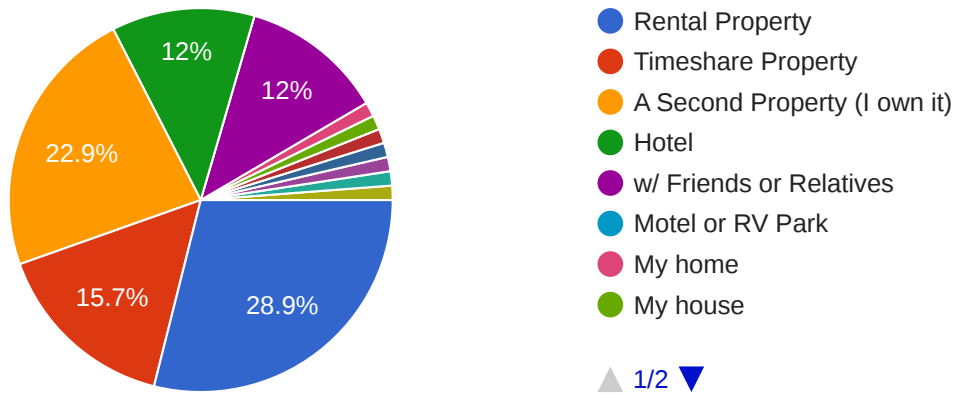
Are you staying on the Island on your trip?

83 responses



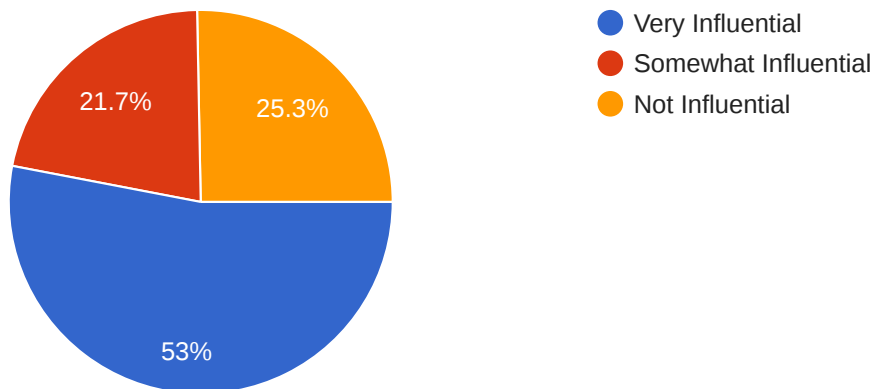
What type of lodging are you staying in?

83 responses



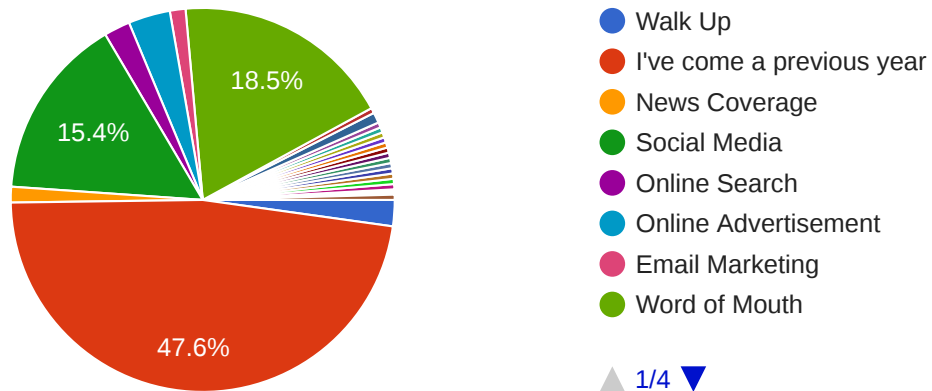
How influential was Wingfest when planning your trip?

83 responses



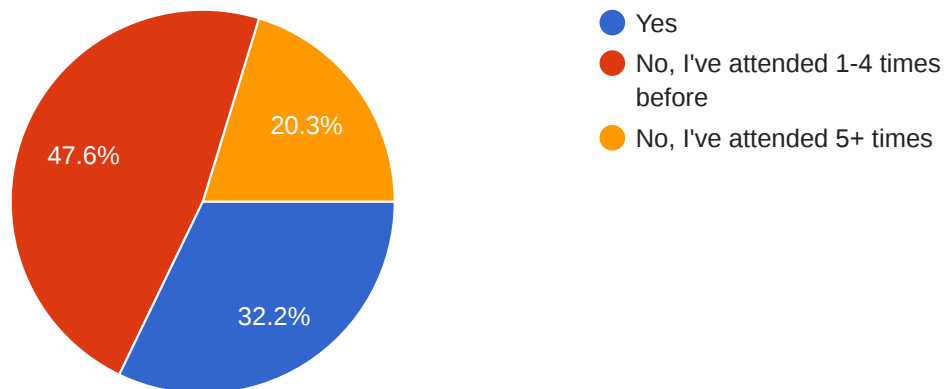
How did you first learn about Wingfest?

227 responses



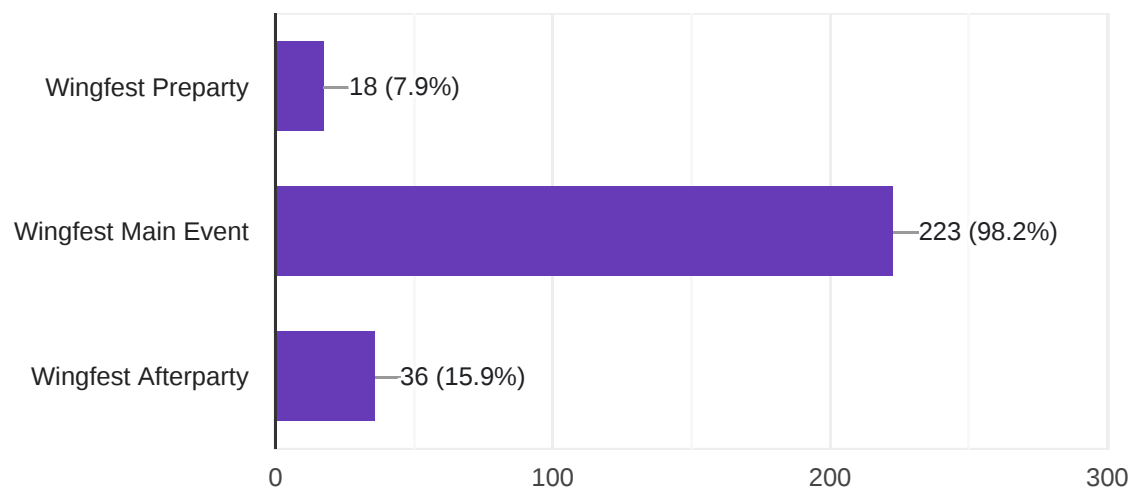
Was this your first time at Wingfest?

227 responses



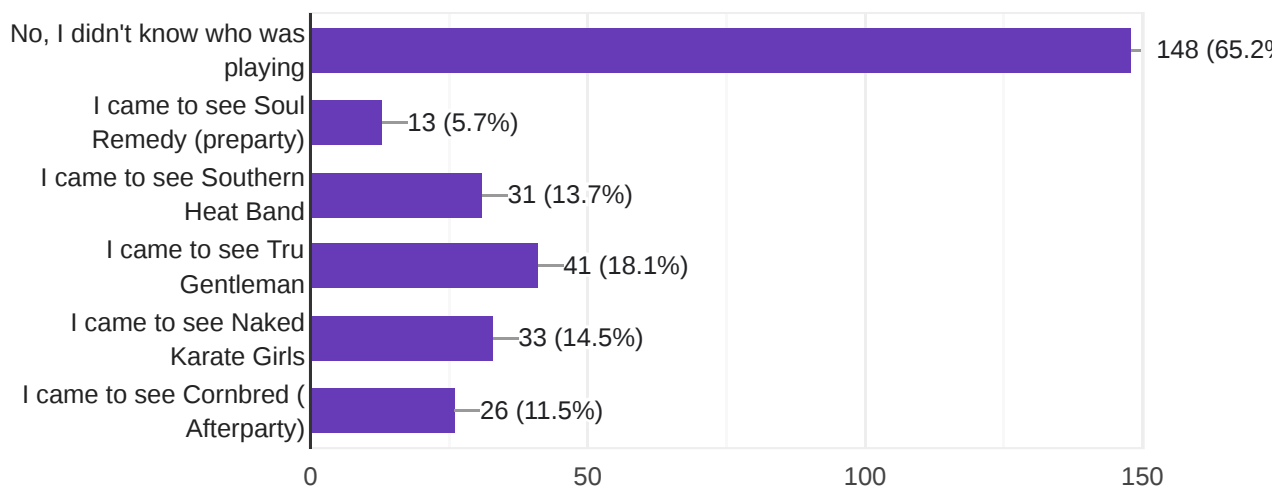
What event(s) did/are you attending?

227 responses



Did you come to see any of the bands?

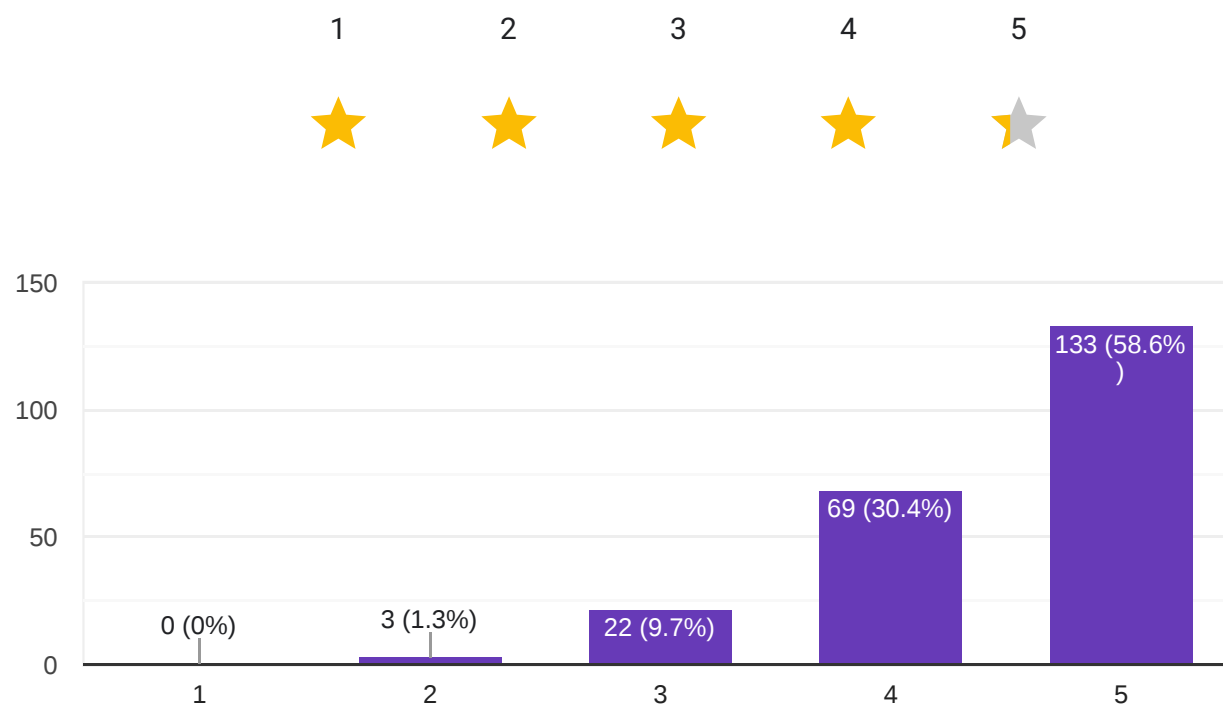
227 responses



How would you rate the music at Wingfest?

227 responses

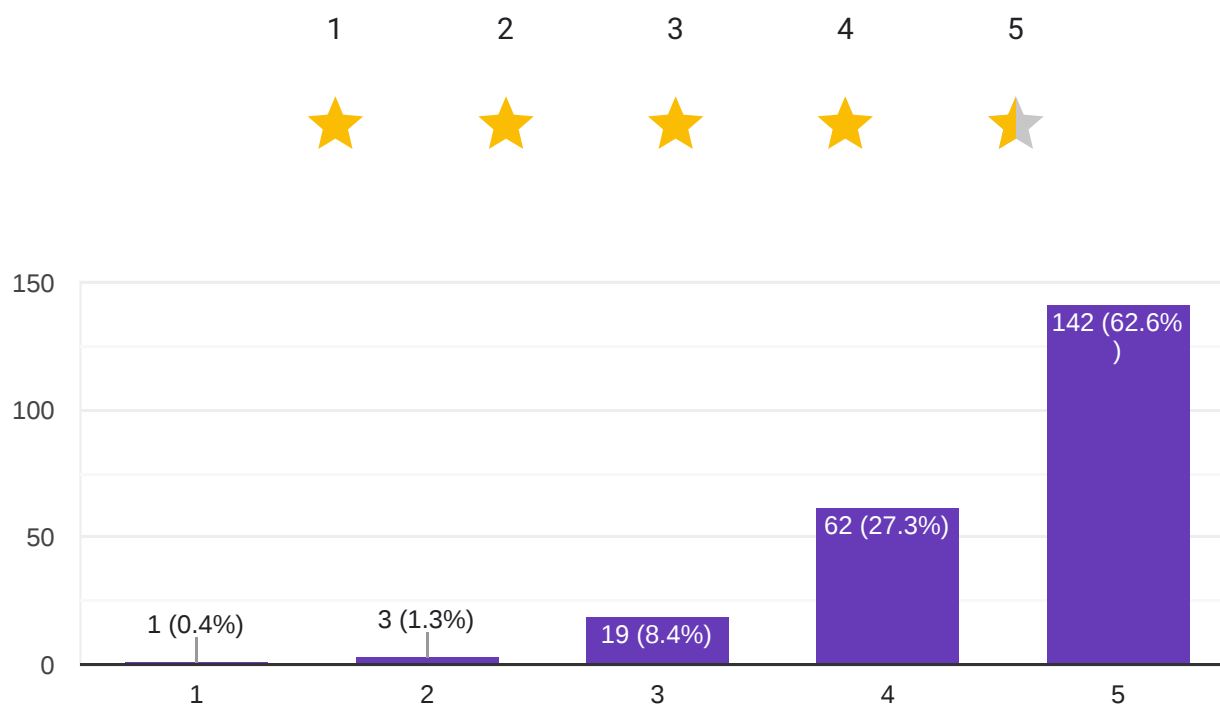
Average rating (4.46)



How would you rate the ambiance/location(s) of Wingfest?

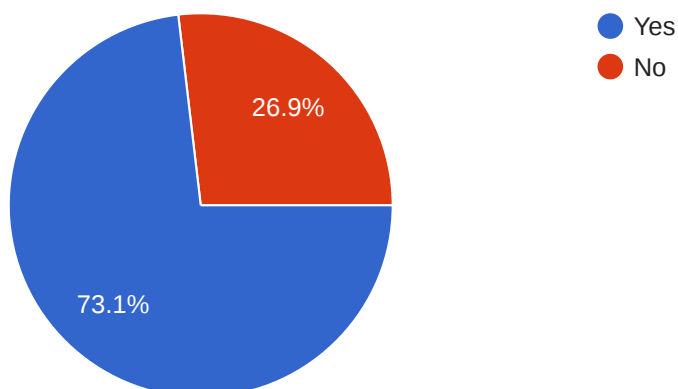
227 responses

Average rating (4.50)



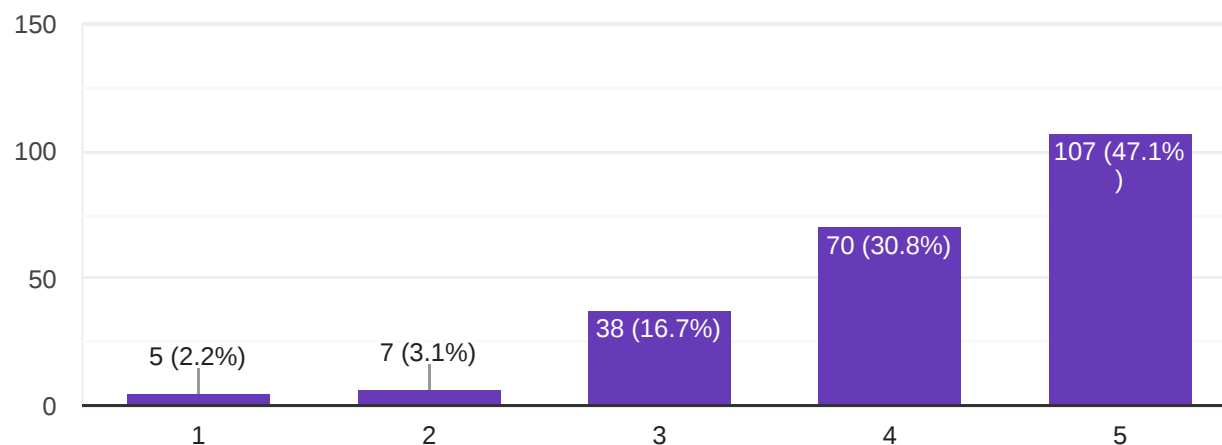
Did you know Wingfest is a fundraiser for the Island Rec Children's Scholarship Fund?

227 responses



How would you rate the cost/pricing of Wingfest?

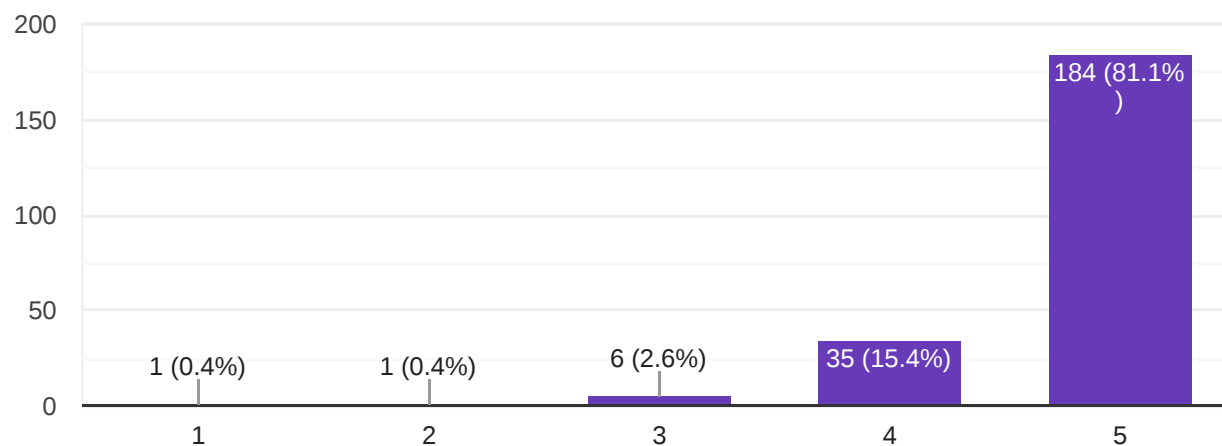
227 responses



How would you rate the staff friendliness of Wingfest?

227 responses

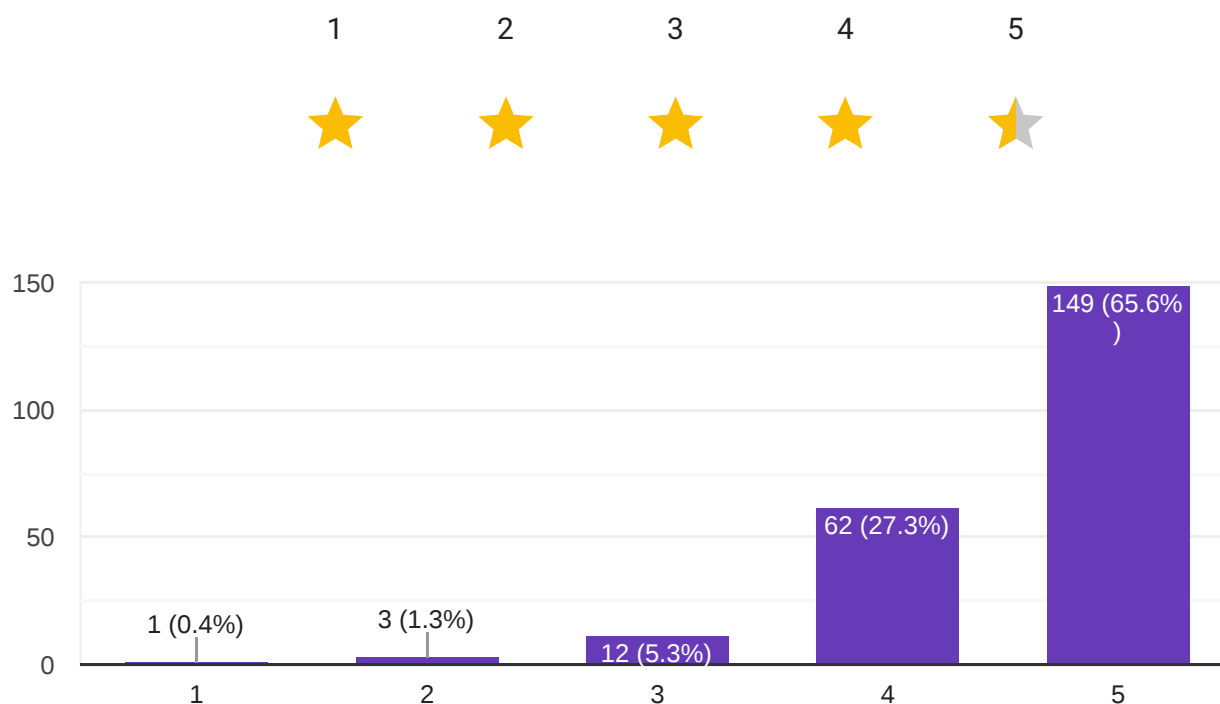
Average rating (4.76)



How would you rate the quality of the food of Wingfest?

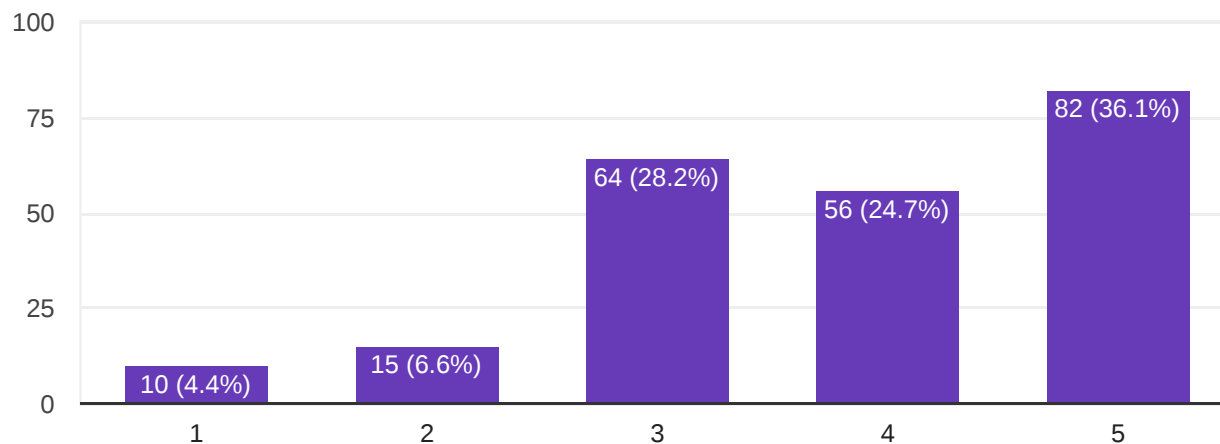
227 responses

Average rating (4.56)



How would you rate the parking of Wingfest?

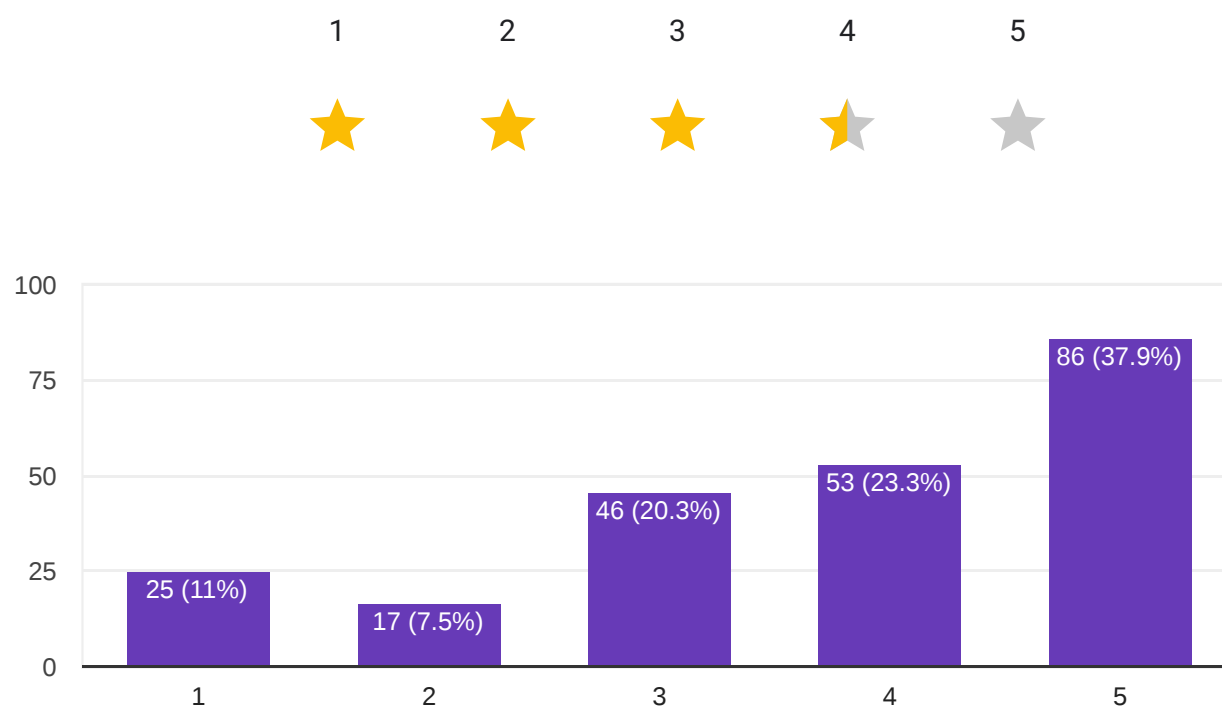
227 responses



How would you rate the seating and layout of Wingfest?

227 responses

Average rating (3.70)



How would you rate the crowdfund of Wingfest?

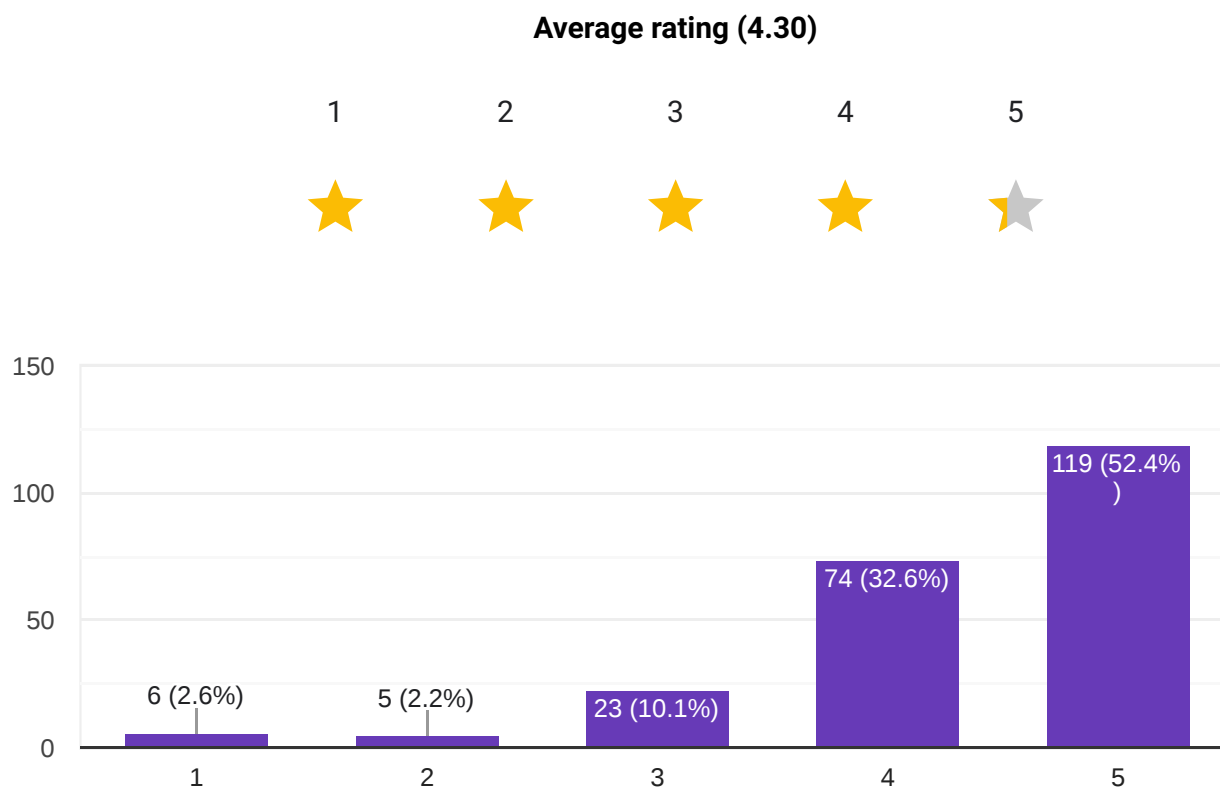
227 responses

Average rating (3.52)



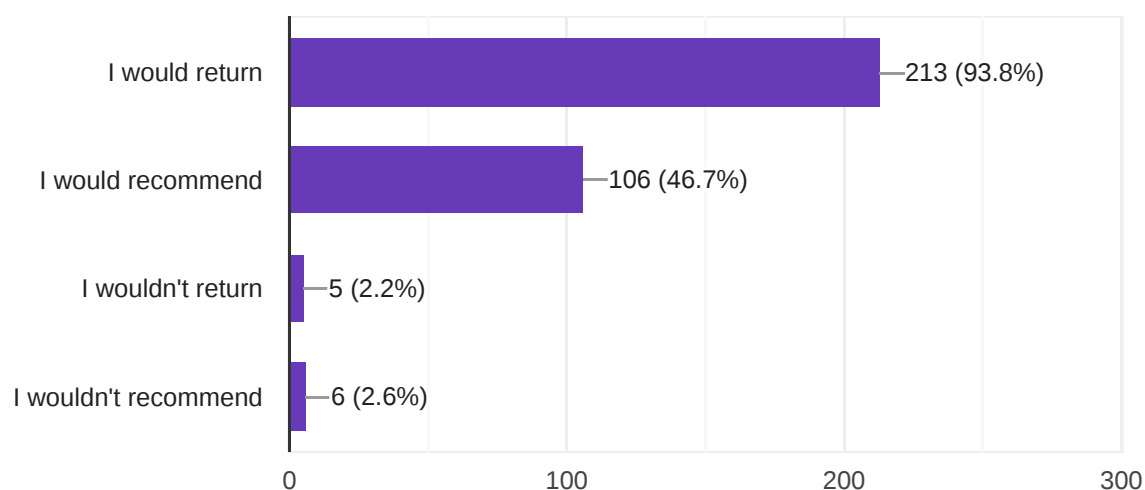
How would you rate the OVERALL VALUE of Wingfest?

227 responses



Would you recommend or return to Wingfest?

227 responses



Any final thoughts or comments?

227 responses

No

None

N/A

Love it

Na

Awesome event

Great event!

Great time

NA

Great

Nope

They should have played the chicken wing song and sold chicken wing hats. There should have been more shade and line control. It was hard to figure out where lines for different vendors ended

Hand wash stations next year, Or more wipes!!. Two entrances next year.

I would not space all wing producers in one corner. I would spread them through entire property. This would manage the crowd better and less confusion of the lines. It has been a good festival

Put the wings in the farthest location where there is more space

Need more trash receptacles.

I was working the wing fest, and the punch card was extremely difficult to use when serving out the wings.

AMAZING

Too many people, lines were ridiculous this year. Waiting 20 minutes for one wing. Punch cards were awful. Bring back tickets. Bands were not entertaining.

I didn't vote for Peoples Choice in time, I didn't know there was a deadline! (Before 4pm?!) Clearer communication of voting rules in print, and more categories please! (Best dry rubbed, spicy, fruity, etc -more winners, more joy!)

Love the Island Rec Center

Make more room for the patrons eating wings

Need to manage parking and lines better. Maybe pre-purchased packages should be able to pick up card ahead of time or get it right at entry and maybe even add vip entrance to reduce two more lines (entry/card pick up). Maybe spread out wing spots so lines aren't on top of each other. Need more tables and chairs.

Shorter and faster service and wing booths

More circular standing tables would be nice. A better way to restrict the people's choice votes to ensure it is only take by people ant the event and nobody else. Possibly handing out voting slips upon entry or locking the survey down to emails that purchased tickets.

Although the punch cards were an interesting idea, we preferred the ticket system better. We also liked it better when you were able to use tickets at other vendors to get beverages and things that weren't wings, instead of having to pay at those things individually. The increased attendance was fantastic but definitely affected crowd flow, we have never waited in line as long as we did this year and felt that we weren't able to eat as many wings because of it. Also, since we purchased a pack for 4 people the punch card made it difficult because normally we would split up and get wings at different places and meet up to eat them, but this year we weren't able to split up because there was only one punch card, so we weren't able to get as many wings, which is another area where we preferred the tickets. Also in previous years there has been free hand sanitizer but unless I missed it this year, I didn't see any. That was always very appreciated. We enjoyed the after party at the bank, too! Overall a great event that could use some tweaking for efficiencies, but this is our favorite event!

Our favorite event of the year

It was very crowded, not enough seating and long lines for wings starting around 12:30. Wing

tents should be spaced out more considering the crowds. I heard it wasn't nearly as crowded last year.

given the crowds this year it would be nice to space out the wing tents a bit - lines were incredibly long and you couldn't tell what lines went to what tent. also, limit the amount of wings per tent - people were going up to one tent and getting 10 wings, some ppl ran out due to this so we were not able to try all the tents

It became way too crowded in the afternoon. Unsafe. Have more food booths. Use timed tickets or limit entry when the area is full.

Great event. Need better parking

More tables/chairs are needed

I love it

Only critique was some vendors didn't have very good signage for the flavors, larger signs would be nice to see if the flavors are something we would like to try before waiting in line or having to walk past the line to the front to see a tiny menu

Please move the kids area to the wing side and move the wings over there

Looking forward to checking it out.

This is a dream come true i love wings!!

Super crowded this year!!

The booths for wings should be located where the purchase of the wing cards were. Taking over that space would allow for flow of traffic of people in line. What I mean is the booths backs should face each other instead of a circle off to the corner of the venue. They would be islands of booths for the wings only. This would help with flow of traffic. I think two separate islands of booths one to the left and the other to the right of the stage (where the band played). The rest of the booths with water drinks and vendors would be on the perimeter.

It was so fun

Overall I would say this was a fantastic event. We will definitely return. Thank you for all of the hard work put in by everyone.

The chicken wing booths on the right side of the stage were very congested. It was confusing to see who is in what line as the vendors were kind of in a shape that needs to be spread out

more, but otherwise it was fantastic.

More trash cans

Too crowded. Lines too long. Maybe limit tickets.

Good times

Possibly more little high top tables. Handwashing stations in the field maybe? More shade would be awesome but so would be guaranteeing the weather to be mid 70s and a light breeze. Oh and there may have been one that I missed but a map/layout with what each booth is offering would be really helpful too.

More high top standing tables are needed. I don't recommend roping off the pergola area with the benches. The columns provide additional standing spots and it's the only shaded area at the venue.

Jordan was so sweet and helpful. She made our experience so much better

Had a good time. Need more seating and possibly more shade.

Spread the wings out - lines too long and very confusing for people trying to either get in line or move around.

Love it

Many of the vendors ran out of wings before I could use the majority of my punch card.

Advertise voting deadline; more space at wing section

We were left with over 24 stamps and most the vendors were sold out. What a waste of money!

I have been coming since the very first one, the crowds are now too big to really enjoy yourself fully. I am always the first one in the gate., I wish the event would start at 10am., I also wish you could purchase a VIP wristband to be able to walk up to each wing booth without standing in the extremely long lines., wish there was a VIP area to be separate from the crowds., there is just too many people now coming I know that's good for raising money but it's not enjoyable.

Wing fest gets better and better every year. Likely as a result of the surveys that you do both on site and online. Excellent job, excellent planning, excellent execution. Keep up the great job.

Did not like paying with credit cards

The wing tents needed to be spread out more. Way too crowded in the front and confusing with the overlapping lines. It was disappointing to not be able to use my entire wing punchcard too (50 ct) because tents started running out of wings 1+ hrs before end of event.

Need more seating

Great weather!

Please add more high top tables

Need to cap how many people can attend, way over crowded and was running out of wings. Also 50/50 should have had the number posted somewhere. The event also needs to go back to tickets, hole punching caused lines to be longer.

Excellent seating

No

Lay-Out food stands too close together, with high attendance need line control.can use more table and seating areas.

I preferred the layout when the wing tents were spread throughout the park. The lines were too long having the wings condensed into one half.

My daughter is 10 year old has been charge \$10

Fantastic Event - very well done!

The punchcard system was very confusing and I found that the staff was under educated to guide us around the event. Our family ordered punch cards ahead of time online but it was unclear that the punch cards did not apply to drinks and other snacks including pizza. We prefer the ticket system. The event seems like it costs too much money without the ticket system.

The lines for getting wings and navigating the area was very unorganized. I suggest a center path or spreading out of the booths to accommodate the crowds. Interspersing drink booths and food areas would help. Also more high tops to eat and drink.

This was our first time at Wing Fest and truly enjoyed the event....we are planning another visit for next year around this event!

Need a bigger venue

It was amazing

We love it,,

Always look forward to this event

I prefer the tickets not these punch cards

WAYyyy too crowded. Not enough tables to eat at. Lines toooo long. some wipes or hand washing stations would be nice. Booths selling water or a water station for our water bottles would be a nice addition

Great vibes

One hot mamas!

Wonderful

FUN

My favorite festival

Right. Lot of changes this year, that is the only reason i am taking your survey. 1. This was first year for "card only". We always take cash out. Had almost left credit cards at home. 2. Punch card vs tickets. Basically okay except in the past i would get some of the tickets for my pocket he would get some in his... this year only one card so we could not "divide and conquer." 3. What the heck was the thinking with the tall tables this year? Who thought it was a good idea to put all the main wing tables at the beer end vs at the wing end? No one had anywhere to go to place their beverage and wing plate while they tried to eat a wing. That was Bizarre. Yall have never done that. 4. Similarly, who thought it was a great idea to put all the wing tents in one corner of the park this year instead of spreading them out? You hammed us all into one corner. Spread it out again and people will have room and lines will be smaller. 5. Evert year at the end, we had leftover tickets...so we would buy a water or tamales or fudge with those. Yoyr new system does not allow for that - those vendors were all still credit card only whereas only wings were for the tickets. 6. What went well: fabulous weather this tear and the multiple entrances kept lines short. (BUT, people coming in at the beer and were completely confused about where to go for wings. Had multiple people ask us. 7. Will any of those hicupps stop us from coming next year? Of course not! One of our dave events each year. But definitely not as solid as past years.

Can't wait to come back next year! Crowds very busy compared to other years but still worth going!

Great event! Just a lot of lines this year

Fun!

Just can't beat a meaningful fundraiser that has wings and fun on the menu

I was amazed at the size of the crowd this year!

It would have been better day if the wings tents were spread out across the entire yard, perhaps along the perimeter to allow for less congestion and long lines there was no crowd control and thankfully people were pleasant and shared space or it might have been a different experience. The food was great too bad they ran out of wings by 4 pm though. Could use more non beer alcoholic drinks such as nutrol or white claw.

Enjoyed it. Maybe have a few shaded spots available

The event was better than anticipated, and I will return and bring more people. The event will need a more prominent location next year with more parking/shuttle services. The venue was lovely, but it would be great to have more vendors to create more revenue sales.

More clarity on the voting process. Because with lines triple the size of any other establishment it's crazy that One hot mommas didn't place

I didn't like how the drinks were separate from the wing package and I also didn't like how everything wasn't included with the wing card like it was in previous years

Loved the vibe of the event. Wishing you all the best of luck with future Wingfests!

Enjoyed the wings. Glad they had other options that were not wings. The Lines for tents were a bit confusing on where they start, end, and went to.

Lines for wings and drinks too long. You even ran out of water! I love coming, but it's getting over crowded.

Could use more garbage bins located throughout, hand sanitizer wet ones for hand cleaning, set up of tents overcrowding in one far corner made it difficult to get to the far end tents for wings.

Wingfest was a great time. We were able to hang out with our friends have some amazing

wings! As we went to every tent to get some wings there wasn't one Wing that we didn't like they were all fantastic and each vendor should be applauded for there wings. I am not from Hilton Head so I don't quite know the geographic areas but if there was a bigger venue that would be great. Overall I think you guys knocked it out of the park.. We had such a great time with made for a great memory of Hilton head. Thank you!

I preordered my tickets & wings cards. When I arrived I was sent to multiple tents to get my wing punch cards. People at the gate should know where to send us, not just the Island Rec tent which I probably visited everyone. Also, I receipt would have been nice so I knew what I actually ordered.

Tough to judge, but, the lines for the different vendors intertwined all over the place made it challenging to walk around and some of the people became upset with that. That said, no idea how to account for that

96 more responses are hidden

If you'd like to be entered for your chance to win a package to next year's Wingfest, enter your email below!

171 responses

Yes

akozlows@yahoo.com

No

weisae@ymail.com

ashleythompson0290@yahoo.com

wolfgangey311@gmail.com

hannah.balser1@gmail.com

argsis2000@gmail.com

allisonhargis@aol.com

Shoppinggifsdeals@gmail.com

yoat42@gmail.com

Mweb136@gmail.com

jamesterleski@gmail.com

sgreenlawn@yahoo.com

joycecampbell348@gmail.com

aaalessi@gmail.com

kaceyreinhardt@gmail.com

Alyssarosegranato@gmail.com

cbenzinger411@gmail.com

emily.sharbaugh@gmail.com

cvhholcomb@gmail.com

willsue@aol.com

Denrodbanks@gmail.com

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sheapeterson17@gmail.com

Jimliston01@gmail.com

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Mbarlock@verizonnet

rhondacristaldi@verizon.net

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Kkbigham1968@gmail.com

dmorgan@collinsconstructioninc.com

raybobobrum@gmail.com

jdkavis-1@msn.com

pitchar454@gmail.com

Susanharp28@yahoo.com

askforlori@gmail.com

Mae_maejackson@yahoo.com

pjackson19@yahoo.com

Shirleya.k.mcrae@gmail.com

rchramega@att.net

Tab97rph@aol.com

Dfern1957@yahoo.com

Rkgoss@bellsouth.net

cowardkatelyn@gmail.com

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elainenishioka@yahoo.com

bobfrank_33@yahoo.com

Loganaistrop@icloud.com

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jackattack0524@gmail.com

Wanda.h.joseph@gmail.com

Morenovmmq@me.com

tprandolph6@gmail.com

fernaduelgaming@gmail.com

David@davidclisham.com

gabrielreyes09@gmail.com

pamelasoffera@gmail.com

johnchristinawilbur@gmail.com

rstrom05@gmail.com

kent@bailey.nu

Pcdewolfe@gmail.com

kejones340@gmail.com

Omystarz_2000@yahoo.com

davidbar2fb2@gmail.com

Asaid860@gmail.com

klearly9967@gmail.com

jetsfun@gmail.com

dradar2040@aol.com

Tlmthompson@aol.com

Jonirobin@gmail.com

Maggiepenrose@gmail.com

Patrick.gagnon@att.com

Dauchertc@gmail.com

Mdf1795@roadrunner.com

prengel@bex.net

stimpona@comcast.net

madswimmer10@gmail.com

61 more responses are hidden

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**HILTON HEAD ISLAND RECREATION ASSOCIATION
BOARD OF DIRECTORS' MEETING
MINUTES
August 8, 2025**

Meeting called to order at 8:00 a.m. with President Kristen Keller presiding.

BOARD MEMBERS PRESENT: Reid Perry, Kyle Theodore, Barry Taylor, Marty Pauls, Suzanne Hughson, Kristen Keller Mary Hall, Kate Boardman, Ray Craver, Steven Stauffer, Danny Ragline, Mike Manesiotis, Alison Scheider, and Bubba Gillis.

BOARD MEMBERS ABSENT: John Britschge

STAFF MEMBERS PRESENT: Frank Soule, Leah Arnold, Jordyn Weber and Hilary Groff

MINUTES: July 2025 minutes were presented. Reid Perry made a motion to accept the minutes. Susan Hughson seconded. The motion passed.

ATAX: ATAX Grant submission was approved.

The meeting adjourned at 8:25 a.m.

Reid Perry- Secretary

Jeep Island Budget 2026

Paid	Check/Donor	2024	2025	2026
SPONSORSHIPS				
Renewal By Andersen	Title Sponsor	\$1,500	\$500	\$1,500
AutoNation	Assisting	\$1,000	\$1,500	\$1,500
T-Mobile	Sponsor	\$200	\$0	\$0
ATAX	Accomodations Tax Money	\$0	\$10,000	\$15,000
Gaal Custom Homes/Local Pie Sponsor		\$200	\$200	\$20
Sponsorship Income		\$2,900	\$12,200	\$18,020

Paid	Check/Donor	2024	2025	2026
ENTRANCE AND CONCESSIONS				
Jeep Entries		\$6,454	\$7,180	\$8,000
Jeep Raffle	Jeep/Camper Raffle	\$31,451	\$31,225	\$37,000
Merchandise		\$698	\$885	\$1,250
Pluck a Duck		\$0	\$905	\$1,000
Friday/Saturday Night Raffles			\$298	\$350
Concessions	Soda, Water & Beer -Friday Night	\$1,639	\$0	\$0
Vendor Payment		\$0	\$300	\$400
Entrance Income		\$40,242	\$40,793	\$48,000

Check/Donor	2024	2025	2026
Income	\$43,142	\$52,993	\$66,020
Expenses	\$53,875	\$35,221	\$53,875
Total Profit	-\$10,733	\$17,772	\$12,145

Paid to:	Purpose	2024	2025	2026
CONCESSIONS				
Southern Eagle	Beer	\$350	\$0	\$0
Coca-Cola	Soda	\$400	\$0	\$0
Concession Expenses		\$750	\$0	\$0

Paid to:	Purpose	2024	2025	2026
OPERATIONS / ENTERTAINMENT				
	Purchase of Jeep	\$11,500	\$9,000	\$17,500
	Purchase of Trailer/4 wheel	\$0	\$6,203	\$7,500
Dave Fucci	Raffle Jeep repairs	\$0	\$559	\$1,000
Quality Logo	Koozies	\$250	\$0	\$605
Custom Outfitters	Shirts	\$8,250	\$0	\$5,000
U Printing	Jeep/Camper Raffle Tickets	\$61	\$102	\$250
Sticker Mule	Stickers	\$140	\$0	\$146
Royal Restroom	Restrooms	\$1,200	\$750	\$1,107
4 All Promos/Leftover Ladies	Good Bag Supplies	\$2,250	\$0	\$1,200
Custom Imprint	Rubber Duckies	\$815	\$0	\$1,000
Retro Roxx	Entertainment-Saturday	\$400	\$500	\$600
Retro Roxx	Entertainment-Friday	\$500	\$0	\$500
Idlewild South	Entertainment-Friday	\$3,000	\$0	\$0
Jeff Taylor	DJ_ Friday Night	\$0	\$300	\$0
Innovation	Lights and Sounding	\$2,500	\$0	\$0
Amazing Event Rentals	Fencing	\$450	\$300	\$1,500
Holiday Inn Express	Entertainment-Friday	\$950	\$0	\$0
Fun Express/Amazon	Pluck a Duck	\$0	\$155	\$68
Boathouse- Saturday Night	Sat Night Event		\$5,410	\$0
Security	Coastal Security		\$2,000	\$2,500
Park Rental	Coastal Discovery Rental		\$1,250	\$0
Crown Awards	Trophies		\$92	\$100
Misc	Trailer Boards		\$1,200	\$1,250
Operation Expenses		\$32,266	\$27,821	\$41,825

Paid to:	Purpose	2024	2025	2026
MARKETING				
Web Domain	Website	\$187	\$200	\$300
APEX Radio	Live Remote	\$200	\$0	\$500
Social Media	Facebook, Snapchat, Instag	\$500	\$7,200	\$9,000
Christian Perry	Photography / Drone Video	\$0	\$0	\$1,750
In House Printing	Posters and flyers	\$100	\$0	\$500
Marketing Expense		\$987	\$7,400	\$12,050

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Christian Perry	Photography / Drone Video	\$0	\$0	\$1,750
In House Printing	Posters and flyers	\$100	\$0	\$500

VENDORS	Tickets collected	% to Rec	% to Vendor
Melly Mel's	833	\$166	\$667
Tove's	3689	\$77	\$312
NYC Pizza	431	\$86	\$345
Guisseppi's	545	\$109	\$436
Firehouse Nutz	1705	\$341	\$1,364
Morgan's Mommy	541	\$108	\$433
Extreme Firehouse	2289	\$457	\$1,832
		\$1,344	\$5,389

Island Rec Association
FY 25 - Expenses-Amended

REC CENTER AQUATIC PROGRAM	FY 26 Town
75401 AQUATICS	\$ 16,000
TOTAL REC CENTER AQUATIC PROGRAM	\$ 16,000
REC CENTER SENIOR CITIZEN PROG	
SEMINARS/CLASSES	\$ 6,500
75709 SENIOR TRIPS	\$ 18,500
75725 ATHLETICS	\$ 500
75735 SOCIAL ACTIVITIES	\$ 1,500
TOTAL REC CENTER SENIOR CITIZEN PROG	\$ 27,000
REC CENTER ATHLETIC PROGRAMS	
75503 BASKETBALL-YOUTH	\$ 26,000
75505 BASKETBALL CAMP	\$ 1,100
75507 FLAG FOOTBALL	\$ 6,500
75509 ADULT SOCCER LEAGUES	\$ 1,000
75511 GOLF SCHOOL	\$ 2,000
75513 OPEN GYM PROGRAMS	\$ 100
75515 WATER SPORTS	\$ -
75516 SOCCER CAMP	\$ 3,750
75517 YOUTH-TENNIS	\$ 22,500
75520 VOLLEYBALL-GIRLS CAMP	\$ 13,125
75532 CHEERLEADING CAMP	\$ 7,500
75535 YOUTH SOCCER	\$ 45,000
75536 SURF CAMP	
75610 KARATE-SHOTOKAN	\$ 30,000
74613 CLUB SOCCER	\$ -
LACROSSE	\$ 3,750
FOOTBALL CAMP	\$ 39,750
75617 GATOR FOOTBALL	\$ -
YOUTH FITNESS	\$ 7,500
PICKLEBALL	\$ 63,750
Outdoor Recreation	\$ 93,750
TOTAL REC CENTER ATHLETIC PROGRAMS	\$ 367,075
FITNESS PROGRAMS	
MEMBERSHIPS	\$ 7,500
CLASSES	\$ 36,000
TOTALS	\$ 43,500
REC CENTER YOUTH/TEEN PROGRAMS	
75901 AFTER-SCHOOL CLUB	\$ 26,000
75904 DISCOVERY CLUB	\$ 16,000
75910 SUMMER DAY CAMP	\$ 40,000
75921 CHALLENGE/TEEN-SUMMER	\$ 9,190
75935 CHILDREN & TEEN ACTIVITIES	\$ 5,000

Island Rec Association
FY 25 - Expenses-Amended

TOTAL REC CENTER YOUTH/TEEN PROGRAMS	\$ 96,190
Total Program Expenses	\$ 549,765
REC CENTER OTHER INCOME	
75102 FRIENDS DRIVE	\$ 4,500
75107 MISC INCOME	\$ 3,500
75110 HERITAGE CONCESSIONS	\$ 2,500
75313 PARK RENTALS	\$ 3,600
75122 VENDING	\$ 20,000
75300 COMMUNITY EVENTS	\$ 400,000
75314 COMMUNITY EVENTS YOUTH	\$ 12,919
TOTAL REC CENTER OTHER INCOME	\$ 447,019
REC CENTER PAYROLL EXPENSE	
Administrative Staff	
76010 EXECUTIVE DIRECTOR	\$ 115,000
76029 DEPUTY DIRECTOR	\$ 80,000
76045 OFFICE MANAGER	\$ 54,075
76052 FRONT DESK MANAGER/COMMUNITY SERVICE	\$ 42,000
76052 FRONT DESK (part-time)	\$ 70,000
Total	\$ 361,075
Aquatic Staff	
76070 AQUATICS DIRECTOR	\$ 55,000
AQUATICS DIRECTOR ASSISTANT	\$ 47,500
76072 SEASONAL POOL STAFF	\$ 145,000
Total	\$ 247,500
Community Event Staff	
76050 SPECIAL EVENTS/FUND	\$ 49,000
76049 SPECIAL EVENTS STAFFING	\$ 52,000
Total	\$ 101,000
Maintenance Staff	
76073 MAINTENANCE WORKERS	\$ 41,100
76073 MAINTENANCE WORKERS (FT)	\$ 40,750
Total	\$ 81,850
Marketing	
76074 MARKETING DIRECTOR	\$ 47,500
Total	\$ 47,500
Senior Program Staff	
76035 S.E./SENIOR CITIZEN DIRECTOR	\$ 49,000
76037 SENIOR CITIZENS ADMIN.	\$ 12,500
Total	\$ 61,500

Island Rec Association
FY 25 - Expenses-Amended

Youth/Adult Athletic Staff	
76020 RECREATION SUPERINTENDENT	\$ 63,500
76040 RECREATION SUPERINTENDENT	\$ 59,000
76039 FITNESS COORDINATOR	\$ 54,000
76041 ATHLETICS PROGRAMS	\$ 50,000
76047 PROGRAM SUPERVISORS	\$ 50,000
76048 FACILITIES SUPERVISOR/FITNESS ATTEN.	\$ 60,000
Pickleball Coordinator	\$ 27,500
76021 Outdoor Program Specialist	\$ 56,000
76022 Outdoor Assistant	\$ 45,000
Total	\$ 465,000
Youth Program Staff	
76031 AFTER SCHOOL PROGRAM	\$ 97,000
76032 DISCOVERY CLUB	\$ 57,000
76033 SUMMER CAMP	\$ 110,000
76042 YOUTH/TEEN DIRECTOR	\$ 51,000
76043 ASSIST YOUTH/TEEN DIRECTOR	\$ 40,000
76038 THERAPEUTIC/YOUTH DIRECTOR	\$ 45,000
76034 CHALLENGE/TEEN PROGRAM-SUMMER	\$ 27,000
Total	\$ 427,000
TOTAL REC CENTER PAYROLL EXPENSE	\$ 1,792,425
REC CENTER PAYROLL TAXES & INS	
76075 PAYROLL TAXES	\$ 115,355
76078 WORKMANS COMPENSATION	\$ 16,500
76079 UNEMPLOYMENT TAXES	\$ 3,420
76080 HEALTH INSURANCE	\$ 110,131
76086 LONG TERM DISABILITY INSURANCE	\$ 8,500
76087 TENURE INCOME	\$ 11,000
76088 EMPLOYEE 401K CONTRIBUTIONS/Admin	\$ 30,000
TOTAL REC CENTER PAYROLL TAXES & INS	\$ 294,906
REC CENTER GEN ADM EXPENSE	
Administration	
77010 AUDIT/BANK FEES	\$ 65,000
77011 LEGAL FEES	\$ 1,000
77014 VEHICLES	\$ 25,500
77015 COMPUTER SERVICES	\$ 35,000
77020 DUES & CERTIFICATIONS	\$ 10,000
77050 EDUCATIONAL TRAINING/MEETINGS	\$ 30,000
77026 GENERAL LIABILITY	\$ 105,000
77075 LEASES-OFFICE EQUIPMENT	\$ 2,500
77083 DEPRECIATION	\$ -

Island Rec Association
FY 25 - Expenses-Amended

77060 POSTAGE & FREIGHT	\$ 4,000
77085 SUPPLIES-OFFICE	\$ 14,000
77087 SUPPLIES-GENERAL PURPOSE	\$ 16,000
77090 TELEPHONE/CELL SERVICES	\$ 36,380
Total	\$ 344,380
Senior Admin	
77096 SUPPLIES GEN PURPOSE-SENIOR PR	\$ 1,500
77097 SUPPLIES-OFFICE-SENIOR PROGRAM	\$ 1,750
77098 TELEPHONE-SENIOR PROGRAMS	\$ 2,000
78022 COMPUTER SERV-SENIOR PR	\$ 500
78024 POSTAGE-SENIOR PROGRAMS	\$ 250
78029 COPIER MAINT-SENIOR	\$ 1,200
Total	\$ 7,200
Total Admin	\$ 351,580
Marketing	
77012 ADVERTISING	\$ 30,500
77055 PRINTING-GENERAL	\$ 5,750
77056 PRINTING-NEWSLETTERS	\$ 2,500
78021 ADVERTISING-SENIOR PROGRAMS	\$ -
78025 PRINTING GEN-SENIOR PROGRAMS	\$ -
Total	\$ 38,750
Building/Grounds-Rec Center	
77023 ELECTRICITY-REC CTR	\$ 105,000
77028 FIRE ALARM SERVICE/CAMERAS	\$ 18,000
77034 TRASH REMOVAL	\$ 6,500
77065 REPAIRS-BUILDING	\$ 20,000
BASKETBALL GOAL MAINTENANCE	\$ 7,500
PEST CONTROL	\$ 5,000
Camera Monitoring	\$ 4,500
77088 SUPPLIES-JANITORIAL	\$ 35,000
77095 WATER & SEWER	\$ 12,000
78010 HEATING & AC	\$ 32,000
78011 GROUNDS MAINTENANCE	\$ 20,000
78012 GYM FLOOR	\$ 7,900
CLEANING SERVICE (REC CENTER/POOL)	\$ 102,000
ELEVATOR MAINTENANCE	\$ 4,500
Turf Play Area Maintenance	\$ 4,500
Total	\$ 384,400
Parks	
78017 GROUNDS MAINTENANCE-SHELT.COVE	\$ -
77025 ELECTRICITY-SHELTER COVE	\$ 1,200

Island Rec Association
FY 25 - Expenses-Amended

Total	\$ 1,200
Pool Operating Expenses	
77022 PROPANE	\$ 47,500
77066 REPAIRS-SWIM POOL	\$ 32,500
77086 SUPPLIES-SWIM POOL	\$ 43,000
Total	\$ 123,000
Senior Building	
77029 ELECTRICITY	\$ 4,000
77094 WATER	\$ 800
77035 CLEANING	\$ 7,800
Total	\$ 12,600
Total Facilities	\$ 521,200
TOTAL REC CENTER GEN ADM EXPENSE	\$ 1,420,130
BUDGET-EXPENSES TOTAL (OPERATING)	\$ 3,995,645
BUDGET-EXPENSES TOTAL	\$ 3,995,645

Oyster Festival Budget 2026

Sponsors	Business	2024	2025	2026
Title Sponsor	South State Bank	\$6,000	\$6,500	\$6,750
Sponsorship	Sponsors	\$5,000	\$5,700	\$3,650
Pop Up Shop	24 Vendors	\$2,025	\$1,800	\$2,400
Presale Tickets- Saturday		\$0	\$10,033	\$29,997
Town of HHI	ATAx	\$17,500	\$25,000	\$30,000
	Total Sponsorship	\$30,525	\$49,033	\$72,797

Day of Income	Purpose	2024	2025	2026
Entrance	Friday	\$30,665	\$33,790	\$5,111
Entrance	Saturday	\$17,162	\$5,490	\$19,957
Tickets	Saturday (20%)	\$4,046	\$6,586	\$3,060
Beer	Friday	\$3,897	\$3,949	\$3,979
Beer	Saturday	\$9,210	\$15,978	\$18,526
Oyster	Saturday	\$12,797	\$12,982	\$14,345
Soda	Friday	\$0	\$0	\$345
Soda	Saturday	\$1,338	\$850	\$866
Merchandise	Friday	\$1,113	\$792	\$949
Merchandise	Saturday	\$3,087	\$1,535	\$3,187
Vendor Payout	Split			\$6,264
	Total Day of Income	\$83,315	\$81,953	\$76,589

Total Income	\$113,840	\$130,986	\$149,386
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	2024	2025	2026
Total Income	\$113,840	\$130,986	\$149,386
Total Expenses	\$120,291	\$104,603	\$134,897
Total Profit	-\$6,450	\$26,383	\$14,489

Concessions	Purpose	2024	2025	2026
Coca Cola	Soda	\$1,250	\$1,209	\$756
Southern Eagle	Beer	\$6,003	\$8,000	\$7,539
Piggly Wiggly	Ice	\$0	\$0	\$336
Rollers	Wine + Liquor	\$0	\$0	\$1,559
Hudson's	Shrimp	\$7,600	\$2,800	\$4,550
Roy's Place	Oysters	\$35,134	\$38,815	\$46,384
Misc	Bar mops, fire wood, knives	\$500	\$782	\$1,586
	Concession Expenses	\$50,487	\$51,606	\$62,710

Entertainment	Purpose	2024	2025	2026
All Events LLC	Stage	\$2,050	\$2,067	\$2,250
InnAVation	Sound	\$2,000	\$3,000	\$3,200
Friday Night	Entertainer	\$850	\$850	\$1,000
Opening Band	Entertainer	\$750	\$500	\$750
2nd Band	Entertainer	\$1,500	\$500	\$1,000
Closing Band	Entertainer	\$1,500	\$1,200	\$1,250
	Entertainment Expenses	\$8,650	\$8,117	\$9,450

Operations	Purpose	2024	2025	2026
Amazing Event Rentals	Tents, tables, chairs	\$4,587	\$4,718	\$4,900
NoQ	Cashless System	\$6,328	\$0	\$4,000
Coastal Security	Security	\$1,964	\$1,687	\$1,750
Republic Waste	Trash Cans/Dumpster	\$5,975	\$6,345	\$6,500
Royal Restrooms	Restrooms	\$3,297	\$2,894	\$2,667
Shuttle	USCB / Palmetto Breeze	\$413	\$1,805	\$2,500
Esigns	Signage	\$600	\$83	\$250
Leftover Ladies	USCB Giveaway	\$7,553	\$663	\$750
Staff	Part Time Staff		\$938	\$1,500
Amazon	Oyster Shucking	\$200	\$0	\$0
Volunteer Lunch		\$200	\$389	\$400
Beaufort County Sherrifs	Security		\$485	\$2,000
	Operation Expenses	\$31,116	\$19,523	\$25,217

Marketing	Purpose	2024	2025	2026
Adventure Radio	2 Remotes	\$200	\$0	\$400
Esigns	banners / signs	\$1,000	\$83	\$250
Eat It and Like It	Jesse Blanco	\$2,250	\$0	\$3,100
Facebook	Advertisement	\$0	349.98	\$6,250
WTOC	ATAx	\$15,250	\$13,000	\$15,000
	Marketing Expenses	\$18,700	\$13,433	\$25,000

Misc.	Purpose	2024	2025	2026
Custom Outfitters	T-Shirts	\$3,170	\$2,236	\$2,500
Salty Dog	T-Shirts	\$4,438	\$5,049	\$5,500
Community Groups	Volunteers	\$6,900	\$6,875	\$7,000
Town of Hilton Head	Vendor Permits	\$0	\$0	\$20
	Misc. Expenses	\$11,338	\$11,924	\$12,520

Total Expenses	\$120,291	\$104,603	\$134,897
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Wing Fest 2026-BUDGET

Paid	Description	2024	2025	2026		Paid to:	Purpose	2024	2025	2026
SPONSORSHIPS						CONCESSIONS				
Town of HHI	ATAX Grant	\$25,000	\$25,000	\$30,000		Sysco	Wings for restaurants	\$12,600	\$17,871	\$17,527
Hargray	Title Sponsor	\$6,000	\$6,000	\$7,000		Lincoln and South	Beer			\$3,043
SAV HHI Airport	Title Sponsor	\$7,000	\$4,000	\$4,000		Southern Eagle	Beer	\$8,200	\$14,419	\$15,115
Summit Services	Sponsor	\$4,000	\$2,000	\$0		Rollers	Nutrls			\$1,159
Leaf Filter	Sponsor	\$1,000	\$0	\$1,500		Coca-Cola	Sodas	\$1,300	\$1,930	\$2,325
Lowcountry Living	Sponsor	\$0	\$0	\$750		Piggly Wiggly	Bags of ice	\$0	\$180	\$539
Gutter Solutions	Sponsor	\$0	\$0	\$750		WebstaurantStore	Paper products	\$0	\$1,588	\$1,243
Lincoln and South	Sponsor		\$0	\$825		Amazon	beer rags, openers, wing eating, v	\$200	\$200	\$0
Misc Sponsors			\$5,000	\$450		Burnt Church Distillery	liquor	\$6,267	\$7,451	\$7,967
	Sponsorship Income	\$43,000	\$42,000	\$45,275			Concession Expenses	\$28,567	\$43,639	\$48,918

Paid	Description	2024	2025	2026		Paid to:	Purpose	2024	2025	2026
DAY OF INCOME						ENTERTAINMENT				
PP Entrance Saturday		\$15,269	\$18,122	\$12,761		Innovation	Sound Services	\$3,000	\$3,000	\$3,500
Entrance-Saturday		\$30,953	\$34,573	\$40,159		True Gentlemen	Band	\$1,200	\$1,200	\$1,300
Vendor Income-Saturday		\$30,214	\$35,930	\$31,963		Crosstown Traffic/CornBred	Band	\$600	\$600	\$1,000
Wings- Saturday		\$30,507	\$39,572	\$60,017		Naked Karate Girls	Band	\$6,900	\$6,900	\$7,200
T-Shirts-Saturday		\$3,098	\$4,571	\$4,656			Entertainment Expenses	\$11,700	\$11,700	\$13,000
Soda and Water-Saturday		\$1,977	\$3,735	\$4,084						
Beer-Saturday		\$25,636	\$33,579	\$40,346		Paid to:	Purpose	2024	2025	2026
Liquor-Saturday		\$6,267	\$7,451	\$7,967		OPERATIONS				
50/50 Raffle		\$0	\$0	\$475		Town of HHI	Bollard Repair	\$175	\$0	\$0
Photo Booth- Saturday		\$0	\$170	\$0		Shuttle	Palmetto Breeze	\$990	\$0	\$2,200
	Day of Income	\$143,921	\$177,703	\$202,429		Coastal Security	Park security	2,299.00	\$2,015	\$2,800

	Total Income 2024	\$186,921			Royal Restrooms	Restrooms	\$2,825	\$2,556	\$3,132
	Total Expenses 2024	\$120,623			Town Cleaning	Clean Restroom	\$300	\$150	\$725
	Total Profit 2024	\$66,299			Steve Hart	Trash pick-up	\$4,525	\$4,462	\$4,725
					Amazing Event Rentals	Tents/tables/portalet	\$5,060	\$5,051	\$4,504
	Total Income 2025	\$219,703			SC SLED	beer / liquor license	\$75	\$65	\$75
	Total Expenses 2025	\$137,269			Sheriffs		\$1,164	\$631	\$0
	Total Profit 2025	\$82,434			Staffing		\$1,350	\$1,223	\$394
					NYCP	Volunteer Lunch	\$100	\$404	\$559
	Total Income 2026	\$247,704			Crown Awards	Plaques	\$250	\$219	\$177
	Total Expenses 2026	\$170,524			Far Out Awards	Belt and 1st Place	\$700	\$700	\$712
	Total Profit 2026	\$77,179			Salty Dog	T-Shirts	\$0	\$4,096	\$4,493
					Custom Outfitters	T-Shirts	\$3,730	\$3,306	\$2,228
					Custom Ink	Beer Discount Cups	\$409	\$125	\$0
					WebstaurantStore	Beer Pitchers	\$46	\$54	\$0
					Discount Mugs/Pens.com	Koozies	\$238	\$0	\$265
					Kwik Covers	table cloth covers	\$0	\$916	\$1,000
					Marshall Austin	stage rental	\$2,067	\$2,067	\$2,067
					Amazon	wing contest	\$0	\$59	\$165
					Correll Insurance				\$6,155
					Leftover Ladies	Giveaways	\$0	\$0	\$295
					E-Signs	Signage	\$700	\$45	\$1,039
						Operation Expenses	\$27,003	\$28,044	\$41,106

						Paid to:	Purpose	2024	2025	2026
						MARKETING				
						Eat it and Like It	ATAX Marketing	\$2,500	\$0	\$3,000
						WTOC	ATAX Marketing	\$13,500	\$13,500	\$17,500
						Facebook	Marketing	\$2,800	\$2,000	\$5,000
						Apex Radio	Remote	\$0	\$200	\$250
						Google/Youtube	Ad	\$75	\$2,000	\$2,500
						Little White Box	Photo Booth	\$0	\$2,165	\$0
							Marketing Expenses	\$18,875	\$19,865	\$28,250

						Paid to:	Purpose	2024	2025	2026
						VOLUNTEER				
						HH Football Team	Beer Truck	\$750	\$1,000	\$1,000
						Community Dinner	Tickets	\$1,000	\$3,000	\$3,000
						Vanlandingham	Beer	\$2,700	\$2,400	\$2,500
						Zonta		\$1,800	\$1,950	\$2,000
						Children's Center	Entrances	\$3,600	\$3,600	\$3,750
							Volunteer Expenses	\$9,850	\$11,950	\$12,250

Paid to:	Purpose	2024	2025	2026
PAYOUT				
Saturday	Vendors	\$24,628	\$22,070	\$27,000
		\$24,628	\$22,070	\$27,000

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2025 12

ORIGINAL APPROP		REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
999 HHI RECREATION ASSOCIATION							
99901 REC CENTER AQUATICS REVENUE							
99901 64401	AQUATICS						
-45,000.00		-47,500.00	-107,466.35	-3,078.66	0.00	59,966.35	226.2%
99901 64402	REC SWIM						
-75,000.00		-77,500.00	-105,143.69	-5,462.57	0.00	27,643.69	135.7%
99901 64403	SWIM TEAM						
-25,000.00		-25,000.00	-23,850.00	-3,065.00	0.00	-1,150.00	95.4%
99901 64407	SWIM LESSONS						
-30,000.00		-30,000.00	-17,930.00	-240.00	0.00	-12,070.00	59.8%
TOTAL REC CENTER AQUATICS REVENUE							
-175,000.00		-180,000.00	-254,390.04	-11,846.23	0.00	74,390.04	141.3%
99901000 REC CENTER AQUATIC PROGRAM							
99901000 75401	AQUATICS						
16,000.00		16,000.00	26,298.87	2,827.00	0.00	-10,298.87	164.4%
99901000 75407	SWIM LESSONS						
0.00		0.00	1,148.35	0.00	0.00	-1,148.35	100.0%
TOTAL REC CENTER AQUATIC PROGRAM							
16,000.00		16,000.00	27,447.22	2,827.00	0.00	-11,447.22	171.5%
99902 REC CENTER SENIOR CITIZEN PROG							
99902 64620	SENIOR CENTER MEMBERSHIP						
-12,500.00		-12,500.00	-15,505.00	-410.00	0.00	3,005.00	124.0%
99902 64709	SENIOR TRIPS						
-7,500.00		-12,500.00	-34,524.24	-254.00	0.00	22,024.24	276.2%
99902 64710	CLASSES & SEMINARS						
-9,500.00		-9,500.00	-1,582.00	-154.00	0.00	-7,918.00	16.7%
99902 64720	EXERCISE CLASSES						
0.00		0.00	-2,042.00	-80.00	0.00	2,042.00	100.0%
99902 64725	ATHLETICS						
0.00		0.00	-20,006.50	-1,112.00	0.00	20,006.50	100.0%

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2025 12

ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
99902 64735 SOCIAL ACTIVITIES						
-3,350.00	-3,350.00	-6,695.00	-240.00	0.00	3,345.00	199.9%
99902 64750 SENIOR CENTER FACILITY RENTAL						
-7,840.00	-7,840.00	-7,519.00	-1,174.00	0.00	-321.00	95.9%
TOTAL REC CENTER SENIOR CITIZEN P						
-40,690.00	-45,690.00	-87,873.74	-3,424.00	0.00	42,183.74	192.3%
99902000 REC CENTER SENIOR CITIZEN PROG						
99902000 74710 CLASSES & SEMINARS						
5,000.00	5,000.00	0.00	0.00	0.00	5,000.00	.0%
99902000 74720 EXERCISE CLASSES						
0.00	0.00	14,807.92	1,962.80	0.00	-14,807.92	100.0%
99902000 75709 SENIOR TRIPS						
12,000.00	14,500.00	32,373.89	2,240.94	0.00	-17,873.89	223.3%
99902000 75725 ATHLETICS						
500.00	500.00	0.00	0.00	0.00	500.00	.0%
99902000 75735 SOCIAL ACTIVITIES						
1,500.00	1,500.00	11,657.11	343.90	0.00	-10,157.11	777.1%
TOTAL REC CENTER SENIOR CITIZEN P						
19,000.00	21,500.00	58,838.92	4,547.64	0.00	-37,338.92	273.7%
99903 REC CENTER ATHLETIC PROGRAMS						
99903 64501 ALL-SPORTS CAMP						
-7,500.00	-7,500.00	-504.00	0.00	0.00	-6,996.00	6.7%
99903 64505 BASKETBALL HUSTLER CAMP						
0.00	0.00	200.00	200.00	0.00	-200.00	100.0%
99903 64506 YOUTH BASKETBALL						
-55,000.00	-55,000.00	-69,373.00	-5,144.00	0.00	14,373.00	126.1%
99903 64507 FLAG FOOTBALL						
-12,500.00	-12,500.00	-15,587.50	-600.00	0.00	3,087.50	124.7%
99903 64508 ADULT BASKETBALL LEAGUES						
0.00	0.00	-6,100.00	0.00	0.00	6,100.00	100.0%
99903 64509 ADULT SOCCER LEAGUES						
-7,500.00	-7,500.00	-9,550.00	-2,000.00	0.00	2,050.00	127.3%
99903 64510 JR ACADEMY SOCCER						
0.00	0.00	-13,280.00	0.00	0.00	13,280.00	100.0%

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2025 12

ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
99903 64511 0.00 GOLF SCHOOL	0.00	-300.00	0.00	0.00	300.00	100.0%
99903 64512 0.00 CORNHOLE	0.00	-640.00	0.00	0.00	640.00	100.0%
99903 64513 -8,000.00 OPEN GYM PROGRAMS	-8,000.00	-14,634.83	-134.00	0.00	6,634.83	182.9%
99903 64514 -45,000.00 FOOTBALL CAMP	-45,000.00	-42,603.04	0.00	0.00	-2,396.96	94.7%
99903 64515 -125,000.00 OUTDOOR PROGRAMS	-125,000.00	-116,661.46	-9,195.04	0.00	-8,338.54	93.3%
99903 64516 -5,000.00 SOCCER CAMP	-5,000.00	0.00	0.00	0.00	-5,000.00	.0%
99903 64517 -30,000.00 YOUTH-TENNIS	-30,000.00	-20,073.05	-1,384.02	0.00	-9,926.95	66.9%
99903 64520 -17,500.00 VOLLEYBALL-GIRLS CAMP	-17,500.00	-17,870.00	-2,310.00	0.00	370.00	102.1%
99903 64530 0.00 YOUTH WRESTLING	0.00	-600.00	0.00	0.00	600.00	100.0%
99903 64532 -10,000.00 CHEERLEADING CAMP	-10,000.00	-12,025.00	-1,400.00	0.00	2,025.00	120.3%
99903 64535 -105,000.00 YOUTH SOCCER	-105,000.00	-132,742.40	-2,333.55	0.00	27,742.40	126.4%
99903 64538 0.00 E-SPORTS	0.00	-1,925.00	0.00	0.00	1,925.00	100.0%
99903 64539 0.00 FAST TRACKERS	0.00	-4,025.41	-250.00	0.00	4,025.41	100.0%
99903 64540 -10,000.00 YOUTH REC CLASSES	-10,000.00	0.00	0.00	0.00	-10,000.00	.0%
99903 64541 -230,000.00 FITNESS PROGRAM MEMBERSHIPS	-230,000.00	-226,973.84	-12,437.49	0.00	-3,026.16	98.7%
99903 64542 -40,000.00 FITNESS PROGRAM CLASSES	-40,000.00	-51,088.24	-4,099.50	0.00	11,088.24	127.7%
99903 64603 -12,000.00 FENCING	-12,000.00	-15,147.00	-539.00	0.00	3,147.00	126.2%
99903 64610 -40,000.00 KARATE-SHOTOKAN	-40,000.00	-24,322.50	-950.00	0.00	-15,677.50	60.8%
99903 64611 0.00 DANCE	0.00	-792.30	0.00	0.00	792.30	100.0%
99903 64612 0.00 ROLLER HOCKEY	0.00	-1,000.00	0.00	0.00	1,000.00	100.0%
99903 64614 -5,000.00 LACROSSE	-5,000.00	-3,216.00	0.00	0.00	-1,784.00	64.3%
99903 64617 0.00 GATOR FOOTBALL	0.00	-3,170.00	-30.00	0.00	3,170.00	100.0%

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99903 64619 PICKLEBALL INCOME						
-90,000.00	-90,000.00	-139,981.54	-3,585.00	0.00	49,981.54	155.5%
TOTAL REC CENTER ATHLETIC PROGRAM						
-855,000.00	-855,000.00	-943,986.11	-46,191.60	0.00	88,986.11	110.4%
99903000 REC CENTER ATHLETIC PROGRAMS						
99903000 75502 LACROSSE						
3,750.00	3,750.00	0.00	0.00	0.00	3,750.00	.0%
99903000 75503 BASKETBALL-YOUTH						
26,000.00	26,000.00	0.00	0.00	0.00	26,000.00	.0%
99903000 75505 BASKETBALL HUSTLER CAMP						
1,100.00	1,100.00	0.00	0.00	0.00	1,100.00	.0%
99903000 75506 YOUTH BASKETBALL						
0.00	0.00	55,291.63	15,664.00	0.00	-55,291.63	100.0%
99903000 75507 FLAG FOOTBALL						
6,500.00	6,500.00	13,800.38	1,392.35	0.00	-7,300.38	212.3%
99903000 75508 ADULT BASKETBALL LEAGUES						
0.00	0.00	4,154.88	0.00	0.00	-4,154.88	100.0%
99903000 75509 ADULT SOCCER LEAGUES						
1,000.00	1,000.00	1,312.30	98.66	0.00	-312.30	131.2%
99903000 75510 JR ACADEMY SOCCER						
0.00	0.00	4,200.00	0.00	0.00	-4,200.00	100.0%
99903000 75511 GOLF SCHOOL						
2,000.00	2,000.00	0.00	0.00	0.00	2,000.00	.0%
99903000 75512 CORNHOLE						
0.00	0.00	23.52	0.00	0.00	-23.52	100.0%
99903000 75513 OPEN GYM PROGRAMS						
100.00	100.00	658.70	0.00	0.00	-558.70	658.7%
99903000 75514 FOOTBALL CAMP						
39,750.00	39,750.00	40,846.85	3,435.12	0.00	-1,096.85	102.8%
99903000 75515 SAILING CAMP						
0.00	0.00	46,046.44	14,909.56	0.00	-46,046.44	100.0%
99903000 75516 SOCCER CAMP						
3,750.00	3,750.00	0.00	0.00	0.00	3,750.00	.0%
99903000 75517 YOUTH-TENNIS						
22,500.00	22,500.00	9,493.32	1,331.60	0.00	13,006.68	42.2%
99903000 75520 VOLLEYBALL-GIRLS CAMP						
13,125.00	13,125.00	7,872.60	7,623.75	0.00	5,252.40	60.0%
99903000 75530 YOUTH WRESTLING						
0.00	0.00	375.00	0.00	0.00	-375.00	100.0%

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99903000 75532	CHEERLEADING CAMP					
7,500.00	7,500.00	9,206.25	6,393.75	0.00	-1,706.25	122.8%
99903000 75535	YOUTH SOCCER					
45,000.00	45,000.00	110,091.48	1,855.26	0.00	-65,091.48	244.6%
99903000 75536	SURF CAMP					
0.00	0.00	150.00	0.00	0.00	-150.00	100.0%
99903000 75538	E-SPORTS					
0.00	0.00	616.11	0.00	0.00	-616.11	100.0%
99903000 75539	FAST TRACKERS					
0.00	0.00	1,380.97	1,380.97	0.00	-1,380.97	100.0%
99903000 75540	YOUTH FITNESS					
7,500.00	7,500.00	0.00	0.00	0.00	7,500.00	.0%
99903000 75541	FITNESS PROG MEMBERSHIPS					
7,500.00	7,500.00	8,835.56	240.00	0.00	-1,335.56	117.8%
99903000 75542	FITNESS PROG CLASSES					
36,000.00	36,000.00	76,385.31	8,953.92	0.00	-40,385.31	212.2%
99903000 75543	OUTDOOR RECREATION EQUIPMENT					
93,750.00	93,750.00	0.00	0.00	0.00	93,750.00	.0%
99903000 75603	FENCING					
0.00	0.00	11,371.50	661.50	0.00	-11,371.50	100.0%
99903000 75610	KARATE-SHOTOKAN					
30,000.00	30,000.00	18,137.50	806.25	0.00	11,862.50	60.5%
99903000 75611	DANCE					
0.00	0.00	532.50	0.00	0.00	-532.50	100.0%
99903000 75614	LACROSSE					
0.00	0.00	129.38	0.00	0.00	-129.38	100.0%
99903000 75617	GATOR FOOTBALL					
0.00	0.00	6,299.05	2,850.16	0.00	-6,299.05	100.0%
99903000 75619	PICKLEBALL EXPENSE					
63,750.00	63,750.00	53,058.26	4,941.82	0.00	10,691.74	83.2%
TOTAL REC CENTER ATHLETIC PROGRAM						
410,575.00	410,575.00	480,269.49	72,538.67	0.00	-69,694.49	117.0%

99905 REC CENTER YOUTH/TEEN PROGRAMS

99905 64901	AFTER-SCHOOL CLUB					
-235,000.00	-235,000.00	-281,262.11	-2,269.50	0.00	46,262.11	119.7%
99905 64904	DISCOVERY CLUB					
-70,000.00	-70,000.00	-124,317.50	-2,374.50	0.00	54,317.50	177.6%
99905 64910	SUMMER DAY CAMP					
-265,000.00	-265,000.00	-272,073.32	-85,079.75	0.00	7,073.32	102.7%

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99905 64915	CRF TEEN CAMP	0.00	-333.16	0.00	0.00	333.16	100.0%
99905 64921	CHALLENGE CAMP	-62,000.00	-121,679.29	-17,650.00	0.00	59,679.29	196.3%
99905 64935	CHILDREN & TEEN ACTIVITIES	-9,500.00	-68,953.55	-881.70	0.00	59,453.55	725.8%
99905 64937	THERAPEUTIC RECREATION	0.00	-1,005.00	-240.00	0.00	1,005.00	100.0%
TOTAL REC CENTER YOUTH/TEEN PROGR		-641,500.00	-869,623.93	-108,495.45	0.00	228,123.93	135.6%
99905000 REC CENTER YOUTH/TEEN PROGRAMS							
99905000 75901	AFTER-SCHOOL CLUB	21,000.00	43,365.23	444.78	0.00	-22,365.23	206.5%
99905000 75904	DISCOVERY CLUB	12,500.00	13,904.47	1,255.00	0.00	-1,404.47	111.2%
99905000 75910	SUMMER DAY CAMP	35,000.00	46,010.41	11,753.31	0.00	-11,010.41	131.5%
99905000 75921	CHALLENGE CAMP	9,190.00	509.98	0.00	0.00	8,680.02	5.5%
99905000 75935	CHILDREN & TEEN ACTIVITIES	5,000.00	0.00	0.00	0.00	5,000.00	.0%
99905000 75936	THERAPEUTIC EQUIPMENT	0.00	232.02	232.02	0.00	-232.02	100.0%
TOTAL REC CENTER YOUTH/TEEN PROGR		82,690.00	104,022.11	13,685.11	0.00	-21,332.11	125.8%
99906 REC CENTERTOWN OF HHI INCOME							
99906 64000	CIP-TOWN OF HILTON HEAD	-520,000.00	-555,119.97	-42,906.87	0.00	35,119.97	106.8%
99906 64015	TOWN OF HILTON HEAD-MONTHLY	-990,033.00	-990,033.00	-82,502.75	0.00	0.00	100.0%
99906 64016	ACCOMODATION TAX-TOWN OF HH	0.00	-67,315.12	0.00	0.00	67,315.12	100.0%
99906 64018	GEN FUND REIM-SENIOR PROGRAMS	-148,512.00	-148,512.00	-12,376.00	0.00	0.00	100.0%

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99906 64936 THERAPEUTIC LEADER						
-28,821.00	-28,821.00	-28,821.00	-2,401.75	0.00	0.00	100.0%
TOTAL REC CENTERTOWN OF HHI INCOM						
-1,687,366.00	-1,687,366.00	-1,789,801.09	-140,187.37	0.00	102,435.09	106.1%
99907 REC CENTER OTHER INCOME						
99907 64101 REALIZED GAIN						
0.00	0.00	-48,783.70	-4,607.54	0.00	48,783.70	100.0%
99907 64102 FRIENDS DRIVE						
-37,000.00	-37,000.00	-52,272.89	-2,502.91	0.00	15,272.89	141.3%
99907 64104 DONATED SERVICES						
-5,000.00	-5,000.00	0.00	0.00	0.00	-5,000.00	.0%
99907 64105 UNREALIZED GAINS(LOSS)						
0.00	0.00	-14,356.22	-11,069.50	0.00	14,356.22	100.0%
99907 64107 MISC INCOME						
-15,000.00	-15,000.00	-8,675.42	-174.50	0.00	-6,324.58	57.8%
99907 64108 REC CTR RENTALS						
-5,000.00	-5,000.00	-5,465.00	-75.00	0.00	465.00	109.3%
99907 64109 INTEREST						
-21,000.00	-32,000.00	-31,301.04	-1,937.74	0.00	-698.96	97.8%
99907 64110 HERITAGE CONCESSIONS						
-32,000.00	-32,000.00	-38,941.35	0.00	0.00	6,941.35	121.7%
99907 64114 RENTAL-SHELTER COVE						
-27,500.00	-27,500.00	-41,292.50	205.00	0.00	13,792.50	150.2%
99907 64117 MISCELLANEOUS-SENIOR PROGRAMS						
-500.00	-500.00	-1,317.00	0.00	0.00	817.00	263.4%
99907 64118 BEAUFORT COUNTY-SENIOR PROG.						
0.00	0.00	-20,000.00	0.00	0.00	20,000.00	100.0%
99907 64120 DONATIONS EQUIPMENT						
0.00	0.00	-60,000.00	0.00	0.00	60,000.00	100.0%
99907 64121 BEAUFORT COUNTY POOL						
-150,000.00	-200,000.00	-200,000.00	0.00	0.00	0.00	100.0%
99907 64122 VENDING MACHINES						
-30,000.00	-30,000.00	-43,644.02	-2,986.52	0.00	13,644.02	145.5%
99907 64300 SPECIAL EVENTS						
-450,439.00	-450,439.00	-660,301.85	-13,488.04	0.00	209,862.85	146.6%
99907 64309 CREDIT CARD SERVICE FEE						
0.00	-29,500.00	-31,157.71	-3,339.59	0.00	1,657.71	105.6%
99907 64314 COMMUNITY YOUTH EVENTS						
-15,000.00	-15,000.00	-10,014.50	0.00	0.00	-4,985.50	66.8%

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99907 64316 CREDIT CARD SERVICE FEE						
-25,000.00	0.00	0.00	0.00	0.00	0.00	.0%
TOTAL REC CENTER OTHER INCOME						
-813,439.00	-878,939.00	-1,267,523.20	-39,976.34	0.00	388,584.20	144.2%
99907000 REC CENTER OTHER EXPENSES						
99907000 75102 FRIENDS DRIVE						
4,500.00	4,500.00	3,197.16	0.00	0.00	1,302.84	71.0%
99907000 75104 DONATED SERVICES						
0.00	0.00	61.80	0.00	0.00	-61.80	100.0%
99907000 75107 MISC INCOME						
3,500.00	3,500.00	0.00	0.00	0.00	3,500.00	.0%
99907000 75110 HERITAGE BOOTH						
2,500.00	2,500.00	3,715.06	0.00	0.00	-1,215.06	148.6%
99907000 75122 VENDING MACHINES						
15,000.00	15,000.00	21,005.77	2,293.86	0.00	-6,005.77	140.0%
99907000 75300 SPECIAL EVENTS						
290,000.00	290,000.00	542,643.09	18,520.41	0.00	-252,643.09	187.1%
99907000 75313 PARK RENTAL AGREEMENT W/ CNTY						
3,600.00	3,600.00	0.00	0.00	0.00	3,600.00	.0%
99907000 75314 COMMUNITY YOUTH EVENTS						
12,919.00	12,919.00	2,376.11	0.00	0.00	10,542.89	18.4%
TOTAL REC CENTER OTHER EXPENSES						
332,019.00	332,019.00	572,998.99	20,814.27	0.00	-240,979.99	172.6%
99908000 REC CENTER PAYROLL EXPENSE						
99908000 76010 EXECUTIVE DIRECTOR						
110,000.00	110,000.00	113,118.13	9,288.47	0.00	-3,118.13	102.8%
99908000 76011 EXEC DIRECTOR TENURE PAY						
0.00	0.00	11,315.80	928.85	0.00	-11,315.80	100.0%
99908000 76020 RECREATION DIRECTOR						
63,000.00	63,000.00	57,063.70	4,609.90	0.00	5,936.30	90.6%
99908000 76021 OUTDOOR PROGRAM SPECIALIST						
50,000.00	50,000.00	66,296.78	8,234.79	0.00	-16,296.78	132.6%
99908000 76022 OUTDOOR PROGRAM ASSISTANT						
38,500.00	38,500.00	44,628.81	6,744.23	0.00	-6,128.81	115.9%

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99908000 76029	DIRECTOR OF OPERATIONS					
75,000.00	75,000.00	75,288.58	6,057.70	0.00	-288.58	100.4%
99908000 76031	AFTER SCHOOL PROGRAM					
93,266.00	93,266.00	134,759.02	233.75	0.00	-41,493.02	144.5%
99908000 76032	DISCOVERY CLUB					
57,000.00	57,000.00	66,240.60	7,054.39	0.00	-9,240.60	116.2%
99908000 76033	SUMMER CAMP					
100,000.00	100,000.00	149,550.56	79,908.19	0.00	-49,550.56	149.6%
99908000 76034	CHALLENGE PROGRAM-SUMMER					
27,000.00	27,000.00	49,518.51	16,741.88	0.00	-22,518.51	183.4%
99908000 76035	S.E./SENIOR CITIZEN COORDINATR					
49,000.00	49,000.00	45,986.53	3,755.77	0.00	3,013.47	93.9%
99908000 76037	SENIOR CITIZENS ADMIN.					
12,500.00	12,500.00	15,164.62	1,678.24	0.00	-2,664.62	121.3%
99908000 76038	THERAPEUTIC RECREATION LEADER					
49,000.00	49,000.00	6,482.72	0.00	0.00	42,517.28	13.2%
99908000 76039	FITNESS COORDINATOR					
50,000.00	50,000.00	51,163.50	4,240.38	0.00	-1,163.50	102.3%
99908000 76040	ATHLETICS COORDINATOR					
58,500.00	58,500.00	61,847.60	4,976.24	0.00	-3,347.60	105.7%
99908000 76041	ATHLETICS PROGRAMS					
50,000.00	50,000.00	28,738.43	2,019.23	0.00	21,261.57	57.5%
99908000 76042	YOUTH/TEEN DIRECTOR					
49,000.00	49,000.00	48,055.77	3,998.09	0.00	944.23	98.1%
99908000 76043	ASSISTANT YOUTH/TEEN DIRECTOR					
40,000.00	40,000.00	15,313.42	3,311.53	0.00	24,686.58	38.3%
99908000 76044	PICKELBALL COORDINATOR					
25,000.00	25,000.00	0.00	0.00	0.00	25,000.00	.0%
99908000 76045	BUSINESS MANAGER					
50,000.00	50,000.00	52,221.15	4,240.38	0.00	-2,221.15	104.4%
99908000 76047	PROGRAM SUPERVISORS					
50,000.00	50,000.00	20,457.14	2,171.43	0.00	29,542.86	40.9%
99908000 76048	BUILDING SUPERVISOR					
60,000.00	60,000.00	85,329.89	8,352.48	0.00	-25,329.89	142.2%
99908000 76049	SPECIAL EVENTS STAFFING					
52,000.00	52,000.00	53,346.35	4,178.91	0.00	-1,346.35	102.6%
99908000 76050	SPECIAL EVENTS/FUND					
49,000.00	49,000.00	44,683.99	3,660.87	0.00	4,316.01	91.2%
99908000 76052	FRONT DESK					
120,000.00	120,000.00	124,201.13	11,941.36	0.00	-4,201.13	103.5%
99908000 76069	ACQUATICS DIRECTOR ASSISTANT					
45,000.00	47,500.00	38,285.24	3,528.00	0.00	9,214.76	80.6%
99908000 76070	AQUATICS/SPEC PROJ COORDINATOR					
53,000.00	55,000.00	46,754.30	3,836.53	0.00	8,245.70	85.0%

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99908000 76072	SEASONAL POOL STAFF					
125,000.00	145,000.00	223,150.27	33,755.71	0.00	-78,150.27	153.9%
99908000 76073	MAINTENANCE WORKER					
65,000.00	65,000.00	70,164.77	6,615.45	0.00	-5,164.77	107.9%
99908000 76074	MARKETING/DEVELOPMENT					
47,500.00	47,500.00	45,173.10	3,634.62	0.00	2,326.90	95.1%
TOTAL REC CENTER PAYROLL EXPENSE						
1,713,266.00	1,737,766.00	1,844,300.41	249,697.37	0.00	-106,534.41	106.1%
99909000 REC CENTER PAYROLL TAXES & INS						
99909000 76075	PAYROLL TAXES					
106,775.00	109,275.00	138,510.95	18,940.46	0.00	-29,235.95	126.8%
99909000 76078	WORKMANS COMPENSATION					
15,000.00	15,000.00	17,781.50	0.00	0.00	-2,781.50	118.5%
99909000 76079	UNEMPLOYMENT TAXES					
3,420.00	3,420.00	0.00	0.00	0.00	3,420.00	.0%
99909000 76080	HEALTH INSURANCE					
100,000.00	100,000.00	115,385.18	13,992.03	0.00	-15,385.18	115.4%
99909000 76081	PAYROLL TAXES-SENIOR PROGRAMS					
0.00	0.00	4,567.43	405.25	0.00	-4,567.43	100.0%
99909000 76084	HEALTH INSURANCE-SENIOR PROG					
0.00	0.00	6,475.02	563.09	0.00	-6,475.02	100.0%
99909000 76086	LONG TERM DISABILITY INSURANCE					
7,500.00	7,500.00	6,284.91	606.60	0.00	1,215.09	83.8%
99909000 76087	DEFERRED INCOME					
11,000.00	11,000.00	0.00	0.00	0.00	11,000.00	.0%
99909000 76088	EMPLOYEE 401K CONTRIBUTIONS					
30,000.00	30,000.00	37,349.46	3,296.60	0.00	-7,349.46	124.5%
99909000 76090	401K ADMINISTRATIVE FEES					
0.00	0.00	2,112.50	0.00	0.00	-2,112.50	100.0%
TOTAL REC CENTER PAYROLL TAXES &						
273,695.00	276,195.00	328,466.95	37,804.03	0.00	-52,271.95	118.9%
99910000 REC CENTER GEN ADM EXPENSE						
99910000 77010	AUDIT/BANK FEES					
65,000.00	65,000.00	86,178.17	6,757.97	0.00	-21,178.17	132.6%

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2025 12

ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
99910000 77011	LEGAL FEES					
1,000.00	1,000.00	0.00	0.00	0.00	1,000.00	.0%
99910000 77012	ADVERTISING					
25,000.00	25,000.00	34,405.78	1,402.20	0.00	-9,405.78	137.6%
99910000 77014	VEHICLES					
25,500.00	25,500.00	21,120.89	1,786.51	0.00	4,379.11	82.8%
99910000 77015	COMPUTER LEASE					
30,000.00	32,700.00	43,865.46	3,881.86	0.00	-11,165.46	134.1%
99910000 77020	DUES & SUBSCRIPTIONS					
10,000.00	10,000.00	6,866.62	190.51	0.00	3,133.38	68.7%
99910000 77022	PROPANE					
42,000.00	47,500.00	58,489.06	0.00	0.00	-10,989.06	123.1%
99910000 77023	ELECTRICITY-REC CTR					
90,000.00	90,000.00	100,850.17	10,281.00	0.00	-10,850.17	112.1%
99910000 77024	ELECTRICITY-FIELD					
0.00	0.00	2,623.00	218.00	0.00	-2,623.00	100.0%
99910000 77025	ELECTRICITY-SHELTER COVE					
1,200.00	1,200.00	1,668.00	162.00	0.00	-468.00	139.0%
99910000 77026	GENERAL LIABILITY					
95,000.00	100,000.00	120,389.59	7,163.33	0.00	-20,389.59	120.4%
99910000 77028	FIRE ALARM SERVICE					
15,000.00	15,000.00	9,674.47	1,705.98	0.00	5,325.53	64.5%
99910000 77029	ELECTRIC-SHARE 58 SHELTER COVE					
3,500.00	3,500.00	2,435.00	33.00	0.00	1,065.00	69.6%
99910000 77034	TRASH REMOVAL					
5,700.00	5,700.00	11,968.42	878.87	0.00	-6,268.42	210.0%
99910000 77035	CLEANING-58 SHELTER COVE					
7,800.00	7,800.00	7,800.00	1,300.00	0.00	0.00	100.0%
99910000 77050	EDUCATIONAL TRAINING					
25,000.00	25,000.00	37,206.58	1,912.10	0.00	-12,206.58	148.8%
99910000 77055	PRINTING-GENERAL					
5,000.00	5,000.00	5,217.75	648.86	0.00	-217.75	104.4%
99910000 77056	PRINTING-NEWSLETTERS					
5,000.00	5,000.00	0.00	0.00	0.00	5,000.00	.0%
99910000 77060	POSTAGE & FREIGHT					
4,000.00	4,000.00	1,687.13	36.50	0.00	2,312.87	42.2%
99910000 77065	REPAIRS-BUILDING					
20,000.00	20,000.00	20,431.14	557.50	0.00	-431.14	102.2%
99910000 77066	REPAIRS-SWIM POOL					
25,000.00	32,500.00	11,807.40	1,552.53	0.00	20,692.60	36.3%
99910000 77067	BASKETBALL GOAL MAINTENANCE					
7,500.00	7,500.00	0.00	0.00	0.00	7,500.00	.0%
99910000 77068	PEST CONTROL					
3,500.00	5,000.00	4,350.00	535.00	0.00	650.00	87.0%

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2025 12

ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
99910000 77069	CAMERA MONITORING					
0.00	4,500.00	0.00	0.00	0.00	4,500.00	.0%
99910000 77075	LEASES-OFFICE EQUIPMENT					
9,500.00	9,500.00	65.31	0.00	0.00	9,434.69	.7%
99910000 77080	CORDILLO BUILDING					
0.00	0.00	16,414.01	0.00	0.00	-16,414.01	100.0%
99910000 77082	PROPERTY TAXES					
0.00	0.00	667.66	0.00	0.00	-667.66	100.0%
99910000 77085	SUPPLIES-OFFICE					
14,000.00	14,000.00	9,137.29	448.75	0.00	4,862.71	65.3%
99910000 77086	SUPPLIES-SWIM POOL					
33,000.00	43,000.00	48,564.01	9,169.07	0.00	-5,564.01	112.9%
99910000 77087	SUPPLIES-GENERAL PURPOSE					
16,000.00	16,000.00	11,518.76	1,815.32	0.00	4,481.24	72.0%
99910000 77088	SUPPLIES-JANITORIAL					
35,000.00	35,000.00	28,326.26	3,070.84	0.00	6,673.74	80.9%
99910000 77090	TELEPHONE					
34,700.00	34,700.00	39,133.32	641.43	0.00	-4,433.32	112.8%
99910000 77094	WATER & SEWER-58 SHELTER COVE					
700.00	700.00	808.97	139.10	0.00	-108.97	115.6%
99910000 77095	WATER & SEWER					
12,000.00	12,000.00	8,584.00	1,713.00	0.00	3,416.00	71.5%
99910000 77096	SUPPLIES GEN PURPOSE-SENIOR PR					
1,500.00	1,500.00	25.49	0.00	0.00	1,474.51	1.7%
99910000 77097	SUPPLIES-OFFICE-SENIOR PROGRAM					
1,750.00	1,750.00	591.17	0.00	0.00	1,158.83	33.8%
99910000 77098	TELEPHONE-SENIOR PROGRAMS					
2,500.00	2,500.00	2,098.91	338.48	0.00	401.09	84.0%
99910000 77099	VEHICLES-SENIOR PROGRAMS					
0.00	0.00	107.63	0.00	0.00	-107.63	100.0%
99910000 78010	HEATING & AC					
23,000.00	23,000.00	46,439.34	0.00	0.00	-23,439.34	201.9%
99910000 78011	GROUNDS MAINTENANCE					
33,700.00	38,500.00	55,143.90	3,894.82	0.00	-16,643.90	143.2%
99910000 78012	GYM FLOOR					
6,500.00	6,500.00	7,900.00	0.00	0.00	-1,400.00	121.5%
99910000 78017	GROUNDS MAINTENANCE-SHELT.COVE					
500.00	500.00	0.00	0.00	0.00	500.00	.0%
99910000 78020	RECREATION CENTER CLEANING					
102,000.00	102,000.00	108,586.36	17,000.00	0.00	-6,586.36	106.5%
99910000 78021	ADVERTISING-SENIOR PROGRAMS					
500.00	500.00	45.28	0.00	0.00	454.72	9.1%
99910000 78022	COMPUTER LEASES/SERV-SENIOR PR					
500.00	500.00	120.41	0.00	0.00	379.59	24.1%

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2025 12

ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
99910000 78024	POSTAGE-SENIOR PROGRAMS					
250.00	250.00	695.57	0.00	0.00	-445.57	278.2%
99910000 78025	PRINTING GEN-SENIOR PROGRAMS					
750.00	750.00	545.70	0.00	0.00	204.30	72.8%
99910000 78029	COPIER LEASE MAINT-SENIOR					
1,200.00	1,200.00	830.25	75.00	0.00	369.75	69.2%
99910000 78034	TURF PLAY AREA MAINTENANCE					
0.00	4,500.00	0.00	0.00	0.00	4,500.00	.0%
99910000 78060	ELEVATOR MAINTENANCE					
4,500.00	4,500.00	1,656.00	0.00	0.00	2,844.00	36.8%
99910000 78200	SHARE CENTER UPFITTING					
0.00	0.00	10,418.28	0.00	0.00	-10,418.28	100.0%
TOTAL REC CENTER GEN ADM EXPENSE						
845,750.00	891,750.00	987,458.51	79,309.53	0.00	-95,708.51	110.7%
99911000 REC CENTER CAPITAL IMPROVEMENT						
99911000 70000	PARKS					
45,000.00	45,000.00	76,662.60	24,445.73	0.00	-31,662.60	170.4%
99911000 70300	ISLAND RECREATION FACILITY					
365,000.00	365,000.00	203,922.51	0.00	0.00	161,077.49	55.9%
99911000 70600	REC CENTER POOL					
95,000.00	95,000.00	157,379.10	0.00	0.00	-62,379.10	165.7%
99911000 71048	OTDR BASKETBALL BACKBOARD REPL					
15,000.00	15,000.00	0.00	0.00	0.00	15,000.00	.0%
99911000 71063	PROGRAM UTILITY VECHICLE					
0.00	0.00	32,245.00	0.00	0.00	-32,245.00	100.0%
TOTAL REC CENTER CAPITAL IMPROVEM						
520,000.00	520,000.00	470,209.21	24,445.73	0.00	49,790.79	90.4%
TOTAL HHI RECREATION ASSOCIATION						
0.00	0.00	-339,186.30	155,548.36	0.00	339,186.30	100.0%
TOTAL REVENUES						
-4,212,995.00	-4,288,495.00	-5,213,198.11	-350,120.99	0.00	924,703.11	
TOTAL EXPENSES						
4,212,995.00	4,288,495.00	4,874,011.81	505,669.35	0.00	-585,516.81	
GRAND TOTAL						
0.00	0.00	-339,186.30	155,548.36	0.00	339,186.30	100.0%

** END OF REPORT - Generated by Ben Netzingner **

HILTON HEAD ISLAND RECREATION ASSOCIATION, INC
BALANCE SHEET
June 30, 2025

ASSETS

Operating Cash

South State Bank-Operating		547,102.57
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Petty Cash

Cash on Hand	375.00	
South State Bank-Petty Cash Checking	16,440.57	

Sub-Total Petty Cash		16,815.57
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Money Market

South State Bank-Money Market	1,001,885.70	
TD Bank-Money Market Plus	2,717.08	

	1,004,602.78
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Certificate of Deposits & Investments

Community Foundation of the Lowcountry	120,508.84	
Morgan Stanley-Reserve Account	576,908.35	
Morgan Stanley-Scholarship Endowment Fund	198,004.13	
South State Bank-CD's	450,000.00	

Sub-Total CD's & Investments		1,345,421.32
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Other Current Assets

Accounts Receivable	-28.48	
Prepaid Expenses	20,660.05	

Sub-Total Other Current Assets		20,631.57
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Property & Equipment

Machinery & Equipment	362,742.73	
Land	15,000.00	
Building	102,415.00	
Leasehold Improvements	1,788,642.95	
Automobiles	413,458.53	
Improvements Other Than Building	6,724.00	

Sub-Total Property & Equipment	2,688,983.21	
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Accumulated Depreciation	(1,004,506.82)	
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Total Property & Equipment, Net		1,684,476.39
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TOTAL ASSETS

4,619,050.20

LIABILITIES & EQUITY

Liabilities

Accounts Payable	35,907.76	
Deferred Revenue	292,736.63	
Smith Barney Plan	4,431.85	
Accrued Salaries	64,786.43	
Payroll Taxes Payable	0.54	
Due to Other Gov	391.05	

Total Liabilities		398,254.26
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Equity

Fund Balance	3,881,609.64	
Operating Income (Loss)	339,186.30	

Total Equity		4,220,795.94
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TOTAL LIABILITIES & EQUITY

4,619,050.20

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2024 12

ORIGINAL APPROP		REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
999 HHI RECREATION ASSOCIATION							
99901 REC CENTER AQUATICS REVENUE							
99901 64401	AQUATICS						
-43,000.00		-43,000.00	-65,771.04	-4,935.21	0.00	22,771.04	153.0%
99901 64402	REC SWIM						
-65,000.00		-65,000.00	-103,359.96	-5,149.27	0.00	38,359.96	159.0%
99901 64403	SWIM TEAM						
-23,700.00		-23,700.00	-23,917.50	-2,742.50	0.00	217.50	100.9%
99901 64407	SWIM LESSONS						
-26,500.00		-26,500.00	-26,368.00	-145.00	0.00	-132.00	99.5%
TOTAL REC CENTER AQUATICS REVENUE							
-158,200.00		-158,200.00	-219,416.50	-12,971.98	0.00	61,216.50	138.7%
99901000 REC CENTER AQUATIC PROGRAM							
99901000 75401	AQUATICS						
14,500.00		14,500.00	16,533.50	4,005.08	0.00	-2,033.50	114.0%
99901000 75407	SWIM LESSONS						
0.00		0.00	1,007.14	0.00	0.00	-1,007.14	100.0%
TOTAL REC CENTER AQUATIC PROGRAM							
14,500.00		14,500.00	17,540.64	4,005.08	0.00	-3,040.64	121.0%
99902 REC CENTER SENIOR CITIZEN PROG							
99902 64620	SENIOR CENTER MEMBERSHIP						
-12,500.00		-12,500.00	-13,754.00	-485.00	0.00	1,254.00	110.0%
99902 64709	SENIOR TRIPS						
-3,500.00		-3,500.00	-11,080.00	-689.00	0.00	7,580.00	316.6%
99902 64710	CLASSES & SEMINARS						
-9,500.00		-9,500.00	-5,284.00	-31.00	0.00	-4,216.00	55.6%
99902 64720	EXERCISE CLASSES						
0.00		0.00	-3,228.00	-154.00	0.00	3,228.00	100.0%
99902 64725	ATHLETICS						
0.00		0.00	-8,810.00	-475.00	0.00	8,810.00	100.0%

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2024 12

ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
99902 64735 SOCIAL ACTIVITIES						
-3,350.00	-3,350.00	-7,043.00	-10.00	0.00	3,693.00	210.2%
99902 64750 SENIOR CENTER FACILITY RENTAL						
-7,840.00	-7,840.00	-5,802.00	0.00	0.00	-2,038.00	74.0%
TOTAL REC CENTER SENIOR CITIZEN P						
-36,690.00	-36,690.00	-55,001.00	-1,844.00	0.00	18,311.00	149.9%
99902000 REC CENTER SENIOR CITIZEN PROG						
99902000 74710 CLASSES & SEMINARS						
5,000.00	5,000.00	310.00	0.00	0.00	4,690.00	6.2%
99902000 74720 EXERCISE CLASSES						
0.00	0.00	14,750.90	964.80	0.00	-14,750.90	100.0%
99902000 75709 SENIOR TRIPS						
10,000.00	10,000.00	14,579.39	3,894.21	0.00	-4,579.39	145.8%
99902000 75725 ATHLETICS						
500.00	500.00	0.00	0.00	0.00	500.00	.0%
99902000 75735 SOCIAL ACTIVITIES						
1,500.00	1,500.00	4,905.89	1,311.38	0.00	-3,405.89	327.1%
TOTAL REC CENTER SENIOR CITIZEN P						
17,000.00	17,000.00	34,546.18	6,170.39	0.00	-17,546.18	203.2%
99903 REC CENTER ATHLETIC PROGRAMS						
99903 64501 ALL-SPORTS CAMP						
0.00	0.00	-10,157.00	-680.00	0.00	10,157.00	100.0%
99903 64505 BASKETBALL HUSTLER CAMP						
0.00	0.00	0.00	-200.00	0.00	0.00	.0%
99903 64506 YOUTH BASKETBALL						
-55,000.00	-55,000.00	-63,701.50	-4,600.00	0.00	8,701.50	115.8%
99903 64507 FLAG FOOTBALL						
-12,500.00	-12,500.00	-18,845.00	0.00	0.00	6,345.00	150.8%
99903 64508 ADULT BASKETBALL LEAGUES						
0.00	0.00	-6,960.00	0.00	0.00	6,960.00	100.0%
99903 64509 ADULT SOCCER LEAGUES						
-7,500.00	-7,500.00	-10,650.00	-2,400.00	0.00	3,150.00	142.0%
99903 64510 JR ACADEMY SOCCER						
0.00	0.00	-12,660.00	0.00	0.00	12,660.00	100.0%

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2024 12

ORIGINAL APPROP		REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
99903 64511	GOLF SCHOOL	0.00	-470.00	0.00	0.00	470.00	100.0%
99903 64513	OPEN GYM PROGRAMS	0.00	-8,235.00	-102.00	0.00	8,235.00	100.0%
99903 64514	FOOTBALL CAMP	-45,000.00	-42,940.00	0.00	0.00	-2,060.00	95.4%
99903 64515	OUTDOOR PROGRAMS	-75,000.00	-74,647.81	-9,226.00	0.00	-352.19	99.5%
99903 64516	SOCCER CAMP	-5,000.00	0.00	0.00	0.00	-5,000.00	.0%
99903 64517	YOUTH-TENNIS	-45,000.00	-33,025.25	-9,020.00	0.00	-11,974.75	73.4%
99903 64520	VOLLEYBALL-GIRLS CAMP	-23,000.00	-22,108.00	-2,175.00	0.00	-892.00	96.1%
99903 64532	CHEERLEADING CAMP	-10,000.00	-20,928.50	-1,725.00	0.00	10,928.50	209.3%
99903 64535	YOUTH SOCCER	-105,000.00	-125,672.00	0.00	0.00	20,672.00	119.7%
99903 64538	E-SPORTS	0.00	-1,730.00	0.00	0.00	1,730.00	100.0%
99903 64539	FAST TRACKERS	0.00	-2,720.00	35.00	0.00	2,720.00	100.0%
99903 64540	YOUTH REC CLASSES	-10,000.00	-1,761.00	0.00	0.00	-8,239.00	17.6%
99903 64541	FITNESS PROGRAM MEMBERSHIPS	-218,000.00	-211,397.65	-5,605.39	0.00	-6,602.35	97.0%
99903 64542	FITNESS PROGRAM CLASSES	-35,000.00	-55,224.79	-13,660.00	0.00	20,224.79	157.8%
99903 64603	FENCING	-12,000.00	-7,425.00	-765.00	0.00	-4,575.00	61.9%
99903 64610	KARATE-SHOTOKAN	-35,000.00	-38,673.27	-1,675.00	0.00	3,673.27	110.5%
99903 64614	LACROSSE	-5,000.00	-7,181.50	0.00	0.00	2,181.50	143.6%
99903 64617	GATOR FOOTBALL	0.00	-3,955.00	-30.00	0.00	3,955.00	100.0%
99903 64619	PICKLEBALL INCOME	-35,000.00	-128,077.34	-4,358.00	0.00	93,077.34	365.9%
TOTAL REC CENTER ATHLETIC PROGRAM		-733,000.00	-909,145.61	-56,186.39	0.00	176,145.61	124.0%
99903000 REC CENTER ATHLETIC PROGRAMS							
99903000 75501	ALL-SPORTS CAMP	0.00	1,017.41	579.61	0.00	-1,017.41	100.0%

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2024 12

ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
99903000 75502	LACROSSE					
3,750.00	3,750.00	0.00	0.00	0.00	3,750.00	.0%
99903000 75503	BASKETBALL-YOUTH					
26,000.00	26,000.00	0.00	0.00	0.00	26,000.00	.0%
99903000 75505	BASKETBALL HUSTLER CAMP					
1,100.00	1,100.00	0.00	0.00	0.00	1,100.00	.0%
99903000 75506	YOUTH BASKETBALL					
0.00	0.00	50,543.98	13,457.23	0.00	-50,543.98	100.0%
99903000 75507	FLAG FOOTBALL					
6,500.00	6,500.00	16,329.22	0.00	0.00	-9,829.22	251.2%
99903000 75508	ADULT BASKETBALL LEAGUES					
0.00	0.00	3,351.61	1,649.40	0.00	-3,351.61	100.0%
99903000 75509	ADULT SOCCER LEAGUES					
1,000.00	1,000.00	1,966.81	782.70	0.00	-966.81	196.7%
99903000 75510	JR ACADEMY SOCCER					
0.00	0.00	6,930.00	0.00	0.00	-6,930.00	100.0%
99903000 75511	GOLF SCHOOL					
2,000.00	2,000.00	0.00	0.00	0.00	2,000.00	.0%
99903000 75513	OPEN GYM PROGRAMS					
100.00	100.00	1,741.78	95.98	0.00	-1,641.78	1741.8%
99903000 75514	FOOTBALL CAMP					
39,750.00	39,750.00	41,725.00	0.00	0.00	-1,975.00	105.0%
99903000 75515	SAILING CAMP					
0.00	0.00	33,485.64	-7,735.60	0.00	-33,485.64	100.0%
99903000 75516	SOCCER CAMP					
3,750.00	3,750.00	0.00	0.00	0.00	3,750.00	.0%
99903000 75517	YOUTH-TENNIS					
33,750.00	33,750.00	18,222.67	2,835.04	0.00	15,527.33	54.0%
99903000 75519	VOLLEYBALL LEAGUES					
0.00	0.00	101.65	0.00	0.00	-101.65	100.0%
99903000 75520	VOLLEYBALL-GIRLS CAMP					
17,500.00	17,500.00	13,637.99	9,000.00	0.00	3,862.01	77.9%
99903000 75532	CHEERLEADING CAMP					
7,500.00	7,500.00	16,819.25	5,812.50	0.00	-9,319.25	224.3%
99903000 75535	YOUTH SOCCER					
45,000.00	45,000.00	84,842.17	1,944.00	0.00	-39,842.17	188.5%
99903000 75536	SURF CAMP					
0.00	0.00	4,040.00	192.00	0.00	-4,040.00	100.0%
99903000 75538	E-SPORTS					
0.00	0.00	912.01	0.00	0.00	-912.01	100.0%
99903000 75539	FAST TRACKERS					
0.00	0.00	1,166.67	716.67	0.00	-1,166.67	100.0%
99903000 75540	YOUTH FITNESS					
7,500.00	7,500.00	0.00	0.00	0.00	7,500.00	.0%

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99903000 75541	FITNESS PROG MEMBERSHIPS					
7,500.00	7,500.00	5,772.56	1,008.58	0.00	1,727.44	77.0%
99903000 75542	FITNESS PROG CLASSES					
36,000.00	36,000.00	57,708.28	-4,311.97	0.00	-21,708.28	160.3%
99903000 75543	OUTDOOR RECREATION EQUIPMENT					
40,000.00	40,000.00	80.00	0.00	0.00	39,920.00	.2%
99903000 75603	FENCING					
0.00	0.00	10,526.25	607.50	0.00	-10,526.25	100.0%
99903000 75610	KARATE-SHOTOKAN					
26,250.00	26,250.00	28,905.00	2,193.75	0.00	-2,655.00	110.1%
99903000 75614	LACROSSE					
0.00	0.00	2,026.11	0.00	0.00	-2,026.11	100.0%
99903000 75615	BASEBALL CAMP					
0.00	0.00	900.00	900.00	0.00	-900.00	100.0%
99903000 75617	GATOR FOOTBALL					
0.00	0.00	1,647.68	0.00	0.00	-1,647.68	100.0%
99903000 75619	PICKLEBALL EXPENSE					
11,000.00	11,000.00	63,730.30	15,117.79	0.00	-52,730.30	579.4%
TOTAL REC CENTER ATHLETIC PROGRAM						
315,950.00	315,950.00	468,130.04	44,845.18	0.00	-152,180.04	148.2%
99905 REC CENTER YOUTH/TEEN PROGRAMS						
99905 64901	AFTER-SCHOOL CLUB					
-225,000.00	-225,000.00	-269,569.54	-7,175.25	0.00	44,569.54	119.8%
99905 64904	DISCOVERY CLUB					
-70,000.00	-70,000.00	-44,498.00	-3,470.00	0.00	-25,502.00	63.6%
99905 64910	SUMMER DAY CAMP					
-265,000.00	-265,000.00	-272,944.76	-80,609.13	0.00	7,944.76	103.0%
99905 64921	CHALLENGE CAMP					
-62,000.00	-62,000.00	-86,827.37	-13,125.00	0.00	24,827.37	140.0%
99905 64935	CHILDREN & TEEN ACTIVITIES					
-9,500.00	-9,500.00	-10,350.00	-1,175.00	0.00	850.00	108.9%
99905 64937	THERAPEUTIC RECREATION					
0.00	0.00	-3,710.00	-180.00	0.00	3,710.00	100.0%
TOTAL REC CENTER YOUTH/TEEN PROGR						
-631,500.00	-631,500.00	-687,899.67	-105,734.38	0.00	56,399.67	108.9%
99905000 REC CENTER YOUTH/TEEN PROGRAMS						
99905000 75901	AFTER-SCHOOL CLUB					
21,000.00	21,000.00	25,940.11	1,858.84	0.00	-4,940.11	123.5%

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99905000 75904	DISCOVERY CLUB					
12,500.00	12,500.00	11,183.31	2,579.55	0.00	1,316.69	89.5%
99905000 75910	SUMMER DAY CAMP					
35,000.00	35,000.00	63,458.12	31,010.19	0.00	-28,458.12	181.3%
99905000 75921	CHALLENGE CAMP					
10,000.00	10,000.00	629.73	15.53	0.00	9,370.27	6.3%
99905000 75935	CHILDREN & TEEN ACTIVITIES					
5,000.00	5,000.00	498.78	0.00	0.00	4,501.22	10.0%
99905000 75936	THERAPEUTIC EQUIPMENT					
0.00	0.00	453.63	0.00	0.00	-453.63	100.0%
TOTAL REC CENTER YOUTH/TEEN PROGR						
83,500.00	83,500.00	102,163.68	35,464.11	0.00	-18,663.68	122.4%
99906 REC CENTERTOWN OF HHI INCOME						
99906 64000	CIP-TOWN OF HILTON HEAD					
-509,500.00	-509,500.00	-454,351.21	-46,252.74	0.00	-55,148.79	89.2%
99906 64015	TOWN OF HILTON HEAD-MONTHLY					
-952,831.00	-952,831.00	-952,831.07	-79,402.58	0.00	0.07	100.0%
99906 64016	ACCOMODATION TAX-TOWN OF HH					
-60,000.00	-60,000.00	-56,801.55	0.00	0.00	-3,198.45	94.7%
99906 64018	GEN FUND REIM-SENIOR PROGRAMS					
-142,953.00	-142,953.00	-142,953.00	-11,912.75	0.00	0.00	100.0%
99906 64936	THERAPEUTIC LEADER					
-27,982.00	-27,982.00	-27,981.93	-2,332.24	0.00	-0.07	100.0%
TOTAL REC CENTERTOWN OF HHI INCOM						
-1,693,266.00	-1,693,266.00	-1,634,918.76	-139,900.31	0.00	-58,347.24	96.6%
99907 REC CENTER OTHER INCOME						
99907 64101	REALIZED GAIN					
0.00	0.00	-46,095.89	-6,798.41	0.00	46,095.89	100.0%
99907 64102	FRIENDS DRIVE					
-32,000.00	-32,000.00	-81,668.73	-1,279.50	0.00	49,668.73	255.2%
99907 64104	DONATED SERVICES					
-5,000.00	-5,000.00	0.00	0.00	0.00	-5,000.00	.0%
99907 64105	UNREALIZED GAINS(LOSS)					
0.00	0.00	-16,097.04	172.85	0.00	16,097.04	100.0%

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99907 64107 MISC INCOME						
-15,000.00	-15,000.00	-41,286.45	-112.76	0.00	26,286.45	275.2%
99907 64108 REC CTR RENTALS						
-5,000.00	-5,000.00	-5,970.00	-550.00	0.00	970.00	119.4%
99907 64109 INTEREST						
-4,000.00	-4,000.00	-41,552.39	-2,710.11	0.00	37,552.39	1038.8%
99907 64110 HERITAGE CONCESSIONS						
-27,500.00	-27,500.00	-35,502.83	-32,172.83	0.00	8,002.83	129.1%
99907 64114 RENTAL-SHELTER COVE						
-25,000.00	-25,000.00	-38,920.00	-2,110.00	0.00	13,920.00	155.7%
99907 64117 MISCELLANEOUS-SENIOR PROGRAMS						
-500.00	-500.00	-1,240.00	-30.00	0.00	740.00	248.0%
99907 64120 DONATIONS EQUIPMENT						
0.00	0.00	-40,000.00	-40,000.00	0.00	40,000.00	100.0%
99907 64121 BEAUFORT COUNTY POOL						
-135,000.00	-135,000.00	-150,000.00	0.00	0.00	15,000.00	111.1%
99907 64122 VENDING MACHINES						
-17,500.00	-17,500.00	-37,850.02	-2,704.52	0.00	20,350.02	216.3%
99907 64300 SPECIAL EVENTS						
-430,000.00	-430,000.00	-575,719.88	-14,496.10	0.00	145,719.88	133.9%
99907 64314 COMMUNITY YOUTH EVENTS						
-15,000.00	-15,000.00	-12,905.15	-1,025.00	0.00	-2,094.85	86.0%
TOTAL REC CENTER OTHER INCOME						
-711,500.00	-711,500.00	-1,124,808.38	-103,816.38	0.00	413,308.38	158.1%
99907000 REC CENTER OTHER EXPENSES						
99907000 75102 FRIENDS DRIVE						
4,500.00	4,500.00	4,667.35	0.00	0.00	-167.35	103.7%
99907000 75107 MISC INCOME						
3,500.00	3,500.00	50.00	0.00	0.00	3,450.00	1.4%
99907000 75110 HERITAGE BOOTH						
2,500.00	2,500.00	4,052.00	0.00	0.00	-1,552.00	162.1%
99907000 75122 VENDING MACHINES						
10,000.00	10,000.00	20,966.07	1,649.09	0.00	-10,966.07	209.7%
99907000 75300 SPECIAL EVENTS						
350,000.00	350,000.00	540,201.41	16,669.34	0.00	-190,201.41	154.3%
99907000 75313 PARK RENTAL AGREEMENT W/ CNTY						
3,600.00	3,600.00	0.00	0.00	0.00	3,600.00	.0%
99907000 75314 COMMUNITY YOUTH EVENTS						
12,919.00	12,919.00	7,740.52	636.47	0.00	5,178.48	59.9%

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TOTAL REC CENTER OTHER EXPENSES							
387,019.00		387,019.00	577,677.35	18,954.90	0.00	-190,658.35	149.3%
99908000 REC CENTER PAYROLL EXPENSE							
99908000 76010	EXECUTIVE DIRECTOR						
108,308.00	108,308.00	108,928.00	8,494.00	0.00	-620.00	100.6%	
99908000 76011	EXEC DIRECTOR TENURE PAY						
0.00	0.00	10,906.00	850.00	0.00	-10,906.00	100.0%	
99908000 76020	RECREATION DIRECTOR						
60,000.00	60,000.00	53,469.26	4,159.62	0.00	6,530.74	89.1%	
99908000 76021	OUTDOOR PROGRAM SPECIALIST						
48,500.00	48,500.00	53,698.13	5,354.13	0.00	-5,198.13	110.7%	
99908000 76022	OUTDOOR PROGRAM ASSISTANT						
0.00	0.00	4,442.31	2,961.54	0.00	-4,442.31	100.0%	
99908000 76029	DIRECTOR OF OPERATIONS						
65,000.00	65,000.00	70,000.06	5,384.62	0.00	-5,000.06	107.7%	
99908000 76031	AFTER SCHOOL PROGRAM						
93,266.00	93,266.00	128,345.11	7,824.48	0.00	-35,079.11	137.6%	
99908000 76032	DISCOVERY CLUB						
57,000.00	57,000.00	71,974.46	5,186.98	0.00	-14,974.46	126.3%	
99908000 76033	SUMMER CAMP						
100,000.00	100,000.00	131,596.18	51,308.98	0.00	-31,596.18	131.6%	
99908000 76034	CHALLENGE PROGRAM-SUMMER						
27,000.00	27,000.00	46,936.54	19,376.00	0.00	-19,936.54	173.8%	
99908000 76035	S.E./SENIOR CITIZEN COORDINATR						
47,500.00	47,500.00	43,461.62	3,461.54	0.00	4,038.38	91.5%	
99908000 76037	SENIOR CITIZENS ADMIN.						
7,500.00	7,500.00	6,190.45	1,244.20	0.00	1,309.55	82.5%	
99908000 76038	THERAPEUTIC RECREATION LEADER						
45,000.00	45,000.00	21,625.16	1,730.78	0.00	23,374.84	48.1%	
99908000 76039	FITNESS COORDINATOR						
50,000.00	50,000.00	24,807.72	3,846.16	0.00	25,192.28	49.6%	
99908000 76040	ATHLETICS COORDINATOR						
58,500.00	58,500.00	59,241.00	4,557.00	0.00	-741.00	101.3%	
99908000 76041	ATHLETICS PROGRAMS						
50,000.00	50,000.00	23,862.14	2,675.87	0.00	26,137.86	47.7%	
99908000 76042	YOUTH/TEEN DIRECTOR						
47,500.00	47,500.00	45,769.22	3,615.38	0.00	1,730.78	96.4%	
99908000 76043	ASSISTANT YOUTH/TEEN DIRECTOR						
32,700.00	32,700.00	21,625.07	1,730.76	0.00	11,074.93	66.1%	

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99908000 76045	BUSINESS MANAGER					
50,000.00	50,000.00	49,134.58	3,846.16	0.00	865.42	98.3%
99908000 76047	PROGRAM SUPERVISORS					
50,000.00	50,000.00	16,562.37	2,114.29	0.00	33,437.63	33.1%
99908000 76048	BUILDING SUPERVISOR					
60,000.00	60,000.00	101,340.19	8,125.42	0.00	-41,340.19	168.9%
99908000 76049	SPECIAL EVENTS STAFFING					
52,000.00	52,000.00	55,969.81	3,740.45	0.00	-3,969.81	107.6%
99908000 76050	SPECIAL EVENTS/FUND					
47,500.00	47,500.00	43,134.71	3,384.62	0.00	4,365.29	90.8%
99908000 76052	FRONT DESK					
110,000.00	110,000.00	139,030.04	14,338.39	0.00	-29,030.04	126.4%
99908000 76070	AQUATICS/SPEC PROJ COORDINATOR					
53,000.00	53,000.00	51,054.22	4,201.15	0.00	1,945.78	96.3%
99908000 76072	SEASONAL POOL STAFF					
165,000.00	165,000.00	180,445.00	28,334.98	0.00	-15,445.00	109.4%
99908000 76073	MAINTENANCE WORKER					
61,400.00	61,400.00	47,002.34	3,230.91	0.00	14,397.66	76.6%
99908000 76074	MARKETING/DEVELOPMENT					
47,500.00	47,500.00	43,498.00	3,346.00	0.00	4,002.00	91.6%
TOTAL REC CENTER	PAYROLL EXPENSE					
1,594,174.00	1,594,174.00	1,654,049.69	208,424.41	0.00	-59,875.69	103.8%
99909000 REC CENTER PAYROLL TAXES & INS						
99909000 76075	PAYROLL TAXES					
106,775.00	106,775.00	126,426.67	16,552.51	0.00	-19,651.67	118.4%
99909000 76078	WORKMANS COMPENSATION					
15,000.00	15,000.00	13,419.00	0.00	0.00	1,581.00	89.5%
99909000 76079	UNEMPLOYMENT TAXES					
3,420.00	3,420.00	0.00	0.00	0.00	3,420.00	.0%
99909000 76080	HEALTH INSURANCE					
100,000.00	100,000.00	87,043.15	7,985.20	0.00	12,956.85	87.0%
99909000 76081	PAYROLL TAXES-SENIOR PROGRAMS					
0.00	0.00	3,746.44	350.05	0.00	-3,746.44	100.0%
99909000 76084	HEALTH INSURANCE-SENIOR PROG					
0.00	0.00	5,452.35	531.77	0.00	-5,452.35	100.0%
99909000 76086	LONG TERM DISABILITY INSURANCE					
6,500.00	6,500.00	6,639.25	0.00	0.00	-139.25	102.1%
99909000 76087	DEFERRED INCOME					
11,000.00	11,000.00	0.00	0.00	0.00	11,000.00	.0%

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99909000 76088	EMPLOYEE 401K CONTRIBUTIONS					
28,000.00	28,000.00	33,360.33	2,800.88	0.00	-5,360.33	119.1%
99909000 76090	401K ADMINISTRATIVE FEES					
0.00	0.00	2,025.00	0.00	0.00	-2,025.00	100.0%
TOTAL REC CENTER	PAYROLL TAXES &					
270,695.00	270,695.00	278,112.19	28,220.41	0.00	-7,417.19	102.7%
99910000 REC CENTER GEN ADM EXPENSE						
99910000 71720	LOSS ON FIXED ASSETS					
0.00	0.00	4,861.74	0.00	0.00	-4,861.74	100.0%
99910000 77010	AUDIT/BANK FEES					
53,000.00	53,000.00	81,437.24	5,487.96	0.00	-28,437.24	153.7%
99910000 77011	LEGAL FEES					
1,000.00	1,000.00	0.00	0.00	0.00	1,000.00	.0%
99910000 77012	ADVERTISING					
25,000.00	25,000.00	46,403.73	6,580.74	0.00	-21,403.73	185.6%
99910000 77014	VEHICLES					
25,500.00	25,500.00	24,728.87	3,443.86	0.00	771.13	97.0%
99910000 77015	COMPUTER LEASE					
17,000.00	17,000.00	45,110.30	5,023.22	0.00	-28,110.30	265.4%
99910000 77020	DUES & SUBSCRIPTIONS					
10,000.00	10,000.00	5,631.22	285.63	0.00	4,368.78	56.3%
99910000 77022	PROPANE					
38,852.00	38,852.00	54,967.50	0.00	0.00	-16,115.50	141.5%
99910000 77023	ELECTRICITY-REC CTR					
90,000.00	90,000.00	107,904.71	17,592.00	0.00	-17,904.71	119.9%
99910000 77024	ELECTRICITY-FIELD					
0.00	0.00	1,372.00	408.00	0.00	-1,372.00	100.0%
99910000 77025	ELECTRICITY-SHELTER COVE					
1,200.00	1,200.00	1,566.00	293.00	0.00	-366.00	130.5%
99910000 77026	GENERAL LIABILITY					
85,000.00	85,000.00	100,591.56	6,657.07	0.00	-15,591.56	118.3%
99910000 77028	FIRE ALARM SERVICE					
3,500.00	3,500.00	23,687.41	5,788.53	0.00	-20,187.41	676.8%
99910000 77029	ELECTRIC-SHARE 58 SHELTER COVE					
3,500.00	3,500.00	3,238.00	393.00	0.00	262.00	92.5%
99910000 77034	TRASH REMOVAL					
5,500.00	5,500.00	7,210.36	0.00	0.00	-1,710.36	131.1%
99910000 77035	CLEANING-58 SHELTER COVE					
7,800.00	7,800.00	7,551.76	650.00	0.00	248.24	96.8%

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99910000 77050	EDUCATIONAL TRAINING					
25,000.00	25,000.00	31,670.70	6,218.26	0.00	-6,670.70	126.7%
99910000 77055	PRINTING-GENERAL					
5,000.00	5,000.00	2,886.00	0.00	0.00	2,114.00	57.7%
99910000 77056	PRINTING-NEWSLETTERS					
5,000.00	5,000.00	0.00	0.00	0.00	5,000.00	.0%
99910000 77060	POSTAGE & FREIGHT					
3,750.00	3,750.00	2,169.44	141.66	0.00	1,580.56	57.9%
99910000 77065	REPAIRS-BUILDING					
20,000.00	20,000.00	34,383.57	2,704.70	0.00	-14,383.57	171.9%
99910000 77066	REPAIRS-SWIM POOL					
23,566.00	23,566.00	7,781.60	3,594.12	0.00	15,784.40	33.0%
99910000 77075	LEASES-OFFICE EQUIPMENT					
9,500.00	9,500.00	1,036.38	0.00	0.00	8,463.62	10.9%
99910000 77080	CORDILLO BUILDING					
0.00	0.00	1,621.50	0.00	0.00	-1,621.50	100.0%
99910000 77083	DEPRECIATION					
0.00	0.00	170,148.63	168,282.43	0.00	-170,148.63	100.0%
99910000 77085	SUPPLIES-OFFICE					
14,000.00	14,000.00	11,721.89	3,770.68	0.00	2,278.11	83.7%
99910000 77086	SUPPLIES-SWIM POOL					
30,000.00	30,000.00	56,188.32	5,931.28	0.00	-26,188.32	187.3%
99910000 77087	SUPPLIES-GENERAL PURPOSE					
16,000.00	16,000.00	10,542.23	1,031.27	0.00	5,457.77	65.9%
99910000 77088	SUPPLIES-JANITORIAL					
35,000.00	35,000.00	30,990.01	5,370.61	0.00	4,009.99	88.5%
99910000 77090	TELEPHONE					
30,000.00	30,000.00	35,876.43	815.98	0.00	-5,876.43	119.6%
99910000 77094	WATER & SEWER-58 SHELTER COVE					
700.00	700.00	718.60	125.54	0.00	-18.60	102.7%
99910000 77095	WATER & SEWER					
12,000.00	12,000.00	2,778.00	477.00	0.00	9,222.00	23.2%
99910000 77096	SUPPLIES GEN PURPOSE-SENIOR PR					
1,500.00	1,500.00	1,009.97	0.00	0.00	490.03	67.3%
99910000 77097	SUPPLIES-OFFICE-SENIOR PROGRAM					
1,750.00	1,750.00	354.01	0.00	0.00	1,395.99	20.2%
99910000 77098	TELEPHONE-SENIOR PROGRAMS					
2,500.00	2,500.00	2,423.91	403.48	0.00	76.09	97.0%
99910000 78010	HEATING & AC					
23,000.00	23,000.00	47,586.00	2,950.00	0.00	-24,586.00	206.9%
99910000 78011	GROUNDS MAINTENANCE					
30,000.00	30,000.00	45,575.74	8,449.63	0.00	-15,575.74	151.9%
99910000 78012	GYM FLOOR					
6,500.00	6,500.00	0.00	0.00	0.00	6,500.00	.0%

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2024 12

ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
99910000 78017	500.00	500.00				
99910000 78018	0.00	0.00				
99910000 78020	102,000.00	102,000.00				
99910000 78021	500.00	500.00				
99910000 78022	500.00	500.00				
99910000 78024	250.00	250.00				
99910000 78025	750.00	750.00				
99910000 78029	1,200.00	1,200.00				
99910000 78060	4,500.00	4,500.00				
99910000 78200	0.00	0.00				
TOTAL REC CENTER GEN ADM EXPENSE	771,818.00	771,818.00				
99911000 REC CENTER CAPITAL IMPROVEMENT						
99911000 70000	45,000.00	45,000.00				
99911000 70300	354,500.00	354,500.00				
99911000 70600	110,000.00	110,000.00				
99911000 71063	0.00	0.00				
TOTAL REC CENTER CAPITAL IMPROVEM	509,500.00	509,500.00				
TOTAL HHI RECREATION ASSOCIATION	0.00	0.00				
TOTAL REVENUES	-3,964,156.00	-3,964,156.00				
TOTAL EXPENSES	3,964,156.00	3,964,156.00				
GRAND TOTAL						

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2024 12

ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
0.00	0.00	-80,029.59	15,613.93	0.00	80,029.59	100.0%

** END OF REPORT - Generated by Ben Netzinger **

HILTON HEAD ISLAND RECREATION ASSOCIATION, INC
BALANCE SHEET
June 30, 2024

ASSETS

Operating Cash

South State Bank-Operating	602,841.67	
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Petty Cash

Cash on Hand	375.00	
South State Bank-Petty Cash Checking	17,551.63	
Sub-Total Petty Cash		17,926.63

Money Market

South State Bank-Money Market	741,703.38	
TD Bank-Money Market Plus	2,715.71	
		744,419.09

Certificate of Deposits & Investments

Community Foundation of the Lowcountry	111,667.75	
Morgan Stanley-Reserve Account	554,728.14	
Morgan Stanley-Scholarship Endowment Fund	177,877.89	
South State Bank-CD's	450,000.00	
Sub-Total CD's & Investments		1,294,273.78

Other Current Assets

Accounts Receivable	0.00	
Prepaid Expenses	24,927.66	
Sub-Total Other Current Assets		24,927.66

Property & Equipment

Machinery & Equipment	362,742.73	
Land	15,000.00	
Building	102,415.00	
Leasehold Improvements	1,788,642.95	
Automobiles	334,958.53	
Improvements Other Than Building	6,724.00	
Sub-Total Property & Equipment		2,610,483.21
Accumulated Depreciation	(1,004,506.82)	
Total Property & Equipment, Net		1,605,976.39

TOTAL ASSETS

4,290,365.22

LIABILITIES & EQUITY

Liabilities

Accounts Payable	41,693.61	
Deferred Revenue	288,475.63	
Accrued Salaries	44,368.51	
Accrued Other	33,736.17	
Due to Other Gov	481.66	
Total Liabilities		408,755.58

Equity

Fund Balance	3,801,580.05	
Operating Income (Loss)	80,029.59	
Total Equity		3,881,609.64

TOTAL LIABILITIES & EQUITY

4,290,365.22

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2023 13

ORIGINAL APPROP		REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
999 HHI RECREATION ASSOCIATION							
99901 REC CENTER AQUATICS REVENUE							
99901 64401	AQUATICS						
-43,000.00		-43,000.00	-49,718.62	0.00	0.00	6,718.62	115.6%
99901 64402	REC SWIM						
-50,000.00		-50,000.00	-98,260.30	0.00	0.00	48,260.30	196.5%
99901 64403	SWIM TEAM						
-22,050.00		-22,050.00	-20,930.00	0.00	0.00	-1,120.00	94.9%
99901 64407	SWIM LESSONS						
-25,000.00		-25,000.00	-24,804.14	0.00	0.00	-195.86	99.2%
TOTAL REC CENTER AQUATICS REVENUE							
-140,050.00		-140,050.00	-193,713.06	0.00	0.00	53,663.06	138.3%
99901000 REC CENTER AQUATIC PROGRAM							
99901000 75401	AQUATICS						
14,500.00		14,500.00	14,026.53	0.00	0.00	473.47	96.7%
99901000 75407	SWIM LESSONS						
0.00		0.00	118.70	0.00	0.00	-118.70	100.0%
TOTAL REC CENTER AQUATIC PROGRAM							
14,500.00		14,500.00	14,145.23	0.00	0.00	354.77	97.6%
99902 REC CENTER SENIOR CITIZEN PROG							
99902 64620	SENIOR CENTER MEMBERSHIP						
-10,500.00		-10,500.00	-10,849.00	0.00	0.00	349.00	103.3%
99902 64709	SENIOR TRIPS						
-3,500.00		-3,500.00	-20.00	0.00	0.00	-3,480.00	.6%
99902 64710	CLASSES & SEMINARS						
-6,500.00		-6,500.00	-11,915.00	0.00	0.00	5,415.00	183.3%
99902 64720	EXERCISE CLASSES						
0.00		0.00	-3,367.00	0.00	0.00	3,367.00	100.0%
99902 64735	SOCIAL ACTIVITIES						
-1,350.00		-1,350.00	-9,807.60	0.00	0.00	8,457.60	726.5%

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2023 13

ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
99902 64750 SENIOR CENTER FACILITY RENTAL						
-6,840.00	-6,840.00	-6,840.00	0.00	0.00	0.00	100.0%
TOTAL REC CENTER SENIOR CITIZEN P						
-28,690.00	-28,690.00	-42,798.60	0.00	0.00	14,108.60	149.2%
99902000 REC CENTER SENIOR CITIZEN PROG						
99902000 74710 CLASSES & SEMINARS						
5,000.00	5,000.00	0.00	0.00	0.00	5,000.00	.0%
99902000 74720 EXERCISE CLASSES						
0.00	0.00	12,379.00	0.00	0.00	-12,379.00	100.0%
99902000 75709 SENIOR TRIPS						
10,000.00	10,000.00	7,494.34	0.00	0.00	2,505.66	74.9%
99902000 75725 ATHLETICS						
500.00	500.00	0.00	0.00	0.00	500.00	.0%
99902000 75735 SOCIAL ACTIVITIES						
1,500.00	1,500.00	4,277.31	0.00	0.00	-2,777.31	285.2%
TOTAL REC CENTER SENIOR CITIZEN P						
17,000.00	17,000.00	24,150.65	0.00	0.00	-7,150.65	142.1%
99903 REC CENTER ATHLETIC PROGRAMS						
99903 64501 ALL-SPORTS CAMP						
0.00	0.00	-6,220.00	0.00	0.00	6,220.00	100.0%
99903 64506 YOUTH BASKETBALL						
-55,000.00	-55,000.00	-68,074.21	0.00	0.00	13,074.21	123.8%
99903 64507 FLAG FOOTBALL						
-9,500.00	-9,500.00	-13,372.50	0.00	0.00	3,872.50	140.8%
99903 64508 ADULT BASKETBALL LEAGUES						
0.00	0.00	-9,282.00	0.00	0.00	9,282.00	100.0%
99903 64509 ADULT SOCCER LEAGUES						
-15,000.00	-15,000.00	-6,460.00	0.00	0.00	-8,540.00	43.1%
99903 64510 JR ACADEMY SOCCER						
0.00	0.00	-24,346.50	0.00	0.00	24,346.50	100.0%
99903 64511 GOLF SCHOOL						
0.00	0.00	-200.00	0.00	0.00	200.00	100.0%
99903 64513 OPEN GYM PROGRAMS						
-18,000.00	-18,000.00	-21,075.00	0.00	0.00	3,075.00	117.1%

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2023 13

ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
99903 64514 FOOTBALL CAMP						
-45,000.00	-45,000.00	-66,175.00	0.00	0.00	21,175.00	147.1%
99903 64515 OUTDOOR PROGRAMS						
-35,000.00	-35,000.00	-79,695.85	0.00	0.00	44,695.85	227.7%
99903 64516 SOCCER CAMP						
-5,000.00	-5,000.00	0.00	0.00	0.00	-5,000.00	.0%
99903 64517 YOUTH-TENNIS						
-45,000.00	-45,000.00	-44,317.75	0.00	0.00	-682.25	98.5%
99903 64520 VOLLEYBALL-GIRLS CAMP						
-17,000.00	-17,000.00	-16,546.25	0.00	0.00	-453.75	97.3%
99903 64532 CHEERLEADING CAMP						
-2,000.00	-2,000.00	-8,487.50	0.00	0.00	6,487.50	424.4%
99903 64535 YOUTH SOCCER						
-95,000.00	-95,000.00	-127,133.76	0.00	0.00	32,133.76	133.8%
99903 64538 E-SPORTS						
0.00	0.00	-805.00	0.00	0.00	805.00	100.0%
99903 64539 FAST TRACKERS						
0.00	0.00	-821.00	0.00	0.00	821.00	100.0%
99903 64540 YOUTH REC CLASSES						
-10,000.00	-10,000.00	0.00	0.00	0.00	-10,000.00	.0%
99903 64541 FITNESS PROGRAM MEMBERSHIPS						
-200,000.00	-200,000.00	-180,272.41	0.00	0.00	-19,727.59	90.1%
99903 64542 FITNESS PROGRAM CLASSES						
-20,000.00	-20,000.00	-40,625.68	0.00	0.00	20,625.68	203.1%
99903 64603 FENCING						
-12,000.00	-12,000.00	0.00	0.00	0.00	-12,000.00	.0%
99903 64610 KARATE-SHOTOKAN						
-25,000.00	-25,000.00	-47,192.50	0.00	0.00	22,192.50	188.8%
99903 64611 DANCE						
0.00	0.00	-1,408.00	0.00	0.00	1,408.00	100.0%
99903 64614 LACROSSE						
-5,000.00	-5,000.00	-9,511.76	0.00	0.00	4,511.76	190.2%
99903 64617 GATOR FOOTBALL						
0.00	0.00	-2,055.00	0.00	0.00	2,055.00	100.0%
99903 64619 PICKLEBALL INCOME						
-25,000.00	-25,000.00	-52,970.65	0.00	0.00	27,970.65	211.9%
TOTAL REC CENTER ATHLETIC PROGRAM						
-638,500.00	-638,500.00	-827,048.32	0.00	0.00	188,548.32	129.5%
99903000 REC CENTER ATHLETIC PROGRAMS						
99903000 75501 ALL-SPORTS CAMP						
0.00	0.00	1,907.39	0.00	0.00	-1,907.39	100.0%

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2023 13

ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
99903000 75502	LACROSSE					
3,750.00	3,750.00	0.00	0.00	0.00	3,750.00	.0%
99903000 75503	BASKETBALL-YOUTH					
26,000.00	26,000.00	0.00	0.00	0.00	26,000.00	.0%
99903000 75505	BASKETBALL HUSTLER CAMP					
1,100.00	1,100.00	5,749.55	0.00	0.00	-4,649.55	522.7%
99903000 75506	YOUTH BASKETBALL					
0.00	0.00	31,690.24	0.00	0.00	-31,690.24	100.0%
99903000 75507	FLAG FOOTBALL					
5,700.00	5,700.00	10,922.01	0.00	0.00	-5,222.01	191.6%
99903000 75508	ADULT BASKETBALL LEAGUES					
0.00	0.00	2,105.04	0.00	0.00	-2,105.04	100.0%
99903000 75509	ADULT SOCCER LEAGUES					
1,000.00	1,000.00	2,698.75	0.00	0.00	-1,698.75	269.9%
99903000 75510	JR ACADEMY SOCCER					
0.00	0.00	14,543.25	0.00	0.00	-14,543.25	100.0%
99903000 75511	GOLF SCHOOL					
2,000.00	2,000.00	0.00	0.00	0.00	2,000.00	.0%
99903000 75513	OPEN GYM PROGRAMS					
100.00	100.00	0.00	0.00	0.00	100.00	.0%
99903000 75514	FOOTBALL CAMP					
39,750.00	39,750.00	62,529.67	0.00	0.00	-22,779.67	157.3%
99903000 75515	SAILING CAMP					
2,750.00	2,750.00	32,445.45	0.00	0.00	-29,695.45	1179.8%
99903000 75516	SOCCER CAMP					
3,750.00	3,750.00	5,265.00	0.00	0.00	-1,515.00	140.4%
99903000 75517	YOUTH-TENNIS					
33,750.00	33,750.00	22,220.44	0.00	0.00	11,529.56	65.8%
99903000 75520	VOLLEYBALL-GIRLS CAMP					
13,600.00	13,600.00	13,526.32	0.00	0.00	73.68	99.5%
99903000 75532	CHEERLEADING CAMP					
1,600.00	1,600.00	6,437.50	0.00	0.00	-4,837.50	402.3%
99903000 75535	YOUTH SOCCER					
40,000.00	40,000.00	98,154.06	0.00	0.00	-58,154.06	245.4%
99903000 75536	SURF CAMP					
8,000.00	8,000.00	1,332.00	0.00	0.00	6,668.00	16.7%
99903000 75538	E-SPORTS					
0.00	0.00	1,885.93	0.00	0.00	-1,885.93	100.0%
99903000 75539	FAST TRACKERS					
0.00	0.00	656.25	0.00	0.00	-656.25	100.0%
99903000 75540	YOUTH FITNESS					
7,500.00	7,500.00	0.00	0.00	0.00	7,500.00	.0%
99903000 75541	FITNESS PROG MEMBERSHIPS					
0.00	0.00	5,547.79	0.00	0.00	-5,547.79	100.0%

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2023 13

ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
99903000 75542	FITNESS PROG CLASSES					
36,000.00	36,000.00	37,186.69	0.00	0.00	-1,186.69	103.3%
99903000 75603	FENCING					
0.00	0.00	8,917.50	0.00	0.00	-8,917.50	100.0%
99903000 75610	KARATE-SHOTOKAN					
18,500.00	18,500.00	35,895.00	0.00	0.00	-17,395.00	194.0%
99903000 75614	LACROSSE					
0.00	0.00	2,952.53	0.00	0.00	-2,952.53	100.0%
99903000 75617	GATOR FOOTBALL					
0.00	0.00	1,915.64	0.00	0.00	-1,915.64	100.0%
99903000 75619	PICKLEBALL EXPENSE					
7,500.00	7,500.00	9,367.72	0.00	0.00	-1,867.72	124.9%
TOTAL REC CENTER ATHLETIC PROGRAM						
252,350.00	252,350.00	415,851.72	0.00	0.00	-163,501.72	164.8%
99905 REC CENTER YOUTH/TEEN PROGRAMS						
99905 64901	AFTER-SCHOOL CLUB					
-195,000.00	-195,000.00	-277,380.15	0.00	0.00	82,380.15	142.2%
99905 64904	DISCOVERY CLUB					
-70,000.00	-70,000.00	-120,675.96	0.00	0.00	50,675.96	172.4%
99905 64910	SUMMER DAY CAMP					
-245,000.00	-245,000.00	-246,330.12	0.00	0.00	1,330.12	100.5%
99905 64921	CHALLENGE CAMP					
-62,000.00	-62,000.00	-85,153.59	0.00	0.00	23,153.59	137.3%
99905 64935	CHILDREN & TEEN ACTIVITIES					
-9,500.00	-9,500.00	-5,160.00	0.00	0.00	-4,340.00	54.3%
99905 64937	THERAPEUTIC RECREATION					
0.00	0.00	-6,140.00	0.00	0.00	6,140.00	100.0%
TOTAL REC CENTER YOUTH/TEEN PROGR						
-581,500.00	-581,500.00	-740,839.82	0.00	0.00	159,339.82	127.4%
99905000 REC CENTER YOUTH/TEEN PROGRAMS						
99905000 75901	AFTER-SCHOOL CLUB					
23,000.00	23,000.00	17,124.50	0.00	0.00	5,875.50	74.5%
99905000 75904	DISCOVERY CLUB					
15,500.00	15,500.00	16,905.03	0.00	0.00	-1,405.03	109.1%

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2023 13

ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
99905000 75910 SUMMER DAY CAMP						
30,000.00	30,000.00	63,813.91	0.00	0.00	-33,813.91	212.7%
99905000 75921 CHALLENGE CAMP						
15,000.00	15,000.00	1,553.93	0.00	0.00	13,446.07	10.4%
99905000 75935 CHILDREN & TEEN ACTIVITIES						
7,600.00	7,600.00	1,005.39	0.00	0.00	6,594.61	13.2%
99905000 75936 THERAPEUTIC EQUIPMENT						
0.00	0.00	10.98	0.00	0.00	-10.98	100.0%
TOTAL REC CENTER YOUTH/TEEN PROGR						
91,100.00	91,100.00	100,413.74	0.00	0.00	-9,313.74	110.2%
99906 REC CENTERTOWN OF HHI INCOME						
99906 64000 CIP-TOWN OF HILTON HEAD						
-400,000.00	-400,000.00	-362,308.23	0.00	0.00	-37,691.77	90.6%
99906 64015 TOWN OF HILTON HEAD-MONTHLY						
-934,669.00	-934,669.00	-934,668.96	0.00	0.00	-0.04	100.0%
99906 64016 ACCOMODATION TAX-TOWN OF HH						
-35,000.00	-35,000.00	-43,509.73	0.00	0.00	8,509.73	124.3%
99906 64018 GEN FUND REIM-SENIOR PROGRAMS						
-137,135.00	-137,135.00	-137,135.04	0.00	0.00	0.04	100.0%
99906 64936 THERAPEUTIC LEADER						
-27,500.00	-27,500.00	-27,500.00	0.00	0.00	0.00	100.0%
TOTAL REC CENTERTOWN OF HHI INCOM						
-1,534,304.00	-1,534,304.00	-1,505,121.96	0.00	0.00	-29,182.04	98.1%
99907 REC CENTER OTHER INCOME						
99907 64101 REALIZED GAIN						
0.00	0.00	-41,203.30	0.00	0.00	41,203.30	100.0%
99907 64102 FRIENDS DRIVE						
-28,500.00	-28,500.00	-86,804.82	0.00	0.00	58,304.82	304.6%
99907 64104 DONATED SERVICES						
-5,000.00	-5,000.00	0.00	0.00	0.00	-5,000.00	.0%
99907 64105 UNREALIZED GAINS(LOSS)						
0.00	0.00	7,130.90	0.00	0.00	-7,130.90	100.0%
99907 64107 MISC INCOME						
-15,000.00	-15,000.00	-16,925.12	0.00	0.00	1,925.12	112.8%

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2023 13

ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
99907 64108 REC CTR RENTALS						
-5,000.00	-5,000.00	-6,013.00	0.00	0.00	1,013.00	120.3%
99907 64109 INTEREST						
-4,000.00	-4,000.00	-9,501.52	0.00	0.00	5,501.52	237.5%
99907 64110 HERITAGE CONCESSIONS						
-20,000.00	-20,000.00	-34,320.36	0.00	0.00	14,320.36	171.6%
99907 64114 RENTAL-SHELTER COVE						
-20,000.00	-20,000.00	-37,147.50	0.00	0.00	17,147.50	185.7%
99907 64117 MISCELLANEOUS-SENIOR PROGRAMS						
-500.00	-500.00	0.00	0.00	0.00	-500.00	.0%
99907 64120 DONATIONS EQUIPMENT						
0.00	0.00	-26,950.28	0.00	0.00	26,950.28	100.0%
99907 64121 BEAUFORT COUNTY POOL						
-135,000.00	-135,000.00	-145,000.00	0.00	0.00	10,000.00	107.4%
99907 64122 VENDING MACHINES						
-12,000.00	-12,000.00	-32,413.09	0.00	0.00	20,413.09	270.1%
99907 64300 SPECIAL EVENTS						
-325,000.00	-325,000.00	-456,277.69	0.00	0.00	131,277.69	140.4%
99907 64314 COMMUNITY YOUTH EVENTS						
-15,000.00	-15,000.00	-8,396.80	0.00	0.00	-6,603.20	56.0%
TOTAL REC CENTER OTHER INCOME						
-585,000.00	-585,000.00	-893,822.58	0.00	0.00	308,822.58	152.8%
99907000 REC CENTER OTHER EXPENSES						
99907000 75102 FRIENDS DRIVE						
6,500.00	6,500.00	4,270.38	0.00	0.00	2,229.62	65.7%
99907000 75107 MISC INCOME						
3,500.00	3,500.00	10,684.80	0.00	0.00	-7,184.80	305.3%
99907000 75110 HERITAGE BOOTH						
2,500.00	2,500.00	2,420.25	0.00	0.00	79.75	96.8%
99907000 75122 VENDING MACHINES						
0.00	0.00	17,448.15	0.00	0.00	-17,448.15	100.0%
99907000 75300 SPECIAL EVENTS						
235,000.00	235,000.00	441,508.79	0.00	0.00	-206,508.79	187.9%
99907000 75313 PARK RENTAL AGREEMENT W/ CNTY						
6,300.00	6,300.00	0.00	0.00	0.00	6,300.00	.0%
99907000 75314 COMMUNITY YOUTH EVENTS						
12,919.00	12,919.00	8,054.97	0.00	0.00	4,864.03	62.3%
TOTAL REC CENTER OTHER EXPENSES						
266,719.00	266,719.00	484,387.34	0.00	0.00	-217,668.34	181.6%

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2023 13

ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
99908000 REC CENTER PAYROLL EXPENSE						
99908000 76010	EXECUTIVE DIRECTOR					
107,162.00	107,162.00	107,232.40	0.00	0.00	-70.40	100.1%
99908000 76011	EXEC DIRECTOR TENURE PAY					
0.00	0.00	10,720.80	0.00	0.00	-10,720.80	100.0%
99908000 76020	RECREATION DIRECTOR					
58,500.00	58,500.00	72,503.96	0.00	0.00	-14,003.96	123.9%
99908000 76021	OUTDOOR PROGRAM SPECIALIST					
45,000.00	45,000.00	46,403.83	0.00	0.00	-1,403.83	103.1%
99908000 76029	DIRECTOR OF OPERATIONS					
62,100.00	62,100.00	63,020.29	0.00	0.00	-920.29	101.5%
99908000 76031	AFTER SCHOOL PROGRAM					
77,000.00	77,000.00	107,462.58	0.00	0.00	-30,462.58	139.6%
99908000 76032	DISCOVERY CLUB					
57,000.00	57,000.00	70,383.08	0.00	0.00	-13,383.08	123.5%
99908000 76033	SUMMER CAMP					
85,000.00	85,000.00	119,541.77	0.00	0.00	-34,541.77	140.6%
99908000 76034	CHALLENGE PROGRAM-SUMMER					
42,000.00	42,000.00	26,093.53	0.00	0.00	15,906.47	62.1%
99908000 76035	S.E./SENIOR CITIZEN COORDINATR					
45,000.00	45,000.00	41,596.21	0.00	0.00	3,403.79	92.4%
99908000 76037	SENIOR CITIZENS ADMIN.					
7,500.00	7,500.00	0.00	0.00	0.00	7,500.00	.0%
99908000 76038	THERAPEUTIC RECREATION LEADER					
40,000.00	40,000.00	19,456.11	0.00	0.00	20,543.89	48.6%
99908000 76039	FITNESS COORDINATOR					
44,000.00	44,000.00	10,132.10	0.00	0.00	33,867.90	23.0%
99908000 76040	ATHLETICS COORDINATOR					
52,500.00	52,500.00	56,731.93	0.00	0.00	-4,231.93	108.1%
99908000 76041	ATHLETICS PROGRAMS					
45,000.00	45,000.00	17,289.67	0.00	0.00	27,710.33	38.4%
99908000 76042	YOUTH/TEEN DIRECTOR					
45,000.00	45,000.00	43,721.23	0.00	0.00	1,278.77	97.2%
99908000 76043	ASSISTANT YOUTH/TEEN DIRECTOR					
32,700.00	32,700.00	19,455.99	0.00	0.00	13,244.01	59.5%
99908000 76045	BUSINESS MANAGER					
48,500.00	48,500.00	47,757.61	0.00	0.00	742.39	98.5%
99908000 76047	PROGRAM SUPERVISORS					
40,000.00	40,000.00	545.00	0.00	0.00	39,455.00	1.4%
99908000 76048	BUILDING SUPERVISOR					
60,000.00	60,000.00	99,985.90	0.00	0.00	-39,985.90	166.6%

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2023 13

ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
99908000 76049	SPECIAL EVENTS STAFFING					
20,000.00	20,000.00	34,273.14	0.00	0.00	-14,273.14	171.4%
99908000 76050	SPECIAL EVENTS/FUND					
45,000.00	45,000.00	41,735.90	0.00	0.00	3,264.10	92.7%
99908000 76052	FRONT DESK					
102,500.00	102,500.00	101,371.09	0.00	0.00	1,128.91	98.9%
99908000 76070	AQUATICS/SPEC PROJ COORDINATOR					
50,000.00	50,000.00	51,649.25	0.00	0.00	-1,649.25	103.3%
99908000 76072	SEASONAL POOL STAFF					
165,000.00	165,000.00	125,613.71	0.00	0.00	39,386.29	76.1%
99908000 76073	MAINTENANCE WORKER					
53,750.00	53,750.00	43,561.14	0.00	0.00	10,188.86	81.0%
99908000 76074	MARKETING/DEVELOPMENT					
45,000.00	45,000.00	43,665.30	0.00	0.00	1,334.70	97.0%
TOTAL REC CENTER	PAYROLL EXPENSE					
1,475,212.00	1,475,212.00	1,421,903.52	0.00	0.00	53,308.48	96.4%
99909000 REC CENTER PAYROLL TAXES & INS						
99909000 76075	PAYROLL TAXES					
106,775.00	106,775.00	104,926.99	0.00	0.00	1,848.01	98.3%
99909000 76078	WORKMANS COMPENSATION					
15,000.00	15,000.00	10,950.00	0.00	0.00	4,050.00	73.0%
99909000 76079	UNEMPLOYMENT TAXES					
3,420.00	3,420.00	0.00	0.00	0.00	3,420.00	.0%
99909000 76080	HEALTH INSURANCE					
95,000.00	95,000.00	76,738.69	0.00	0.00	18,261.31	80.8%
99909000 76081	PAYROLL TAXES-SENIOR PROGRAMS					
0.00	0.00	3,151.38	0.00	0.00	-3,151.38	100.0%
99909000 76084	HEALTH INSURANCE-SENIOR PROG					
0.00	0.00	5,254.41	0.00	0.00	-5,254.41	100.0%
99909000 76086	LONG TERM DISABILITY INSURANCE					
5,500.00	5,500.00	6,074.70	0.00	0.00	-574.70	110.4%
99909000 76087	DEFERRED INCOME					
11,000.00	11,000.00	0.00	0.00	0.00	11,000.00	.0%
99909000 76088	EMPLOYEE 401K CONTRIBUTIONS					
24,000.00	24,000.00	27,952.86	0.00	0.00	-3,952.86	116.5%
99909000 76090	401K ADMINISTRATIVE FEES					
0.00	0.00	2,235.00	0.00	0.00	-2,235.00	100.0%
TOTAL REC CENTER	PAYROLL TAXES &					
260,695.00	260,695.00	237,284.03	0.00	0.00	23,410.97	91.0%

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2023 13

ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
99910000 REC CENTER GEN ADM EXPENSE						
99910000 71720	LOSS ON FIXED ASSETS					
0.00	0.00	-3,959.51	0.00	0.00	3,959.51	100.0%
99910000 77010	AUDIT/BANK FEES					
43,000.00	43,000.00	68,572.31	0.00	0.00	-25,572.31	159.5%
99910000 77011	LEGAL FEES					
1,000.00	1,000.00	0.00	0.00	0.00	1,000.00	.0%
99910000 77012	ADVERTISING					
15,000.00	15,000.00	55,757.10	0.00	0.00	-40,757.10	371.7%
99910000 77014	VEHICLES					
25,500.00	25,500.00	25,099.69	0.00	0.00	400.31	98.4%
99910000 77015	COMPUTER LEASE					
17,000.00	17,000.00	17,815.58	0.00	0.00	-815.58	104.8%
99910000 77020	DUES & SUBSCRIPTIONS					
10,000.00	10,000.00	5,555.77	0.00	0.00	4,444.23	55.6%
99910000 77022	PROPANE					
38,852.00	38,852.00	35,795.11	0.00	0.00	3,056.89	92.1%
99910000 77023	ELECTRICITY-REC CTR					
90,000.00	90,000.00	101,844.77	0.00	0.00	-11,844.77	113.2%
99910000 77024	ELECTRICITY-FIELD					
0.00	0.00	1,517.00	0.00	0.00	-1,517.00	100.0%
99910000 77025	ELECTRICITY-SHELTER COVE					
1,200.00	1,200.00	1,465.00	0.00	0.00	-265.00	122.1%
99910000 77026	GENERAL LIABILITY					
80,000.00	80,000.00	104,372.66	0.00	0.00	-24,372.66	130.5%
99910000 77028	FIRE ALARM SERVICE					
2,400.00	2,400.00	2,022.20	0.00	0.00	377.80	84.3%
99910000 77029	ELECTRIC-SHARE 58 SHELTER COVE					
3,500.00	3,500.00	2,719.00	0.00	0.00	781.00	77.7%
99910000 77034	TRASH REMOVAL					
4,000.00	4,000.00	5,316.42	0.00	0.00	-1,316.42	132.9%
99910000 77035	CLEANING-58 SHELTER COVE					
13,500.00	13,500.00	8,750.88	0.00	0.00	4,749.12	64.8%
99910000 77050	EDUCATIONAL TRAINING					
25,000.00	25,000.00	24,277.24	0.00	0.00	722.76	97.1%
99910000 77055	PRINTING-GENERAL					
5,000.00	5,000.00	2,508.26	0.00	0.00	2,491.74	50.2%
99910000 77056	PRINTING-NEWSLETTERS					
15,000.00	15,000.00	0.00	0.00	0.00	15,000.00	.0%
99910000 77060	POSTAGE & FREIGHT					
3,750.00	3,750.00	1,623.00	0.00	0.00	2,127.00	43.3%

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2023 13

ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
99910000 77065	REPAIRS-BUILDING					
15,000.00	15,000.00	15,971.42	0.00	0.00	-971.42	106.5%
99910000 77066	REPAIRS-SWIM POOL					
17,566.00	17,566.00	8,027.66	0.00	0.00	9,538.34	45.7%
99910000 77075	LEASES-OFFICE EQUIPMENT					
9,500.00	9,500.00	1,397.36	0.00	0.00	8,102.64	14.7%
99910000 77080	CORDILLO BUILDING					
0.00	0.00	5,339.66	0.00	0.00	-5,339.66	100.0%
99910000 77083	DEPRECIATION					
0.00	0.00	162,298.14	0.00	0.00	-162,298.14	100.0%
99910000 77085	SUPPLIES-OFFICE					
14,000.00	14,000.00	15,206.62	0.00	0.00	-1,206.62	108.6%
99910000 77086	SUPPLIES-SWIM POOL					
25,000.00	25,000.00	30,706.14	0.00	0.00	-5,706.14	122.8%
99910000 77087	SUPPLIES-GENERAL PURPOSE					
16,000.00	16,000.00	10,976.19	0.00	0.00	5,023.81	68.6%
99910000 77088	SUPPLIES-JANITORIAL					
30,000.00	30,000.00	37,033.75	0.00	0.00	-7,033.75	123.4%
99910000 77090	TELEPHONE					
27,000.00	27,000.00	31,452.36	0.00	0.00	-4,452.36	116.5%
99910000 77094	WATER & SEWER-58 SHELTER COVE					
750.00	750.00	703.04	0.00	0.00	46.96	93.7%
99910000 77095	WATER & SEWER					
12,000.00	12,000.00	2,441.00	0.00	0.00	9,559.00	20.3%
99910000 77096	SUPPLIES GEN PURPOSE-SENIOR PR					
1,500.00	1,500.00	2,247.64	0.00	0.00	-747.64	149.8%
99910000 77097	SUPPLIES-OFFICE-SENIOR PROGRAM					
1,750.00	1,750.00	697.35	0.00	0.00	1,052.65	39.8%
99910000 77098	TELEPHONE-SENIOR PROGRAMS					
2,500.00	2,500.00	2,017.40	0.00	0.00	482.60	80.7%
99910000 77099	VEHICLES-SENIOR PROGRAMS					
0.00	0.00	3.00	0.00	0.00	-3.00	100.0%
99910000 78010	HEATING & AC					
20,000.00	20,000.00	41,437.17	0.00	0.00	-21,437.17	207.2%
99910000 78011	GROUNDS MAINTENANCE					
15,000.00	15,000.00	50,262.79	0.00	0.00	-35,262.79	335.1%
99910000 78012	GYM FLOOR					
8,000.00	8,000.00	5,990.00	0.00	0.00	2,010.00	74.9%
99910000 78017	GROUNDS MAINTENANCE-SHELT. COVE					
1,000.00	1,000.00	0.00	0.00	0.00	1,000.00	.0%
99910000 78018	GROUNDS MAINTENANCE-TENNIS					
0.00	0.00	5,318.00	0.00	0.00	-5,318.00	100.0%
99910000 78020	RECREATION CENTER CLEANING					
115,000.00	115,000.00	103,300.00	0.00	0.00	11,700.00	89.8%

HILTON HEAD ISL RECREATION ASSOC

YEAR-TO-DATE BUDGET REPORT

FOR 2023 13

ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	% USED
99910000 78021	ADVERTISING-SENIOR PROGRAMS					
500.00	500.00	0.00	0.00	0.00	500.00	.0%
99910000 78022	COMPUTER LEASES/SERV-SENIOR PR					
500.00	500.00	1,838.15	0.00	0.00	-1,338.15	367.6%
99910000 78023	INSURANCE(GENERAL)-SENIOR PROG					
0.00	0.00	5,885.33	0.00	0.00	-5,885.33	100.0%
99910000 78024	POSTAGE-SENIOR PROGRAMS					
250.00	250.00	14.98	0.00	0.00	235.02	6.0%
99910000 78025	PRINTING GEN-SENIOR PROGRAMS					
750.00	750.00	45.21	0.00	0.00	704.79	6.0%
99910000 78029	COPIER LEASE MAINT-SENIOR					
1,200.00	1,200.00	1,565.38	0.00	0.00	-365.38	130.4%
99910000 78060	ELEVATOR MAINTENANCE					
2,000.00	2,000.00	2,342.25	0.00	0.00	-342.25	117.1%
99910000 78200	SHARE CENTER UPFITTING					
0.00	0.00	186.28	0.00	0.00	-186.28	100.0%
TOTAL REC CENTER GEN ADM EXPENSE						
730,468.00	730,468.00	1,005,756.75	0.00	0.00	-275,288.75	137.7%
99911000 REC CENTER CAPITAL IMPROVEMENT						
99911000 70000	PARKS					
42,500.00	42,500.00	11,467.35	0.00	0.00	31,032.65	27.0%
99911000 70300	ISLAND RECREATION FACILITY					
256,500.00	256,500.00	48,800.57	0.00	0.00	207,699.43	19.0%
99911000 70600	REC CENTER POOL					
101,000.00	101,000.00	76,958.64	0.00	0.00	24,041.36	76.2%
99911000 71063	PROGRAM UTILITY VEHICLE					
0.00	0.00	477.00	0.00	0.00	-477.00	100.0%
TOTAL REC CENTER CAPITAL IMPROVEM						
400,000.00	400,000.00	137,703.56	0.00	0.00	262,296.44	34.4%
TOTAL HHI RECREATION ASSOCIATION						
0.00	0.00	-361,747.80	0.00	0.00	361,747.80	100.0%
TOTAL REVENUES						
-3,508,044.00	-3,508,044.00	-4,203,344.34	0.00	0.00	695,300.34	
TOTAL EXPENSES						
3,508,044.00	3,508,044.00	3,841,596.54	0.00	0.00	-333,552.54	
GRAND TOTAL						
0.00	0.00	-361,747.80	0.00	0.00	361,747.80	100.0%

** END OF REPORT - Generated by Ben Netzinger **

HILTON HEAD ISLAND RECREATION ASSOCIATION, INC
BALANCE SHEET
June 30, 2024

ASSETS**Operating Cash**

South State Bank-Operating	602,841.67	
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Petty Cash

Cash on Hand	375.00	
South State Bank-Petty Cash Checking	17,551.63	
Sub-Total Petty Cash		17,926.63

Money Market

South State Bank-Money Market	741,703.38	
TD Bank-Money Market Plus	2,715.71	
		744,419.09

Certificate of Deposits & Investments

Community Foundation of the Lowcountry	111,667.75	
Morgan Stanley-Reserve Account	554,728.14	
Morgan Stanley-Scholarship Endowment Fund	177,877.89	
South State Bank-CD's	450,000.00	
Sub-Total CD's & Investments		1,294,273.78

Other Current Assets

Accounts Receivable	0.00	
Prepaid Expenses	24,927.66	
Sub-Total Other Current Assets		24,927.66

Property & Equipment

Machinery & Equipment	362,742.73	
Land	15,000.00	
Building	102,415.00	
Leasehold Improvements	1,788,642.95	
Automobiles	334,958.53	
Improvements Other Than Building	6,724.00	
Sub-Total Property & Equipment		2,610,483.21

Accumulated Depreciation	(1,004,506.82)	
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Total Property & Equipment, Net		1,605,976.39
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TOTAL ASSETS

		4,290,365.22
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LIABILITIES & EQUITY**Liabilities**

Accounts Payable	41,693.61	
Deferred Revenue	288,475.63	
Accrued Salaries	44,368.51	
Accrued Other	33,736.17	
Due to Other Gov	481.66	
Total Liabilities		408,755.58

Equity

Fund Balance	3,801,580.05	
Operating Income (Loss)	80,029.59	
Total Equity		3,881,609.64

TOTAL LIABILITIES & EQUITY

		4,290,365.22
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Jeep Island Budget 2026

Paid	Check/Donor	2024	2025	2026
SPONSORSHIPS				
Renewal By Andersen	Title Sponsor	\$1,500	\$500	\$1,500
AutoNation	Assisting	\$1,000	\$1,500	\$1,500
T-Mobile	Sponsor	\$200	\$0	\$0
ATAx	Accomodations Tax Money	\$0	\$10,000	\$15,000
Gaal Custom Homes/Local Pie	Sponsor	\$200	\$200	\$20
Sponsorship Income		\$2,900	\$12,200	\$18,020

Paid	Check/Donor	2024	2025	2026
ENTRANCE AND CONCESSIONS				
Jeep Entries		\$6,454	\$7,180	\$8,000
Jeep Raffle	Jeep/Camper Raffle	\$31,451	\$31,225	\$37,000
Merchandise		\$698	\$885	\$1,250
Pluck a Duck		\$0	\$905	\$1,000
Friday/Saturday Night Raffles			\$298	\$350
Concessions	Soda, Water & Beer -Friday Night	\$1,639	\$0	\$0
Vendor Payment		\$0	\$300	\$400
Entrance Income		\$40,242	\$40,793	\$48,000

Check/Donor	2024	2025	2026
Income	\$43,142	\$52,993	\$66,020
Expenses	\$53,875	\$35,221	\$53,875
Total Profit	-\$10,733	\$17,772	\$12,145

Paid to:	Purpose	2024	2025	2026
CONCESSIONS				
Southern Eagle	Beer	\$350	\$0	\$0
Coca-Cola	Soda	\$400	\$0	\$0
Concession Expenses		\$750	\$0	\$0

Paid to:	Purpose	2024	2025	2026
OPERATIONS / ENTERTAINMENT				
	Purchase of Jeep	\$11,500	\$9,000	\$17,500
	Purchase of Trailer/4 wheel	\$0	\$6,203	\$7,500
Dave Fucci	Raffle Jeep repairs	\$0	\$559	\$1,000
Quality Logo	Koozies	\$250	\$0	\$605
Custom Outfitters	Shirts	\$8,250	\$0	\$5,000
U Printing	Jeep/Camper Raffle Tickets	\$61	\$102	\$250
Sticker Mule	Stickers	\$140	\$0	\$146
Royal Restroom	Restrooms	\$1,200	\$750	\$1,107
4 All Promos/Leftover Ladies	Good Bag Supplies	\$2,250	\$0	\$1,200
Custom Imprint	Rubber Duckies	\$815	\$0	\$1,000
Retro Roxx	Entertainment-Saturday	\$400	\$500	\$600
Retro Roxx	Entertainment-Friday	\$500	\$0	\$500
Idlewild South	Entertainment-Friday	\$3,000	\$0	\$0
Jeff Taylor	DJ_ Friday Night	\$0	\$300	\$0
Innovation	Lights and Sounding	\$2,500	\$0	\$0
Amazing Event Rentals	Fencing	\$450	\$300	\$1,500
Holiday Inn Express	Entertainment-Friday	\$950	\$0	\$0
Fun Express/Amazon	Pluck a Duck	\$0	\$155	\$68
Boathouse- Saturday Night	Sat Night Event		\$5,410	\$0
Security	Coastal Security		\$2,000	\$2,500
Park Rental	Coastal Discovery Rental		\$1,250	\$0
Crown Awards	Trophies		\$92	\$100
Misc	Trailer Boards		\$1,200	\$1,250
Operation Expenses		\$32,266	\$27,821	\$41,825

Paid to:	Purpose	2024	2025	2026
MARKETING				
Web Domain	Website	\$187	\$200	\$300
APEX Radio	Live Remote	\$200	\$0	\$500
Social Media	Facebook, Snapchat, Instagram	\$500	\$7,200	\$9,000
Christian Perry	Photography / Drone Video	\$0	\$0	\$1,750
In House Printing	Posters and flyers	\$100	\$0	\$500
Marketing Expense		\$987	\$7,400	\$12,050

VENDORS	Tickets collected	% to Rec	% to Vendor
Melly Mel's	833	\$166	\$667
Tove's	3689	\$77	\$312
NYC Pizza	431	\$86	\$345
Guisseppi's	545	\$109	\$436
Firehouse Nutz	1705	\$341	\$1,364
Morgan's Mommy	541	\$108	\$433
Extreme Firehouse	2289	\$457	\$1,832
		\$1,344	\$5,389

Internal Revenue Service
District Director

Department of the Treasury

P. O. Box 2508
Cincinnati, OH 45201

Date: APR 23 1997

Hilton Head Island Recreation Association
C/O Island Youth Center Cordillo Pkwa
PO Box 22593
Hilton Head Island, SC 29925-2593

Person to Contact:
D. A. Downing
Telephone Number:
513-241-5199
Fax Number
513-684-5936
Federal Identification Number:
57-0827128

Dear Sir or Madam:

This letter is in response to your request for a copy of your organization's determination letter. This letter will take the place of the copy you requested.

Our records indicate that a determination letter issued in June, 1986 granted your organization exemption from federal income tax under section 501(c)(3) of the Internal Revenue Code. That letter is still in effect.

Based on information subsequently submitted, we classified your organization as one that is not a private foundation within the meaning of section 509(a) of the Code because it is an organization described in section 509(a)(1).

This classification was based on the assumption that your organization's operations would continue as stated in the application. If your organization's sources of support, or its character, method of operations, or purposes have changed, please let us know so we can consider the effect of the change on the exempt status and foundation status of your organization.

Your organization is required to file Form 990, Return of Organization Exempt from Income Tax, only if its gross receipts each year are normally more than \$25,000. If a return is required, it must be filed by the 15th day of the fifth month after the end of the organization's annual accounting period. The law imposes a penalty of \$20 a day, up to a maximum of \$10,000, when a return is filed late, unless there is reasonable cause for the delay.

All exempt organizations (unless specifically excluded) are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of \$100 or more paid to each employee during a calendar year. Your organization is not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Organizations that are not private foundations are not subject to the excise taxes under Chapter 42 of the Code. However, these organizations are not automatically exempt from other federal excise taxes.

Hilton Head Island Recreation Association
57-0827128

Donors may deduct contributions to your organization as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to your organization or for its use are deductible for federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

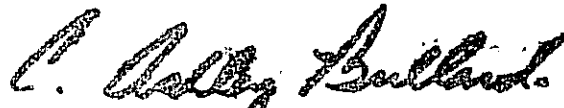
Your organization is not required to file federal income tax returns unless it is subject to the tax on unrelated business income under section 511 of the Code. If your organization is subject to this tax, it must file an income tax return on the Form 990-T, Exempt Organization Business Income Tax Return. In this letter, we are not determining whether any of your organization's present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

Because this letter could help resolve any questions about your organization's exempt status and foundation status, you should keep it with the organization's permanent records.

Please direct any questions to the person identified in the letterhead above.

This letter affirms your organization's exempt status.

Sincerely,

A handwritten signature in dark ink, appearing to read "C. Ashley Bullard". The signature is fluid and cursive, with a large initial "C" and a stylized "A".

C. Ashley Bullard
District Director

Form:

990Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047

2023**Open to Public
Inspection****A** For the 2023 calendar year, or tax year beginning **07/01/23**, and ending **06/30/24****B** Check if applicable:☐ Address change☐ Name change☐ Initial return☐ Final return/
terminated☐ Amended return☐ Application pending**C** Name of organization**Hilton Head Island Recreation**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

PO Box 22593

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

Hilton Head Island SC 29925**D** Employer identification number**57-0827128****E** Telephone number**843-681-7273****G** Gross receipts \$ **4,631,192****F** Name and address of principal officer:**Ray Craver****PO Box 22593****Hilton Head Island SC 29925****H(a)** Is this a group return for subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: **www.islandreccenter.org****H(c)** Group exemption number**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other**L** Year of formation: **1985** **M** State of legal domicile: **SC****Part I Summary**

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: Community Recreation		
	2 Check this box ☐ 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	17
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	17
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	133
	6 Total number of volunteers (estimate if necessary)	6	300
Revenue	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0
	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	1,591,927	1,716,588
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,077,245	2,199,636
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	43,574	103,745
Expenses	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	46,669	66,970
	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	3,759,415	4,086,939
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		0
	16a Professional fundraising fees (Part IX, column (A), line 11e)	1,656,953	1,930,134
	b Total fundraising expenses (Part IX, column (D), line 25)	0	0
Net Assets or Fund Balances	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,740,714	2,076,772
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	3,397,667	4,006,906
	19 Revenue less expenses. Subtract line 18 from line 12	361,748	80,033
	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	4,146,434	4,290,371
	22 Net assets or fund balances. Subtract line 21 from line 20	344,853	408,757
		3,801,581	3,881,614

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 Frank Soule		Date 9/24/24	
	Type or print name and title Frank Soule		Executive Director	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check ☐ if PTIN
	Patrick P. Carey, Jr., CPA	Patrick P. Carey, Jr., CPA	9/23/24	self-employed ☐ P00033247
	Firm's name	Firm's EIN		
	Carey & Company P.A.	57-0927046		
	Firm's address	Phone no.		
	70 Main Street, Suite 100	843-681-4430		
	Hilton Head Island, SC 29928			

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Form **990** (2023)

Part III Statement of Program Service Accomplishments

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

**1** Briefly describe the organization's mission:**Community Recreation****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 ☒ No

If "Yes," describe these new services on Schedule O.

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

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code:) (Expenses \$ **306,117** including grants of \$) (Revenue \$ **219,417**)
Aquatics program**4b** (Code:) (Expenses \$ **492,632** including grants of \$) (Revenue \$ **909,146**)
Athletic Program**4c** (Code:) (Expenses \$ **661,682** including grants of \$) (Revenue \$ **687,890**)
Youth/Teen Programs**4d** Other program services (Describe on Schedule O.)(Expenses \$ **1,995,867** including grants of \$) (Revenue \$ **383,183**)**4e** Total program service expenses **3,456,298**

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)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		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? If "Yes," complete Schedule C, Part II		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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III		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? If "Yes," complete Schedule D, Part I		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? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V		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? If "Yes," complete Schedule D, Part VI	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? If "Yes," complete Schedule D, Part VII		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? If "Yes," complete Schedule D, Part VIII		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? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	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)? If "Yes," complete Schedule D, Part X		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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? If "Yes," complete Schedule F, Parts I and IV		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? If "Yes," complete Schedule F, Parts II and IV		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? If "Yes," complete Schedule F, Parts III and IV		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? If "Yes," complete Schedule G, Part I. See instructions		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? If "Yes," complete Schedule G, Part II	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? If "Yes," complete Schedule I, Parts I and II		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV		X
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

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

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	133
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17	

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 on 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 on Schedule O.	17	
b Enter the number of voting members included on line 1a, above, who are independent	17	
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?	2	☒
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3	☒
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	☒
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	☒
6 Did the organization have members or stockholders?	6	☒
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?	7a	☒
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	☒
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a	☒
b Each committee with authority to act on behalf of the governing body?	8b	☒
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 on Schedule O	9	☒

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?	10a	☒
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?	10b	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	☒
b Describe on 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	12a	☒
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	☒
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	☒
13 Did the organization have a written whistleblower policy?	13	☒
14 Did the organization have a written document retention and destruction policy?	14	☒
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	15a	☒
b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	15b	☒
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?	16a	☒
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?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **SC**

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 on Schedule O)

19 Describe on 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.
John Britschge **70 Main Street, Suite 100**
Hilton Head Island **SC 29926** **843-681-4430**

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.
- See the instructions for the order in which to list the persons above.

☐ 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 dotted 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/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(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) Ray Craver	0.50									
President	0.00	X		X				0	0	0
(2) Susan Hughson	0.50									
Vice President	0.00	X		X				0	0	0
(3) Kristin Keller	0.50									
Secretary	0.00	X		X				0	0	0
(4) John Britschge	0.50									
Treasurer	0.00	X		X				0	0	0
(5) Reid Perry	0.50									
Board Director	0.00	X						0	0	0
(6) Mike Manesiotis	0.50									
Board Director	0.00	X						0	0	0
(7) Marty Pauls	0.50									
Board Director	0.00	X						0	0	0
(8) Barry Taylor	0.50									
Board Director	0.00	X						0	0	0
(9) Danny Ragland	0.50									
Board Director	0.00	X						0	0	0
(10) Kyle Theodore	0.50									
Board Director	0.00	X						0	0	0
(11) Steve Stauffer	0.50									
Board Director	0.00	X						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted 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/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(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			
(12) Butch Kisiah	0.50									
(12) Board Director	0.00	X						0	0	0
(13) Mary Hall	0.50									
(13) Board Director	0.00	X						0	0	0
(14) Bubba Gillis	0.50									
(14) Board Director	0.00	X						0	0	0
(15) Bob Stevens	0.50									
(15) Board Director	0.00	X						0	0	0
(16) Kate Boardman	0.50									
(16) Board Director	0.00	X						0	0	0
(17) Keri Olivetti	0.50									
(17) Board Director	0.00	X						0	0	0
(18) Frank Soule	40.00									
(18) Executive Director	0.00			X				108,928	0	0
(19)										
1b Subtotal								108,928		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								108,928		

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

0

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	1,491,966			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	224,622			
	g	Noncash contributions included in lines 1a-1f	1g	\$			
	h	Total. Add lines 1a-1f		1,716,588			
Program Service Revenue	Business Code						
	2a	Summer day camp		272,945	272,945		
	b	After-school club		269,570	269,570		
	c	Fitness Program New		211,398	211,398		
	d	Beaufort County pool		150,000	150,000		
	e	Pickleball income		128,077	128,077		
	f	All other program service revenue		1,167,646	1,167,646		
	g	Total. Add lines 2a-2f		2,199,636			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		103,745			103,745
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6a	Gross rents	(i) Real	(ii) Personal			
	b	Less: rental expenses					
	c	Rental inc. or (loss)					
	d	Net rental income or (loss)					
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
	b	Less: cost or other basis and sales exps.					
	c	Gain or (loss)					
	d	Net gain or (loss)					
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		611,223			
	b	Less: direct expenses		544,253			
	c	Net income or (loss) from fundraising events		66,970			
	9a	Gross income from gaming activities. See Part IV, line 19					
b	Less: direct expenses						
c	Net income or (loss) from gaming activities						
10a	Gross sales of inventory, less returns and allowances						
b	Less: cost of goods sold						
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	Business Code						
	11a						
	b						
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d					
12	Total revenue. See instructions			4,086,939	2,199,636	0	103,745

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				
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	1,654,048	1,299,047	355,001	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	132,494	132,494		
10 Payroll taxes	143,592	143,592		
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	83,462	83,462		
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 Schedule O.)				
12 Advertising and promotion	46,404	46,404		
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	296,995	296,995		
17 Travel	24,729		24,729	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	31,671	31,671		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	170,149	170,149		
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Rec Center pool	162,340	162,340		
b Recreation center cleanin	107,225	107,225		
c Youth soccer	84,842	84,842		
d Island Recreation facilit	76,914	76,914		
e All other expenses	992,041	821,163	170,878	
25 Total functional expenses. Add lines 1 through 24e	4,006,906	3,456,298	550,608	0
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 SheetCheck 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	1,215,317	1	1,175,497
	2 Savings and temporary cash investments	1,307,173	2	1,372,297
	3 Pledges and grants receivable, net	1,484	3	
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	43,441	9	24,928
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,610,488		
	b Less: accumulated depreciation	10b 1,004,507	10c 1,477,166	1,605,981
	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	101,853	15	111,668
16 Total assets. Add lines 1 through 15 (must equal line 33)	4,146,434	16	4,290,371	
Liabilities	17 Accounts payable and accrued expenses	63,501	17	41,694
	18 Grants payable		18	
	19 Deferred revenue	219,718	19	288,476
	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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		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	61,634	25	78,587
	26 Total liabilities. Add lines 17 through 25	344,853	26	408,757
	Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.		
27 Net assets without donor restrictions		3,801,581	27	3,881,614
28 Net assets with donor restrictions			28	
Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.				
29 Capital stock or trust principal, or current funds			29	
30 Paid-in or capital surplus, or land, building, or equipment fund			30	
31 Retained earnings, endowment, accumulated income, or other funds			31	
32 Total net assets or fund balances		3,801,581	32	3,881,614
33 Total liabilities and net assets/fund balances	4,146,434	33	4,290,371	

Part XI Reconciliation of Net AssetsCheck 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	4,086,939
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,006,906
3	Revenue less expenses. Subtract line 2 from line 1	3	80,033
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,801,581
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 on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	3,881,614

Part XII Financial Statements and ReportingCheck 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: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on 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. ☐ Separate basis ☐ Consolidated basis ☐ 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. ☐ Separate basis ☐ Consolidated basis ☐ 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 on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		
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 on Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990)Department of the Treasury
Internal Revenue Service**Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023Open to Public
Inspection

Name of the organization

Hilton Head Island Recreation

Employer identification number

57-0827128**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

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

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

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

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

Schedule A (Form 990) 2023

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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,639,321	1,387,239	1,501,554	1,591,927	1,716,588	7,836,629
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	1,639,321	1,387,239	1,501,554	1,591,927	1,716,588	7,836,629
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						7,836,629

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	1,639,321	1,387,239	1,501,554	1,591,927	1,716,588	7,836,629
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	4,227	34,759	-26,320	2,371	57,649	72,686
9 Net income from unrelated business activities, whether or not the business is regularly carried on	16,934	41,151		40,203	45,096	143,384
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						8,052,699
12 Gross receipts from related activities, etc. (see instructions)					12	11,185,871
13 First 5 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

14 Public support percentage for 2023 (line 6, column (f) divided by line 11, column (f))	14	97.32 %
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	98.35 %
16a 33 1/3% support test — 2023. 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	☒	
b 33 1/3% support test — 2022. 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	☐	
17a 10%-facts-and-circumstances test — 2023. 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	☐	
b 10%-facts-and-circumstances test — 2022. 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	☐	
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	☐	

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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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 on 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 5 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 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests — 2023.** 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 — 2022.** 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 on line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

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 on lines 11b and 11c below, the governing body of a supported organization?	11a	
b A family member of a person described on line 11a above?	11b	
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .	11c	

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2	

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).	1	

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2	
3 By reason of the relationship described on line 2, above, 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.	3	

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a	☐	The organization satisfied the Activities Test. Complete line 2 below.
b	☐	The organization is the parent of each of its supported organizations. Complete line 3 below.
c	☐	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
2 Activities Test. Answer lines 2a and 2b below.		
a	2a	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	2b	Did the activities described on line 2a, above, 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 lines 3a and 3b below.		
a	3a	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? If "Yes" or "No," provide details in Part VI .
b	3b	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 0.015 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 0.035.	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 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

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, Line 10 - Other Income Detail

Net income from fundraising \$ 0

**Schedule B
(Form 990)**Department of the Treasury
Internal Revenue Service**Schedule of Contributors**Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Name of the organization

Employer identification number

Hilton Head Island Recreation**57-0827128**

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 foundationCheck 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 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), 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), 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).

Name of organization

Hilton Head Island Recreation

Employer identification number

57-0827128**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		\$ 1,566,588	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
2		\$ 150,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

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

2023

Open to Public
Inspection

Name of the organization

Hilton Head Island Recreation

Employer identification number

57-0827128

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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		☐ Yes ☐ No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		☐ Yes ☐ No

Part II Conservation Easements

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).	
☐ Preservation of land for public use (for example, recreation or education)	☐ Preservation of a historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	
a Total number of conservation easements	2a Held at the End of the Tax Year
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year	
4 Number of states where property subject to conservation easement is located	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	☐ Yes ☐ No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	☐ Yes ☐ No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

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.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.	
(i) Revenue included on Form 990, Part VIII, line 1	\$
(ii) Assets included in Form 990, Part X	\$
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items.	
a Revenue included on Form 990, Part VIII, line 1	\$
b Assets included in Form 990, Part X	\$

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 make 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 program
 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.

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

	Amount
1c	
1d	
1e	
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 Term 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:

- (i) Unrelated organizations?
 (ii) Related organizations?

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

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		15,000		15,000
b Buildings		1,897,782		1,897,782
c Leasehold improvements				
d Equipment				
e Other	697,706		1,004,507	-306,801
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				1,605,981

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. (Column (b) must equal Form 990, Part X, line 12, col. (B))		

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. (Column (b) must equal Form 990, Part X, line 13, col. (B))		

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, line 15, col. (B))	

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)	Accrued salaries	44,369
(3)	Accrued Other	33,736
(4)	Due to Other Gov	482
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))		78,587

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 FASB 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	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		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
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	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	

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	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
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	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	

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 XIII Supplemental Information *(continued)*

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SCHEDULE G
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Employer identification number
57-0827128

Hilton Head Island Recreation

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☐ Mail solicitations

b ☐ Internet and email solicitations

c ☐ Phone solicitations

d ☐ In-person solicitations
- e ☐ Solicitation of non-government grants

f ☐ Solicitation of government grants

g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>Special Events</u> (event type)	<u>Heritage Booth</u> (event type)	<u>None</u> (total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	575,720	35,503		611,223
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	575,720	35,503		611,223
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	540,201	4,052		544,253
	10 Direct expense summary. Add lines 4 through 9 in column (d)				544,253
	11 Net income summary. Subtract line 10 from line 3, column (d)				66,970

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ☐ No %	☐ Yes ☐ No %	☐ Yes ☐ No %	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities:

a Is the organization licensed to conduct gaming activities in each of these states?

☐ Yes ☐ No

b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

☐ Yes ☐ No

b If "Yes," explain:

SCHEDULE O
(Form 990)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 Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023**Open to Public
Inspection**

Name of the organization

Hilton Head Island Recreation

Employer identification number

57-0827128

Form 990, Part III, Line 4d - All Other Accomplishments**Community Recreation****Form 990, Part VI, Line 11b - Organization's Process to Review Form 990**

A copy of the 990 is provided to selected Officers of the Board and the Executive Director prior to it being filed. The entire Board will review the return at the next regularly scheduled meeting.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

The Organization regularly and consistently monitors and enforces compliance with its policy.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

The process for determining the compensation for the Executive Director included a review and approval by independent persons, comparability data and contemporaneous substantiation of the deliberation and decision.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

The governing documents are made available to the public upon request.

Form 990, Part IX, Line 24e - Other Expenses**Description**

Tot/Prog Service

Mgt & General

Fundraising

Pickleball Expense

\$

0

\$

63,730

\$

0

Name of the organization

Employer identification number

Hilton Head Island Recreation

57-0827128

Summer day camp

\$	63,458	\$	0	\$	0
----	--------	----	---	----	---

Fitness Program Cla

\$	57,708	\$	0	\$	0
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Supplies-swim pool

\$	56,188	\$	0	\$	0
----	--------	----	---	----	---

Propane

\$	54,968	\$	0	\$	0
----	--------	----	---	----	---

Youth basketball

\$	50,544	\$	0	\$	0
----	--------	----	---	----	---

Grounds maintenance

\$	45,576	\$	0	\$	0
----	--------	----	---	----	---

Computer lease

\$	0	\$	45,110	\$	0
----	---	----	--------	----	---

Football Camp

\$	41,725	\$	0	\$	0
----	--------	----	---	----	---

Parks

\$	39,023	\$	0	\$	0
----	--------	----	---	----	---

Telephone

\$	35,876	\$	0	\$	0
----	--------	----	---	----	---

Repairs-building

\$	34,384	\$	0	\$	0
----	--------	----	---	----	---

Sailing camp

\$	33,486	\$	0	\$	0
----	--------	----	---	----	---

Supplies-janitorial

\$	0	\$	30,990	\$	0
----	---	----	--------	----	---

Karate-Shotokan

Name of the organization

Employer identification number

Hilton Head Island Recreation

57-0827128

\$	28,905	\$	0	\$	0
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After-shool club

\$	25,940	\$	0	\$	0
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Vending Machines - Other

\$	20,966	\$	0	\$	0
----	--------	----	---	----	---

Youth-tennis

\$	18,223	\$	0	\$	0
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Cheerleading camp

\$	16,819	\$	0	\$	0
----	--------	----	---	----	---

Aquatics

\$	16,534	\$	0	\$	0
----	--------	----	---	----	---

Flag football

\$	16,329	\$	0	\$	0
----	--------	----	---	----	---

Exercise Classes - Senior

\$	14,751	\$	0	\$	0
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Senior Trips - Senior Cit

\$	14,579	\$	0	\$	0
----	--------	----	---	----	---

Volleyball-girls camp

\$	13,638	\$	0	\$	0
----	--------	----	---	----	---

Supplies-office

\$	0	\$	11,722	\$	0
----	---	----	--------	----	---

Discovery club

\$	11,183	\$	0	\$	0
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Supplies-general purpose

\$	0	\$	10,542	\$	0
----	---	----	--------	----	---

Fencing

\$	10,526	\$	0	\$	0
----	--------	----	---	----	---

Name of the organization

Employer identification number

Hilton Head Island Recreation

57-0827128

Repairs-swim pool

\$	7,782	\$	0	\$	0
----	-------	----	---	----	---

Community Youth Events -

\$	7,741	\$	0	\$	0
----	-------	----	---	----	---

Share Center Upfitting

\$	7,648	\$	0	\$	0
----	-------	----	---	----	---

Trash removal

\$	7,210	\$	0	\$	0
----	-------	----	---	----	---

Jr Academy Soccer

\$	6,930	\$	0	\$	0
----	-------	----	---	----	---

Fitness Program New

\$	5,773	\$	0	\$	0
----	-------	----	---	----	---

Dues & subscriptions

\$	5,631	\$	0	\$	0
----	-------	----	---	----	---

Copier lease maintenance-

\$	5,078	\$	0	\$	0
----	-------	----	---	----	---

Social Activities - Senio

\$	4,906	\$	0	\$	0
----	-------	----	---	----	---

Loss on fixed assets

\$	0	\$	4,862	\$	0
----	---	----	-------	----	---

Friends Drive

\$	4,667	\$	0	\$	0
----	-------	----	---	----	---

Surf Camp

\$	4,040	\$	0	\$	0
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Adult basketball leagues

\$	3,352	\$	0	\$	0
----	-------	----	---	----	---

Elevator Maintenance

Name of the organization

Employer identification number

Hilton Head Island Recreation

57-0827128

\$	3,026	\$	0	\$	0
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Printing-general

\$	0	\$	2,886	\$	0
----	---	----	-------	----	---

Computer lease-senior pro

\$	2,750	\$	0	\$	0
----	-------	----	---	----	---

Telephone-senior program

\$	2,424	\$	0	\$	0
----	-------	----	---	----	---

Postage & freight

\$	2,169	\$	0	\$	0
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Lacrosse

\$	2,026	\$	0	\$	0
----	-------	----	---	----	---

Adult soccer leagues

\$	1,967	\$	0	\$	0
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Open gym programs

\$	1,742	\$	0	\$	0
----	-------	----	---	----	---

Gator football

\$	1,648	\$	0	\$	0
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Cordillo Building

\$	1,622	\$	0	\$	0
----	-------	----	---	----	---

Fast trackers

\$	1,167	\$	0	\$	0
----	-------	----	---	----	---

Grounds maintenace - Tenn

\$	1,102	\$	0	\$	0
----	-------	----	---	----	---

Leases-office equipment

\$	0	\$	1,036	\$	0
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All Sports Camp - Athleti

\$	1,017	\$	0	\$	0
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Name of the organization

Employer identification number

Hilton Head Island Recreation

57-0827128

Supplies general purpose-

\$	1,010	\$	0	\$	0
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Swim lessons

\$	1,007	\$	0	\$	0
----	-------	----	---	----	---

E-Sports

\$	912	\$	0	\$	0
----	-----	----	---	----	---

Baseball Camp

\$	900	\$	0	\$	0
----	-----	----	---	----	---

Challenge program

\$	630	\$	0	\$	0
----	-----	----	---	----	---

Children & teen activitie

\$	499	\$	0	\$	0
----	-----	----	---	----	---

Postage-senior program

\$	462	\$	0	\$	0
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Theraputic Equipment

\$	454	\$	0	\$	0
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Supplies-office-senior

\$	354	\$	0	\$	0
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Senior Classes & Seminars

\$	310	\$	0	\$	0
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Volleyball Leagues

\$	102	\$	0	\$	0
----	-----	----	---	----	---

Outdoor Recreation Equipm

\$	80	\$	0	\$	0
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Misc Income

\$	50	\$	0	\$	0
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Grounds maintenance - She

Name of the organization

Employer identification number

Hilton Head Island Recreation

57-0827128

\$ -354

\$ 0

\$ 0

Total

\$ 821,163

\$ 170,878

\$ 0

Form 990	Event Income and Deduction Worksheet Description Concessions	2023
Name Hilton Head Island Recreation		Taxpayer Identification Number 57-0827128

Use this worksheet to verify data entered for a specific activity on your form 990/990EZ.

Income & Expense Summary:

1. Gross receipts or sales	1.	5,970
2. Advertising income	2.	
3. Circulation income	3.	
4. Other income	4.	
5. Returns and allowances	5.	
6. Contributions received	6.	
7. Total revenue. Add lines 1 through 6	7.	5,970
8. Cost of Goods Sold	8.	
9. Employment Expense	9.	
10. Fees for services	10.	
11. Indirect Expense	11.	
12. Depreciation Expense	12.	
13. Exempt Activity Expense	13.	
14. Fundraising Expense	14.	
15. Total expenses. Add lines 8 through 14	15.	
16. Net Income/Loss. Line 7 minus Line 15	16.	5,970

Expense Details - Cost of Goods Sold:

Beginning inventory	
Purchases	
Labor	
Section 263A costs	
Other costs	
Ending inventory	
Total Cost of Goods Sold	

Expense Details - Employment Expense:

Compensation of officers	
Other salaries and wages	
Pension plan contributions	
Other employee benefits	
Payroll taxes	
Total Employment Expense	

Expense Details - Fees for Services:

Management	
Legal	
Accounting	
Lobbying	
Professional fundraising	
Investment management	
Other	
Total Fees for Services	

Information is indicated for use on Form 990-T, Schedule A:

Schedule A, UBIT Activity Code	Seq #	
☐ Part V, Debt Financing		
☐ Part VI, Controlled Org Income		
☐ Part VII, Investments for C(7)(9)(17)		
☐ Part VIII, Exploited Activities		
☐ Part IX, Advertising Income		

Expense Details - Indirect Expense:

Advertising and promotion	
Office	
Printing/publication/postage	
Info technology/Maintenance	
Royalties & License Fees	
Occupancy/Real Estate Taxes	
Travel & Repairs	
Travel/entertainment (officials)	
Conferences/meetings	
Interest	
Insurance	
Total Indirect Expense	

Expense Details - Depreciation Expense:

On investment property	
On non-investment property	
Amortization	
Depletion	
Total Depreciation Expense	

Expense Details - Exempt Activity Expense:

Repairs and Maintenance	
Bad debts	
Taxes/licenses	
Charitable contributions	
Dividend recd deductions	
Readership costs	
Other expenses	
Total Exempt Activity Expense	

Expense Details - Fundraising Expense:

Cash prizes	
Non-cash prizes	
Rent and facility costs	
Food & beverages (Part II only)	
Entertainment (Part II only)	
Other direct expenses	
Total Fundraising Expense	

Allocation of Expense to Program Service Accomplishments:

First	
Second	
Third	
All other	

Form 990	Event Income and Deduction Worksheet Description Heritage Booth	2023
Name Hilton Head Island Recreation		Taxpayer Identification Number 57-0827128

Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

Income & Expense Summary:

1. Gross receipts or sales	1.	35,503
2. Advertising income	2.	
3. Circulation income	3.	
4. Other income	4.	
5. Returns and allowances	5.	
6. Contributions received	6.	
7. Total revenue. Add lines 1 through 6	7.	35,503
8. Cost of Goods Sold	8.	
9. Employment Expense	9.	
10. Fees for services	10.	
11. Indirect Expense	11.	
12. Depreciation Expense	12.	
13. Exempt Activity Expense	13.	
14. Fundraising Expense	14.	4,052
15. Total expenses. Add lines 8 through 14	15.	4,052
16. Net Income/Loss. Line 7 minus Line 15	16.	31,451

Expense Details - Cost of Goods Sold:

Beginning inventory	
Purchases	
Labor	
Section 263A costs	
Other costs	
Ending inventory	
Total Cost of Goods Sold	

Expense Details - Employment Expense:

Compensation of officers	
Other salaries and wages	
Pension plan contributions	
Other employee benefits	
Payroll taxes	
Total Employment Expense	

Expense Details - Fees for Services:

Management	
Legal	
Accounting	
Lobbying	
Professional fundraising	
Investment management	
Other	
Total Fees for Services	

Expense Details - Indirect Expense:

Advertising and promotion	
Office	
Printing/publication/postage	
Info technology/Maintenance	
Royalties & License Fees	
Occupancy/Real Estate Taxes	
Travel & Repairs	
Travel/entertainment (officials)	
Conferences/meetings	
Interest	
Insurance	
Total Indirect Expense	

Expense Details - Depreciation Expense:

On investment property	
On non-investment property	
Amortization	
Depletion	
Total Depreciation Expense	

Expense Details - Exempt Activity Expense:

Repairs and Maintenance	
Bad debts	
Taxes/licenses	
Charitable contributions	
Dividend recd deductions	
Readership costs	
Other expenses	
Total Exempt Activity Expense	

Expense Details - Fundraising Expense:

Cash prizes	
Non-cash prizes	
Rent and facility costs	
Food & beverages (Part II only)	
Entertainment (Part II only)	
Other direct expenses	4,052
Total Fundraising Expense	4,052

Information is indicated for use on Form 990-T, Schedule A:

Schedule A, UBIT Activity Code	Seq #
☐ Part V, Debt Financing	
☐ Part VI, Controlled Org Income	
☐ Part VII, Investments for C(7)(9)(17)	
☐ Part VIII, Exploited Activities	
☐ Part IX, Advertising Income	

Allocation of Expense to Program Service Accomplishments:

First	
Second	
Third	
All other	

Form 990	Event Income and Deduction Worksheet Description Special Events	2023
Name Hilton Head Island Recreation		Taxpayer Identification Number 57-0827128

Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

Income & Expense Summary:

1. Gross receipts or sales	1.	575,720
2. Advertising income	2.	
3. Circulation income	3.	
4. Other income	4.	
5. Returns and allowances	5.	
6. Contributions received	6.	
7. Total revenue. Add lines 1 through 6	7.	575,720
8. Cost of Goods Sold	8.	
9. Employment Expense	9.	
10. Fees for services	10.	
11. Indirect Expense	11.	
12. Depreciation Expense	12.	
13. Exempt Activity Expense	13.	
14. Fundraising Expense	14.	540,201
15. Total expenses. Add lines 8 through 14	15.	540,201
16. Net Income/Loss. Line 7 minus Line 15	16.	35,519

Expense Details - Cost of Goods Sold:

Beginning inventory	
Purchases	
Labor	
Section 263A costs	
Other costs	
Ending inventory	
Total Cost of Goods Sold	

Expense Details - Employment Expense:

Compensation of officers	
Other salaries and wages	
Pension plan contributions	
Other employee benefits	
Payroll taxes	
Total Employment Expense	

Expense Details - Fees for Services:

Management	
Legal	
Accounting	
Lobbying	
Professional fundraising	
Investment management	
Other	
Total Fees for Services	

Expense Details - Indirect Expense:

Advertising and promotion	
Office	
Printing/publication/postage	
Info technology/Maintenance	
Royalties & License Fees	
Occupancy/Real Estate Taxes	
Travel & Repairs	
Travel/entertainment (officials)	
Conferences/meetings	
Interest	
Insurance	
Total Indirect Expense	

Expense Details - Depreciation Expense:

On investment property	
On non-investment property	
Amortization	
Depletion	
Total Depreciation Expense	

Expense Details - Exempt Activity Expense:

Repairs and Maintenance	
Bad debts	
Taxes/licenses	
Charitable contributions	
Dividend recd deductions	
Readership costs	
Other expenses	
Total Exempt Activity Expense	

Expense Details - Fundraising Expense:

Cash prizes	
Non-cash prizes	
Rent and facility costs	
Food & beverages (Part II only)	
Entertainment (Part II only)	
Other direct expenses	540,201
Total Fundraising Expense	540,201

Information is indicated for use on Form 990-T, Schedule A:

Schedule A, UBIT Activity Code	Seq #
☐ Part V, Debt Financing	
☐ Part VI, Controlled Org Income	
☐ Part VII, Investments for C(7)(9)(17)	
☐ Part VIII, Exploited Activities	
☐ Part IX, Advertising Income	

Allocation of Expense to Program Service Accomplishments:

First	
Second	
Third	
All other	

Federal Statements

Taxable Interest on Investments

<u>Description</u>		<u>Amount</u>	<u>Unrelated Business</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
Interest from reserve account	\$			14			
Interest		41,552		14			
Total	\$	<u>41,552</u>					

Federal Statements

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
Pickleball Expense	\$ 63,730	\$	\$ 63,730	\$
Summer day camp	63,458	63,458		
Fitness Program Cla	57,708	57,708		
Supplies-swim pool	56,188	56,188		
Propane	54,968	54,968		
Youth basketball	50,544	50,544		
Grounds maintenance	45,576	45,576		
Computer lease	45,110		45,110	
Football Camp	41,725	41,725		
Parks	39,023	39,023		
Telephone	35,876	35,876		
Repairs-building	34,384	34,384		
Sailing camp	33,486	33,486		
Supplies-janitorial	30,990		30,990	
Karate-Shotokan	28,905	28,905		
After-shool club	25,940	25,940		
Vending Machines - Other	20,966	20,966		
Youth-tennis	18,223	18,223		
Cheerleading camp	16,819	16,819		
Aquatics	16,534	16,534		
Flag football	16,329	16,329		
Exercise Classes - Senior	14,751	14,751		
Senior Trips - Senior Cit	14,579	14,579		
Volleyball-girls camp	13,638	13,638		
Supplies-office	11,722		11,722	
Discovery club	11,183	11,183		
Supplies-general purpose	10,542		10,542	
Fencing	10,526	10,526		
Repairs-swim pool	7,782	7,782		
Community Youth Events -	7,741	7,741		
Share Center Upfitting	7,648	7,648		
Trash removal	7,210	7,210		
Jr Academy Soccer	6,930	6,930		
Fitness Program New	5,773	5,773		
Dues & subscriptions	5,631	5,631		
Copier lease maintenance-	5,078	5,078		
Social Activities - Senio	4,906	4,906		

Federal Statements

Form 990, Part IX, Line 24e - All Other Expenses (continued)

Description	Total Expenses	Program Service	Management & General	Fund Raising
Loss on fixed assets	\$ 4,862	\$	\$ 4,862	\$
Friends Drive	4,667	4,667		
Surf Camp	4,040	4,040		
Adult basketball leagues	3,352	3,352		
Elevator Maintenance	3,026	3,026		
Printing-general	2,886		2,886	
Computer lease-senior pro	2,750	2,750		
Telephone-senior program	2,424	2,424		
Postage & freight	2,169	2,169		
Lacrosse	2,026	2,026		
Adult soccer leagues	1,967	1,967		
Open gym programs	1,742	1,742		
Gator football	1,648	1,648		
Cordillo Building	1,622	1,622		
Fast trackers	1,167	1,167		
Grounds maintenace - Tenn	1,102	1,102		
Leases-office equipment	1,036		1,036	
All Sports Camp - Athleti	1,017	1,017		
Supplies general purpose-	1,010	1,010		
Swim lessons	1,007	1,007		
E-Sports	912	912		
Baseball Camp	900	900		
Challenge program	630	630		
Children & teen activitie	499	499		
Postage-senior program	462	462		
Theraputic Equipment	454	454		
Supplies-office-senior	354	354		
Senior Classes & Seminars	310	310		
Volleyball Leagues	102	102		
Outdoor Recreation Equipm	80	80		
Misc Income	50	50		
Grounds maintenance - She	-354	-354		
Total	\$ 992,041	\$ 821,163	\$ 170,878	\$ 0

1520 Hilton Head Island Recreation
57-0827128
FYE: 6/30/2024

Federal Statements

9/20/2024 3:17 PM

Schedule A, Part II, Line 1(e)

Description	Amount
CIP-Town of Hilton Head	\$ 454,351
Town of Hilton Head	952,831
Therapuetic Leader	27,982
Accomodation Tax - Town of HHI	56,802
Gen Fund Reim -Senio	142,953
Friends Drive	81,669
Total	\$ 1,716,588

Schedule A, Part II, Line 8(e)

Description	Amount
Interest from reserve account	\$
Interest	41,552
Unrealized gain(loss)	16,097
Total	\$ 57,649

Schedule A, Part II, Line 9(e)

Description	Amount
Realized gain	\$ 46,096
Less: Deductions	-1,000
Total	\$ 45,096

Schedule A, Part II, Line 12 - Current year

Description	Amount
Flag football	\$ 18,845
Open gym programs	8,235
Miscellaneous income	41,286
Karate-Shotokan	38,673
Outdoor Programs	33,025

Federal Statements

Schedule A, Part II, Line 12 - Current year (continued)

Description	Amount
Cheerleading camp	\$ 20,929
Pickleball income	128,077
Senior trips	11,080
Volleyball-girls camp	22,108
Rental-Shelter Cove	38,920
Gator football	3,955
Senior Center Membership	13,754
Lacrosse	7,182
Adult soccer leagues	10,650
Exercise Classes - Seniors	3,228
Jr Academy Soccer	12,660
Children & teen activities	10,350
Swim team	23,918
Youth basketball	63,702
Swim lessons	26,368
Aquatics	65,771
Football Camp	42,940
Rec swim	103,360
Challenge program	86,827
Beaufort County pool	150,000
Discovery club	44,498
Youth soccer	125,672
After-school club	269,570
Summer day camp	272,945
Vending Machines	37,850
Community Youth Events	12,905
Adult basketball leagues	6,960
Fitness Program New	211,398
Fitness Program Cla	55,225
Therapeutic Recreation	3,710
Fast Trackers	2,720
Classes & Seminars - Senior	5,284
Senior Center Facilities	5,802
E-Sports	1,730
Senior Social Acitivities	7,043
Donations Equipment	40,000
All Sports Camp	10,157
Golf School - Athletic Progra	470

Federal Statements

Schedule A, Part II, Line 12 - Current year (continued)

Description	Amount
Miscellaneous - Senior	\$ 1,240
Sailing camp	74,648
Youth Fitness	1,761
Fencing	7,425
Athletics - Senior	8,810
Concessions	5,970
Heritage Booth	35,503
Special Events	575,720
From CSA Import	
Total	\$ 2,810,859

Heritage Booth

Other Direct Fundraising or Gaming Expenses

<u>Description</u>	<u>Amount</u>
Heritage Booth	\$ 4,052
Total	\$ 4,052

Federal Statements

Special Events

Other Direct Fundraising or Gaming Expenses

<u>Description</u>	<u>Amount</u>
Special Events	\$ 540,201
Total	\$ 540,201

Form **8879-TE****IRS E-file Signature Authorization
for a Tax Exempt Entity**

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service
Name of filerFor calendar year 2023, or fiscal year beginning 7/01, 2023, and ending 6/30 20 24
Do not send to the IRS. Keep for your records.
Go to www.irs.gov/Form8879TE for the latest information.**2023****Hilton Head Island Recreation**EIN or SSN
57-0827128Name and title of officer or person subject to tax **Frank Soule**
Executive Director**Part I Type of Return and Return Information**

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

☒ 1a Form 990 check here	☐ b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	4,086,939
☐ 2a Form 990-EZ check here	☐ b Total revenue, if any (Form 990-EZ, line 9)	2b	
☐ 3a Form 1120-POL check here	☐ b Total tax (Form 1120-POL, line 22)	3b	
☐ 4a Form 990-PF check here	☐ b Tax based on investment income (Form 990-PF, Part V, line 5)	4b	
☐ 5a Form 8868 check here	☐ b Balance due (Form 8868, line 3c)	5b	
☐ 6a Form 990-T check here	☐ b Total tax (Form 990-T, Part III, line 4)	6b	
☐ 7a Form 4720 check here	☐ b Total tax (Form 4720, Part III, line 1)	7b	
☐ 8a Form 5227 check here	☐ b FMV of assets at end of tax year (Form 5227, Item D)	8b	
☐ 9a Form 5330 check here	☐ b Tax due (Form 5330, Part II, line 19)	9b	
☐ 10a Form 8038-CP check here	☐ b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that ☒ I am an officer of the above entity or ☐ I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

☒ I authorize Carey & Company P.A. to enter my PIN 12345 as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax _____

Date _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

57507855555

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature Patrick P. Carey, Jr., CPA

Date _____

ERO Must Retain This Form — See Instructions**Do Not Submit This Form to the IRS Unless Requested To Do So**

For Privacy Act and Paperwork Reduction Act Notice, see back of form.

Form **8879-TE** (2023)

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022**Open to Public Inspection****A For the 2022 calendar year, or tax year beginning 07/01/22, and ending 06/30/23****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☒ Amended return
☐ Application pending

C Name of organization**Hilton Head Island Recreation**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

P.O. Box 22593

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

Hilton Head Island SC 29925**D** Employer identification number**57-0827128****E** Telephone number**843-681-7273****G** Gross receipts \$ **4,203,344****F** Name and address of principal officer:

Steve Stauffer
P.O. Box 22593
Hilton Head Island SC 29925

H(a) Is this a group return for subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: **www.islandreccenter.org****H(c)** Group exemption number**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other**L** Year of formation: **1985****M** State of legal domicile: **SC****Part I Summary**

Activities & Governance	1 Briefly describe the organization's mission or most significant activities:		
	Community Recreation		
	2 Check this box ☐ 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	17
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	17
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	109
	6 Total number of volunteers (estimate if necessary)	6	437
Revenue	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0
	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	1,501,554	1,591,927
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,981,595	2,077,245
Expenses	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-66,125	43,574
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	364,118	46,669
	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	3,781,142	3,759,415
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		0
	16a Professional fundraising fees (Part IX, column (A), line 11e)	1,452,933	1,656,953
	b Total fundraising expenses (Part IX, column (D), line 25)		0
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,872,657	1,740,714
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	3,325,590	3,397,667
	19 Revenue less expenses. Subtract line 18 from line 12	455,552	361,748
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	3,802,830	4,146,434
	22 Net assets or fund balances. Subtract line 21 from line 20	362,997	344,853
		3,439,833	3,801,581

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		Date	
	Frank Soule		Executive Director	
Paid Preparer Use Only	Type or print name and title			
	Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed PTIN
	Patrick P. Carey, Jr., CPA	Patrick P. Carey, Jr., CPA		P00033247
	Firm's name	Firm's EIN		
Carey & Company P.A.		57-0927046		
Firm's address		Phone no.		
70 Main Street, Suite 100		843-681-4430		
Hilton Head Island, SC 29926				

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2022)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission:**Community Recreation****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 ☒ No

If "Yes," describe these new services on Schedule O.

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

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code:) (Expenses \$ **216,161** including grants of \$) (Revenue \$ **193,713**)
Aquatics program**4b** (Code:) (Expenses \$ **697,406** including grants of \$) (Revenue \$ **827,048**)
Athletic Program**4c** (Code:) (Expenses \$ **540,885** including grants of \$) (Revenue \$ **740,840**)
Youth/Teen Programs**4d** Other program services (Describe on Schedule O.)(Expenses \$ **1,517,126** including grants of \$) (Revenue \$ **315,644**)**4e** Total program service expenses **2,971,578**

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)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		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? If "Yes," complete Schedule C, Part II		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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III		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? If "Yes," complete Schedule D, Part I		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? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V		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? If "Yes," complete Schedule D, Part VI	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? If "Yes," complete Schedule D, Part VII		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? If "Yes," complete Schedule D, Part VIII		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? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	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)? If "Yes," complete Schedule D, Part X		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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? If "Yes," complete Schedule F, Parts I and IV		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? If "Yes," complete Schedule F, Parts II and IV		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? If "Yes," complete Schedule F, Parts III and IV		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? If "Yes," complete Schedule G, Part I. See instructions		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? If "Yes," complete Schedule G, Part II	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? If "Yes," complete Schedule I, Parts I and II		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	92	
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	109
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17	

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Hilton Head Island Recreation**57-0827128**Page **6**

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 on 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

	1a	1b	2	3	4	5	6	7a	7b	8a	8b	9	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	17													
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 on Schedule O.														
b Enter the number of voting members included on line 1a, above, who are independent	17													
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, 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 on Schedule O														X

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

	10a	10b	11a	12a	12b	12c	13	14	15a	15b	16a	16b	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?														
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 on 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 on 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 on 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 **SC**

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 on Schedule O)

19 Describe on 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

John Britschge**70 Main Street, Suite 100****Hilton Head Island****SC 29926****843-681-4430**

Form 990 (2022)

Hilton Head Island Recreation**57-0827128**Page **7****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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.
- See the instructions for the order in which to list the persons above.

☐ 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 dotted 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/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(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) Steve Stauffer	0.50									
President	0.00	X		X				0	0	0
(2) Susan Hughson	0.50									
Vice President	0.00	X		X				0	0	0
(3) Ray Craver	0.50									
Secretary	0.00	X		X				0	0	0
(4) John Britschge	0.50									
Treasurer	0.00	X		X				0	0	0
(5) Kate Boardman	0.50									
Board Director	0.00	X						0	0	0
(6) Bubba Gillis	0.50									
Board Director	0.00	X						0	0	0
(7) Mary Hall	0.50									
Board Director	0.00	X						0	0	0
(8) Butch Kisiah	0.50									
Board Director	0.00	X						0	0	0
(9) Keller Kristuck	0.50									
Board Director	0.00	X						0	0	0
(10) Mike Manesiotis	0.50									
Board Director	0.00	X						0	0	0
(11) Keri Olivetti	0.50									
Board Director	0.00	X						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted 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/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(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			
(12) Marty Pauls										
Board Director	0.50 0.00	X						0	0	0
(13) Reid Perry										
Board Director	0.50 0.00	X						0	0	0
(14) Danny Ragland										
Board Director	0.50 0.00	X						0	0	0
(15) Bob Stevens										
Board Director	0.50 0.00	X						0	0	0
(16) Barry Taylor										
Board Director	0.50 0.00	X						0	0	0
(17) Kyle Theodore										
Board Director	0.50 0.00	X						0	0	0
(18) Frank Soule										
Executive Director	40.00 0.00			X				107,232	0	0
1b Subtotal								107,232		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								107,232		

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

0

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Hilton Head Island Recreation**57-0827128**Page **9****Part VIII Statement of Revenue**Check if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	1,367,987				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	223,940				
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f			1,591,927			
Program Service Revenue			Business Code				
	2a After-school club			277,380	277,380		
	b Summer day camp			246,330	246,330		
	c Fitness Program New			180,272	180,272		
	d Beaufort County pool			145,000	145,000		
	e Youth soccer			127,134	127,134		
	f All other program service revenue			1,101,129	1,101,129		
	g Total. Add lines 2a-2f			2,077,245			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			43,574			43,574
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
		6a					
		6b					
	b Less: rental expenses	6b					
	c Rental inc. or (loss)	6c					
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		7a					
		7b					
	b Less: cost or other basis and sales exps.	7b					
	c Gain or (loss)	7c					
	d Net gain or (loss)						
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a	490,598					
	8b	443,929					
c Net income or (loss) from fundraising events			46,669				
9a Gross income from gaming activities. See Part IV, line 19	9a						
	9b						
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	10a						
	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
	11a						
	b						
	c						
	d All other revenue						
e Total. Add lines 11a-11d							
12 Total revenue. See instructions				3,759,415	2,077,245	0	43,574

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Hilton Head Island Recreation**57-0827128**Page **10****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				
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	1,421,904	1,111,261	310,643	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	116,021	116,021		
10 Payroll taxes	119,028	119,028		
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	70,807	70,807		
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 Schedule O.)				
12 Advertising and promotion	55,757	55,757		
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	267,273	267,273		
17 Travel	25,103	3	25,100	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	24,277	24,277		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	162,298	162,298		
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Recreation center cleaning	103,300	103,300		
b Youth soccer	98,154	98,154		
c Rec Center pool	76,959	76,959		
d Summer day camp	63,814	63,814		
e All other expenses	792,972	702,626	90,346	
25 Total functional expenses. Add lines 1 through 24e	3,397,667	2,971,578	426,089	0
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)				

Form 990 (2022)

Hilton Head Island Recreation**57-0827128**Page **11****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	1,764,452	1	1,215,317
	2 Savings and temporary cash investments	529,261	2	1,307,173
	3 Pledges and grants receivable, net	1,500	3	1,484
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	22,754	9	43,441
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,329,316		
	b Less: accumulated depreciation	10b 852,150	10c	1,477,166
	11 Investments—publicly traded securities	95,497	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		15	101,853
16 Total assets. Add lines 1 through 15 (must equal line 33)	3,802,830	16	4,146,434	
Liabilities	17 Accounts payable and accrued expenses	38,867	17	63,501
	18 Grants payable		18	
	19 Deferred revenue	208,475	19	219,718
	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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		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	115,655	25	61,634
	26 Total liabilities. Add lines 17 through 25	362,997	26	344,853
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	3,439,833	27	3,801,581
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	3,439,833	32	3,801,581
33 Total liabilities and net assets/fund balances	3,802,830	33	4,146,434	

Form **990** (2022)

Part XI Reconciliation of Net AssetsCheck 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	3,759,415
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,397,667
3	Revenue less expenses. Subtract line 2 from line 1	3	361,748
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,439,833
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 on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	3,801,581

Part XII Financial Statements and ReportingCheck 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: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on 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: ☐ Separate basis ☐ Consolidated basis ☐ 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: ☐ Separate basis ☐ Consolidated basis ☐ 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 on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		
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 on Schedule O and describe any steps taken to undergo such audits		

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021
Open to Public
Inspection**A** For the 2021 calendar year, or tax year beginning **07/01/21**, and ending **06/30/22****B** Check if applicable:

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization**Hilton Head Island Recreation**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

P.O. Box 22593

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

Hilton Head Island SC 29925**F** Name and address of principal officer:**Mary Hall****c/o P.O. Box 22593****Hilton Head Island SC 29925****D** Employer identification number**57-0827128****E** Telephone number**843-681-7273****G** Gross receipts \$ **3,781,142****H(a)** Is this a group return for subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions.

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: **www.islandreccenter.org****H(c)** Group exemption number ▶**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **1985****M** State of legal domicile: **SC****Part I Summary**

Activities & Governance		Revenue		Expenses		Net Assets or Fund Balances	
1 Briefly describe the organization's mission or most significant activities: Community Recreation							
2 Check this box ☐ 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	16				
4 Number of independent voting members of the governing body (Part VI, line 1b)		4	16				
5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)		5	115				
6 Total number of volunteers (estimate if necessary)		6	448				
7a Total unrelated business revenue from Part VIII, column (C), line 12		7a	0				
b Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0				
8 Contributions and grants (Part VIII, line 1h)		Prior Year	Current Year				
9 Program service revenue (Part VIII, line 2g)		1,387,239	1,501,554				
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,321,761	1,981,595				
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		76,910	-66,125				
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		64,679	364,118				
		2,850,589	3,781,142				
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0				
14 Benefits paid to or for members (Part IX, column (A), line 4)			0				
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,265,676	1,452,933				
16a Professional fundraising fees (Part IX, column (A), line 11e)			0				
b Total fundraising expenses (Part IX, column (D), line 25) ▶		0					
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,474,156	1,872,657				
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,739,832	3,325,590				
19 Revenue less expenses. Subtract line 18 from line 12		110,757	455,552				
20 Total assets (Part X, line 16)		Beginning of Current Year	End of Year				
21 Total liabilities (Part X, line 26)		3,154,741	3,802,830				
22 Net assets or fund balances. Subtract line 21 from line 20		320,414	362,997				
		2,834,327	3,439,833				

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

Date

Frank Soule**Executive Director**

Type or print name and title

Paid

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if PTIN**Patrick P. Carey, Jr., CPA****Patrick P. Carey, Jr., CPA****10/27/22**

self-employed

P00033247**Preparer Use Only**Firm's name ▶ **Carey & Company P.A.**Firm's EIN ▶ **57-0927046**Firm's address ▶ **70 Main Street, Suite 100****Hilton Head Island, SC 29926**Phone no. **843-681-4430**

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2021)

DAA

Part III Statement of Program Service Accomplishments

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



1 Briefly describe the organization's mission:

Community Recreation

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 ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **213,216** including grants of \$) (Revenue \$ **168,629**)**Aquatics program**4b (Code:) (Expenses \$ **618,667** including grants of \$) (Revenue \$ **691,703**)**Athletic Program**4c (Code:) (Expenses \$ **483,235** including grants of \$) (Revenue \$ **819,519**)**Youth/Teen Programs**

4d Other program services (Describe on Schedule O.)

(Expenses \$ **1,618,819** including grants of \$) (Revenue \$ **301,743**)4e Total program service expenses **2,933,937**

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)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		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? If "Yes," complete Schedule C, Part II		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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III		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? If "Yes," complete Schedule D, Part I		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? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V		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? If "Yes," complete Schedule D, Part VI	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? If "Yes," complete Schedule D, Part VII		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? If "Yes," complete Schedule D, Part VIII		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? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	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)? If "Yes," complete Schedule D, Part X		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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? If "Yes," complete Schedule F, Parts I and IV		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? If "Yes," complete Schedule F, Parts II and IV		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? If "Yes," complete Schedule F, Parts III and IV		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? If "Yes," complete Schedule G, Part I. See instructions		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? If "Yes," complete Schedule G, Part II	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? If "Yes," complete Schedule I, Parts I and II		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	69	
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

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

Yes No

2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	115			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	2b				X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a				X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a				X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a				X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b				X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a				X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b				
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8822?	7c				
d	If "Yes," indicate the number of Forms 8822 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h				
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8				
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a				
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a				X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15				X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16				X
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17				

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 on 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

	1a	1b		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 on Schedule O.	16				
b Enter the number of voting members included on line 1a, above, who are independent		16			
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?			2		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?			3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
6 Did the organization have members or stockholders?			6		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?			7a		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?			7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:					
a The governing body?			8a	X	
b Each committee with authority to act on behalf of the governing body?			8b	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 on Schedule O			9		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?	10a		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?	10b		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b Describe on 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	12a	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	X	
13 Did the organization have a written whistleblower policy?	13		X
14 Did the organization have a written document retention and destruction policy?	14	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	15a	X	
b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	15b		X
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?	16a		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?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► **SC**

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 on Schedule O)

19 Describe on 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 ►
Kate Boardman
Hilton Head Island
88 Main Street, Suite A
SC 29926
843-681-7273

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.
- See the instructions for the order in which to list the persons above.

☐ 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 dotted 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/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(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) Mary Hall	0.50									
President	0.00	X		X				0	0	0
(2) Susan Hughson	0.50									
Vice President	0.00	X		X				0	0	0
(3) Steve Stauffer	0.50									
Treasurer	0.00	X		X				0	0	0
(4) John Britschge	0.50									
Secretary	0.00	X		X				0	0	0
(5) Kate Boardman	0.50									
Board Director	0.00	X						0	0	0
(6) John Brighton	0.50									
Board Director	0.00	X						0	0	0
(7) Ray Craver	0.50									
Board Director	0.00	X						0	0	0
(8) Bubba Gillis	0.50									
Board Director	0.00	X						0	0	0
(9) Mike Manesiotis	0.50									
Board Director	0.00	X						0	0	0
(10) Danny Ragland	0.50									
Board Director	0.00	X						0	0	0
(11) Keri Olivetti	0.50									
Board Director	0.00	X						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted 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/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(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			
(12) Marty Pauls	0.50									
Board Director	0.00	X						0	0	0
(13) Alan Perry	0.50									
Board Director	0.00	X						0	0	0
(14) Bob Stevens	0.50									
Board Director	0.00	X						0	0	0
(15) Barry Taylor	0.50									
Board Director	0.00	X						0	0	0
(16) Kyle Theodore	0.50									
Board Director	0.00	X						0	0	0
(17) Frank Soule	40.00									
Executive Director	0.00			X				104,763	0	0
1b Subtotal								104,763		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								104,763		

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	1,293,005				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	208,549				
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f			1,501,554			
Program Service Revenue	2a Summer day camp	Business Code		242,193	242,193		
	b Discovery club state grants			226,512	226,512		
	c After-school club			163,370	163,370		
	d Beaufort County pool			135,000	135,000		
	e Fitness Program New			127,605	127,605		
	f All other program service revenue			1,086,915	1,086,915		
	g Total. Add lines 2a-2f			1,981,595			
	3 Investment income (including dividends, interest, and other similar amounts)			-66,125			-66,125
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
Other Revenue	6a Gross rents	6a	(i) Real (ii) Personal				
	b Less: rental expenses	6b					
	c Rental inc. or (loss)	6c					
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities (ii) Other				
	b Less: cost or other basis and sales exps.	7b					
	c Gain or (loss)	7c					
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a	364,118				
	b Less: direct expenses	8b					
	c Net income or (loss) from fundraising events			364,118			
	9a Gross income from gaming activities. See Part IV, line 19	9a					
	b Less: direct expenses	9b					
	c Net income or (loss) from gaming activities						
	10a Gross sales of inventory, less returns and allowances	10a					
	b Less: cost of goods sold	10b					
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11a	Business Code					
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
	12 Total revenue. See instructions			3,781,142	1,981,595	0	-66,125

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				
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	1,233,284	959,903	273,381	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	111,550	111,550		
10 Payroll taxes	108,099	108,099		
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	65,602	65,602		
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 Schedule O.)				
12 Advertising and promotion	27,629	27,629		
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	214,284	214,284		
17 Travel	31,567	95	31,472	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	24,360	24,360		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	147,641	147,641		
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Special Events	331,311	331,311		
b Recreation center cleaning	109,003	109,003		
c Youth soccer	90,833	90,833		
d Summer day camp	58,930	58,930		
e All other expenses	771,497	684,697	86,800	
25 Total functional expenses. Add lines 1 through 24e	3,325,590	2,933,937	391,653	0
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)				

Form 990 (2021)

Hilton Head Island and Recreation

57-087128

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Part X Balance SheetCheck 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	1,246,948	1	1,764,452
	2 Savings and temporary cash investments	505,711	2	529,261
	3 Pledges and grants receivable, net		3	1,500
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	18,790	9	22,754
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,090,837		
	b Less: accumulated depreciation	10b 701,471		
		1,269,969	10c	1,389,366
	11 Investments—publicly traded securities	113,323	11	95,497
	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		15		
16 Total assets. Add lines 1 through 15 (must equal line 33)	3,154,741	16	3,802,830	
Liabilities	17 Accounts payable and accrued expenses	45,894	17	38,867
	18 Grants payable		18	
	19 Deferred revenue	182,405	19	208,475
	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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		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	92,115	25	115,655
	26 Total liabilities. Add lines 17 through 25	320,414	26	362,997
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	2,834,327	27	3,439,833
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	2,834,327	32	3,439,833
	33 Total liabilities and net assets/fund balances	3,154,741	33	3,802,830

Form 990 (2021)

Part XI Reconciliation of Net AssetsCheck 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	3,781,142
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,325,590
3	Revenue less expenses. Subtract line 2 from line 1	3	455,552
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,834,327
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	149,954
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	3,439,833

Part XII Financial Statements and ReportingCheck 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: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on 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: ☐ Separate basis ☐ Consolidated basis ☐ 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: ☐ Separate basis ☐ Consolidated basis ☐ 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 on Schedule O.		
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?		
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 on Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990)Department of the Treasury
Internal Revenue Service**Public Charity Status and Public Support**

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

▶ **Attach to Form 990 or Form 990-EZ.**▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2021**Open to Public
Inspection**

Name of the organization

Hilton Head Island Recreation

Employer identification number

57-0827128**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

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

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

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

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

Schedule A (Form 990) 2021

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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,282,382	1,589,714	1,639,321	1,387,239	1,501,554	7,400,210
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	1,282,382	1,589,714	1,639,321	1,387,239	1,501,554	7,400,210
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						7,400,210

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	1,282,382	1,589,714	1,639,321	1,387,239	1,501,554	7,400,210
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	19,156	15,686	4,227	34,759	-26,320	47,508
9 Net income from unrelated business activities, whether or not the business is regularly carried on			16,934	41,151		58,085
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						7,505,803
12 Gross receipts from related activities, etc. (see instructions)					12	5,807,169
13 First 5 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

14 Public support percentage for 2021 (line 6, column (f) divided by line 11, column (f))	14	98.59%
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	97.80%
16a 33 1/3% support test—2021. 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 ▶ ☒		
b 33 1/3% support test—2020. 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 ▶ ☐		
17a 10%-facts-and-circumstances test—2021. 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 ▶ ☐		
b 10%-facts-and-circumstances test—2020. 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 ▶ ☐		
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 ▶ ☐		

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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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 on 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 5 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 2021 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2021. 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—2020. 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 box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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? 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.	1	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a	
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b	
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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).	5a	
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?	5b	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8	
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a	
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b	
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c	
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a	
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b	

Part IV Supporting Organizations (continued)

- 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 on lines 11b and 11c below, the governing body of a supported organization?
- b A family member of a person described on line 11a above?
- c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in **Part VI**.

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, 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.

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- 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).

	Yes	No
1		

Section D. All Type III Supporting Organizations

- 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 on line 2, above, 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.

	Yes	No
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a ☐ The organization satisfied the Activities Test. Complete line 2 below.
- b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.
- c ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions).

2 Activities Test. Answer lines 2a and 2b 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 on line 2a, above, 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.

	Yes	No
2a		
2b		

3 Parent of Supported Organizations. Answer lines 3a and 3b 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? If "Yes" or "No," 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.

3a		
3b		

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 (<i>explain in detail in Part VI</i>):		
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 0.015 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 0.035.	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 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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—provide details in Part VI)		
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 2021 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-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, 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 2021 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

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, Line 10 - Other Income Detail

Net income from fundraising \$ 0

**Schedule B
(Form 990)**Department of the Treasury
Internal Revenue Service**Schedule of Contributors**▶ Attach to Form 990 or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Name of the organization

Hilton Head Island Recreation

Employer identification number

57-0827128

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 foundationCheck 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 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), 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), 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).

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

Schedule B (Form 990) (2021)

Name of organization

Hilton Head Island Recreation

Employer identification number

57-0827128

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		\$ 1,366,554	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
2		\$ 135,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

**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

2021Open to Public
Inspection

Name of the organization

Hilton Head Island Recreation

Employer identification number

57-0827128**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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		☐ Yes ☐ No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		☐ Yes ☐ No

Part II Conservation Easements.

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a historically important land area

☐ Protection of natural habitat ☐ Preservation of a certified historic structure

☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$

(ii) Assets included in Form 990, Part X ▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X ▶ \$

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 make 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 program
 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 Term 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:

- (i) Unrelated organizations
 (ii) Related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐

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		15,000		15,000
b Buildings		1,513,176		1,513,176
c Leasehold improvements				
d Equipment				
e Other	562,661		701,471	-138,810
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,389,366

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. (Column (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. (Column (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) Accrued salaries	72,779
(3) Accrued Other	24,161
(4) Payroll Taxes Payable	15,165
(5) Smith Barney plan	3,418
(6) Due to Other Gov	132
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

115,655

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 FASB 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	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		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
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	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	

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	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
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	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	

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 XIII **Supplemental Information** *(continued)*

**SCHEDULE G
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021Open to Public
Inspection

Name of the organization

Hilton Head Island Recreation

Employer identification number

57-0827128**Part I Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a ☐ Mail solicitationse ☐ Solicitation of non-government grantsb ☐ Internet and email solicitationsf ☐ Solicitation of government grantsc ☐ Phone solicitationsg ☐ Special fundraising eventsd ☐ In-person solicitations2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		Special Events (event type)	(event type)	None (total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	362,568			362,568
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	362,568			362,568
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				
11 Net income summary. Subtract line 10 from line 3, column (d)				362,568	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ☐ No %	☐ Yes ☐ No %	☐ Yes ☐ No %	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities:

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain:

- 11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13 Indicate the percentage of gaming activity conducted in:
- | | | |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$
- c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**SCHEDULE O
(Form 990)**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 Form 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021**Open to Public
Inspection**

Name of the organization

Hilton Head Island Recreation

Employer identification number

57-0827128

Form 990, Part III, Line 4d - All Other Accomplishments**Community Recreation****Form 990, Part VI, Line 11b - Organization's Process to Review Form 990**

A copy of the 990 is provided to selected Officers of the Board and the Executive Director prior to it being filed. The entire Board will review the return at the next regularly scheduled meeting.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

The Organization regularly and consistently monitors and enforces compliance with its policy.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

The process for determining the compensation for the Executive Director included a review and approval by independent persons, comparability data and contemporaneous substantiation of the deliberation and decision.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

The governing documents are made available to the public upon request.

Form 990, Part IX, Line 24e - Other Expenses**Description**

Tot/Prog Service

Mgt & General

Fundraising

Island Recreation facilit

\$ 48,242

\$ 0

\$ 0

Name of the organization

Employer identification number

Hilton Head Island Recreation

57-0827128

Football Camp

\$	43,765	\$	0	\$	0
----	--------	----	---	----	---

Grounds maintenance

\$	39,141	\$	0	\$	0
----	--------	----	---	----	---

Supplies-janitorial

\$	0	\$	37,414	\$	0
----	---	----	--------	----	---

Propane

\$	34,512	\$	0	\$	0
----	--------	----	---	----	---

Fitness Program Cla

\$	33,102	\$	0	\$	0
----	--------	----	---	----	---

Karate-Shotokan

\$	32,756	\$	0	\$	0
----	--------	----	---	----	---

Youth basketball

\$	32,306	\$	0	\$	0
----	--------	----	---	----	---

Supplies-swim pool

\$	30,656	\$	0	\$	0
----	--------	----	---	----	---

Telephone

\$	28,553	\$	0	\$	0
----	--------	----	---	----	---

Youth-tennis

\$	27,296	\$	0	\$	0
----	--------	----	---	----	---

Jr Academy Soccer

\$	23,608	\$	0	\$	0
----	--------	----	---	----	---

Volleyball-girls camp

\$	21,134	\$	0	\$	0
----	--------	----	---	----	---

After-shool club

\$	20,467	\$	0	\$	0
----	--------	----	---	----	---

Aquatics

Name of the organization

Employer identification number

Hilton Head Island Recreation

57-0827128

\$	19,815	\$	0	\$	0
----	--------	----	---	----	---

Community Youth Events

\$	19,806	\$	0	\$	0
----	--------	----	---	----	---

Sailing camp

\$	15,162	\$	0	\$	0
----	--------	----	---	----	---

Parks

\$	15,125	\$	0	\$	0
----	--------	----	---	----	---

Supplies-office

\$	0	\$	12,480	\$	0
----	---	----	--------	----	---

Repairs-building

\$	11,909	\$	0	\$	0
----	--------	----	---	----	---

Exercise Class

\$	11,810	\$	0	\$	0
----	--------	----	---	----	---

Insurance (General)-senio

\$	11,771	\$	0	\$	0
----	--------	----	---	----	---

Rec Center pool

\$	11,704	\$	0	\$	0
----	--------	----	---	----	---

Discovery club

\$	11,257	\$	0	\$	0
----	--------	----	---	----	---

Cheerleading camp

\$	10,995	\$	0	\$	0
----	--------	----	---	----	---

Pickleball Expense

\$	0	\$	10,576	\$	0
----	---	----	--------	----	---

Supplies-general purpose

\$	0	\$	8,756	\$	0
----	---	----	-------	----	---

Senior Trips

\$	8,585	\$	0	\$	0
----	-------	----	---	----	---

Name of the organization

Employer identification number

Hilton Head Island Recreation

57-0827128

Computer lease

\$	0	\$	8,323	\$	0
----	---	----	-------	----	---

Flag football

\$	8,307	\$	0	\$	0
----	-------	----	---	----	---

Fitness Program New

\$	7,697	\$	0	\$	0
----	-------	----	---	----	---

Senior Citizen

\$	7,686	\$	0	\$	0
----	-------	----	---	----	---

Vending Machines

\$	7,528	\$	0	\$	0
----	-------	----	---	----	---

Surf Camp

\$	7,292	\$	0	\$	0
----	-------	----	---	----	---

Dues & subscriptions

\$	7,075	\$	0	\$	0
----	-------	----	---	----	---

Share Center Upfitting

\$	6,223	\$	0	\$	0
----	-------	----	---	----	---

Leases-office equipment

\$	0	\$	6,039	\$	0
----	---	----	-------	----	---

Elevator Maintenance

\$	5,690	\$	0	\$	0
----	-------	----	---	----	---

Gym Floor

\$	5,490	\$	0	\$	0
----	-------	----	---	----	---

Challenge program

\$	4,808	\$	0	\$	0
----	-------	----	---	----	---

Repairs-swim pool

\$	4,740	\$	0	\$	0
----	-------	----	---	----	---

Lacrosse

Name of the organization

Employer identification number

Hilton Head Island Recreation

57-0827128

\$	4,692	\$	0	\$	0
----	-------	----	---	----	---

Trash removal

\$	4,649	\$	0	\$	0
----	-------	----	---	----	---

Soccer Camp

\$	3,668	\$	0	\$	0
----	-------	----	---	----	---

Telephone-senior program

\$	3,446	\$	0	\$	0
----	-------	----	---	----	---

Printing-general

\$	0	\$	3,212	\$	0
----	---	----	-------	----	---

Postage & freight

\$	2,903	\$	0	\$	0
----	-------	----	---	----	---

Fencing

\$	2,569	\$	0	\$	0
----	-------	----	---	----	---

Friends Drive

\$	2,535	\$	0	\$	0
----	-------	----	---	----	---

Youth Fitness

\$	2,475	\$	0	\$	0
----	-------	----	---	----	---

Senior Classes & Seminars

\$	2,367	\$	0	\$	0
----	-------	----	---	----	---

Park Rental Agreement

\$	2,300	\$	0	\$	0
----	-------	----	---	----	---

Copier lease maintenance-

\$	2,206	\$	0	\$	0
----	-------	----	---	----	---

Computer lease-senior pro

\$	2,149	\$	0	\$	0
----	-------	----	---	----	---

Adult soccer leagues

\$	1,947	\$	0	\$	0
----	-------	----	---	----	---

Name of the organization

Employer identification number

Hilton Head Island Recreation

57-0827128

Other Expense

\$	1,443	\$	0	\$	0
----	-------	----	---	----	---

Open gym programs

\$	1,215	\$	0	\$	0
----	-------	----	---	----	---

Printing - newsletters

\$	1,200	\$	0	\$	0
----	-------	----	---	----	---

Community Foundation Expe

\$	1,150	\$	0	\$	0
----	-------	----	---	----	---

Gator football

\$	970	\$	0	\$	0
----	-----	----	---	----	---

Children & teen activitie

\$	789	\$	0	\$	0
----	-----	----	---	----	---

E-Sports

\$	771	\$	0	\$	0
----	-----	----	---	----	---

Swim lessons

\$	666	\$	0	\$	0
----	-----	----	---	----	---

Cordillo Building

\$	649	\$	0	\$	0
----	-----	----	---	----	---

Roller Hockey

\$	575	\$	0	\$	0
----	-----	----	---	----	---

Supplies Office

\$	545	\$	0	\$	0
----	-----	----	---	----	---

Grounds maintenance - She

\$	335	\$	0	\$	0
----	-----	----	---	----	---

Supplies general purpose-

\$	250	\$	0	\$	0
----	-----	----	---	----	---

Printing gen - senior

Name of the organization

Employer identification number

Hilton Head Island Recreation

57-0827128

\$ 170 \$ 0 \$ 0

Program Utilitiy Vehicle

\$ 50 \$ 0 \$ 0

Total

\$ 684,697 \$ 86,800 \$ 0

Form **990****Event Income and Deduction Worksheet****2021**Description **Concessions**Name
Hilton Head Island RecreationTaxpayer Identification Number
57-0827128

Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

Income & Expense Summary:

1. Gross receipts or sales	1.	3,136
2. Advertising income	2.	
3. Circulation income	3.	
4. Other income	4.	
5. Returns and allowances	5.	
6. Contributions received	6.	
7. Total revenue. Add lines 1 through 6	7.	3,136
8. Cost of Goods Sold	8.	
9. Employment Expense	9.	
10. Fees for services	10.	
11. Indirect Expense	11.	
12. Depreciation Expense	12.	
13. Exempt Activity Expense	13.	
14. Fundraising Expense	14.	
15. Total expenses. Add lines 8 through 14	15.	
16. Net Income/Loss. Line 7 minus Line 15	16.	3,136

Expense Details - Cost of Goods Sold:

Beginning inventory	
Purchases	
Labor	
Section 263A costs	
Other costs	
Ending inventory	
Total Cost of Goods Sold	

Expense Details - Employment Expense:

Compensation of officers	
Other salaries and wages	
Pension plan contributions	
Other employee benefits	
Payroll taxes	
Total Employment Expense	

Expense Details - Fees for Services:

Management	
Legal	
Accounting	
Lobbying	
Professional fundraising	
Investment management	
Other	
Total Fees for Services	

Expense Details - Indirect Expense:

Advertising and promotion	
Office	
Printing/publication/postage	
Info technology/Maintenance	
Royalties & License Fees	
Occupancy/Real Estate Taxes	
Travel & Repairs	
Travel/entertainment (officials)	
Conferences/meetings	
Interest	
Insurance	
Total Indirect Expense	

Expense Details - Depreciation Expense:

On investment property	
On non-investment property	
Amortization	
Depletion	
Total Depreciation Expense	

Expense Details - Exempt Activity Expense:

Repairs and Maintenance	
Bad debts	
Taxes/licenses	
Charitable contributions	
Dividend recd deductions	
Readership costs	
Other expenses	
Total Exempt Activity Expense	

Expense Details - Fundraising Expense:

Cash prizes	
Non-cash prizes	
Rent and facility costs	
Food & beverages (Part II only)	
Entertainment (Part II only)	
Other direct expenses	
Total Fundraising Expense	

Information is indicated for use on Form 990-T, Schedule A:

Schedule A, UBIT Activity Code _____ Seq # _____

- ☐ Part V, Debt Financing
- ☐ Part VI, Controlled Org Income
- ☐ Part VII, Investments for C(7)(9)(17)
- ☐ Part VIII, Exploited Activities
- ☐ Part IX, Advertising Income

Allocation of Expense to Program Service Accomplishments:

First	
Second	
Third	
All other	

Form **990****Event Income and Deduction Worksheet****2021**Description **Heritage Booth**Name
Hilton Head Island RecreationTaxpayer Identification Number
57-0827128

Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

Income & Expense Summary:

1. Gross receipts or sales	1.	1,550
2. Advertising income	2.	
3. Circulation income	3.	
4. Other income	4.	
5. Returns and allowances	5.	
6. Contributions received	6.	
7. Total revenue. Add lines 1 through 6	7.	1,550
8. Cost of Goods Sold	8.	
9. Employment Expense	9.	
10. Fees for services	10.	
11. Indirect Expense	11.	
12. Depreciation Expense	12.	
13. Exempt Activity Expense	13.	
14. Fundraising Expense	14.	
15. Total expenses. Add lines 8 through 14	15.	
16. Net Income/Loss. Line 7 minus Line 15	16.	1,550

Expense Details - Cost of Goods Sold:

Beginning inventory	
Purchases	
Labor	
Section 263A costs	
Other costs	
Ending inventory	
Total Cost of Goods Sold	

Expense Details - Employment Expense:

Compensation of officers	
Other salaries and wages	
Pension plan contributions	
Other employee benefits	
Payroll taxes	
Total Employment Expense	

Expense Details - Fees for Services:

Management	
Legal	
Accounting	
Lobbying	
Professional fundraising	
Investment management	
Other	
Total Fees for Services	

Information is indicated for use on Form 990-T, Schedule A:

Schedule A, UBIT Activity Code _____ Seq # _____

- ☐ Part V, Debt Financing
☐ Part VI, Controlled Org Income
☐ Part VII, Investments for C(7)(9)(17)
☐ Part VIII, Exploited Activities
☐ Part IX, Advertising Income

Expense Details - Indirect Expense:

Advertising and promotion	
Office	
Printing/publication/postage	
Info technology/Maintenance	
Royalties & License Fees	
Occupancy/Real Estate Taxes	
Travel & Repairs	
Travel/entertainment (officials)	
Conferences/meetings	
Interest	
Insurance	
Total Indirect Expense	

Expense Details - Depreciation Expense:

On investment property	
On non-investment property	
Amortization	
Depletion	
Total Depreciation Expense	

Expense Details - Exempt Activity Expense:

Repairs and Maintenance	
Bad debts	
Taxes/licenses	
Charitable contributions	
Dividend recd deductions	
Readership costs	
Other expenses	
Total Exempt Activity Expense	

Expense Details - Fundraising Expense:

Cash prizes	
Non-cash prizes	
Rent and facility costs	
Food & beverages (Part II only)	
Entertainment (Part II only)	
Other direct expenses	
Total Fundraising Expense	

Allocation of Expense to Program Service Accomplishments:

First	
Second	
Third	
All other	

Form **990****Event Income and Deduction Worksheet****2021**Description **Special Events**

Name

Hilton Head Island Recreation

Taxpayer Identification Number

57-0827128

Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

Income & Expense Summary:

1. Gross receipts or sales	1.	362,568
2. Advertising income	2.	
3. Circulation income	3.	
4. Other income	4.	
5. Returns and allowances	5.	
6. Contributions received	6.	
7. Total revenue. Add lines 1 through 6	7.	362,568
8. Cost of Goods Sold	8.	
9. Employment Expense	9.	
10. Fees for services	10.	
11. Indirect Expense	11.	
12. Depreciation Expense	12.	
13. Exempt Activity Expense	13.	
14. Fundraising Expense	14.	
15. Total expenses. Add lines 8 through 14	15.	
16. Net Income/Loss. Line 7 minus Line 15	16.	362,568

Expense Details - Cost of Goods Sold:

Beginning inventory	
Purchases	
Labor	
Section 263A costs	
Other costs	
Ending inventory	
Total Cost of Goods Sold	

Expense Details - Employment Expense:

Compensation of officers	
Other salaries and wages	
Pension plan contributions	
Other employee benefits	
Payroll taxes	
Total Employment Expense	

Expense Details - Fees for Services:

Management	
Legal	
Accounting	
Lobbying	
Professional fundraising	
Investment management	
Other	
Total Fees for Services	

Information is indicated for use on Form 990-T, Schedule A:

Schedule A, UBIT Activity Code _____ Seq # _____

- ☐ Part V, Debt Financing
☐ Part VI, Controlled Org Income
☐ Part VII, Investments for C(7)(9)(17)
☐ Part VIII, Exploited Activities
☐ Part IX, Advertising Income

Expense Details - Indirect Expense:

Advertising and promotion	
Office	
Printing/publication/postage	
Info technology/Maintenance	
Royalties & License Fees	
Occupancy/Real Estate Taxes	
Travel & Repairs	
Travel/entertainment (officials)	
Conferences/meetings	
Interest	
Insurance	
Total Indirect Expense	

Expense Details - Depreciation Expense:

On investment property	
On non-investment property	
Amortization	
Depletion	
Total Depreciation Expense	

Expense Details - Exempt Activity Expense:

Repairs and Maintenance	
Bad debts	
Taxes/licenses	
Charitable contributions	
Dividend recd deductions	
Readership costs	
Other expenses	
Total Exempt Activity Expense	

Expense Details - Fundraising Expense:

Cash prizes	
Non-cash prizes	
Rent and facility costs	
Food & beverages (Part II only)	
Entertainment (Part II only)	
Other direct expenses	
Total Fundraising Expense	

Allocation of Expense to Program Service Accomplishments:

First	
Second	
Third	
All other	

Federal Statements

Taxable Interest on Investments

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
Interest from reserve account	\$		14			
Interest	2,045		14			
Total	<u>\$ 2,045</u>					

Federal Statements

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Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
Island Recreation facilit	\$ 48,242	\$ 48,242		\$
Football Camp	43,765	43,765		
Grounds maintenance	39,141	39,141		
Supplies-janitorial	37,414		37,414	
Propane	34,512	34,512		
Fitness Program Cla	33,102	33,102		
Karate-Shotokan	32,756	32,756		
Youth basketball	32,306	32,306		
Supplies-swim pool	30,656	30,656		
Telephone	28,553	28,553		
Youth-tennis	27,296	27,296		
Jr Academy Soccer	23,608	23,608		
Volleyball-girls camp	21,134	21,134		
After-shool club	20,467	20,467		
Aquatics	19,815	19,815		
Community Youth Events	19,806	19,806		
Sailing camp	15,162	15,162		
Parks	15,125	15,125		
Supplies-office	12,480		12,480	
Repairs-building	11,909	11,909		
Exercise Class	11,810	11,810		
Insurance (General)-senio	11,771	11,771		
Rec Center pool	11,704	11,704		
Discovery club	11,257	11,257		
Cheerleading camp	10,995	10,995		
Pickleball Expense	10,576		10,576	
Supplies-general purpose	8,756		8,756	
Senior Trips	8,585	8,585		
Computer lease	8,323		8,323	
Flag football	8,307	8,307		
Fitness Program New	7,697	7,697		
Senior Citizen	7,686	7,686		
Vending Machines	7,528	7,528		
Surf Camp	7,292	7,292		
Dues & subscriptions	7,075	7,075		
Share Center Upfitting	6,223	6,223		
Leases-office equipment	6,039		6,039	

Federal Statements

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Form 990, Part IX, Line 24e - All Other Expenses (continued)

Description	Total Expenses	Program Service	Management & General	Fund Raising
Elevator Maintenance	\$ 5,690	\$ 5,690	\$	\$
Gym Floor	5,490	5,490		
Challenge program	4,808	4,808		
Repairs-swim pool	4,740	4,740		
Lacrosse	4,692	4,692		
Trash removal	4,649	4,649		
Soccer Camp	3,668	3,668		
Telephone-senior program	3,446	3,446		
Printing-general	3,212		3,212	
Postage & freight	2,903	2,903		
Fencing	2,569	2,569		
Friends Drive	2,535	2,535		
Youth Fitness	2,475	2,475		
Senior Classes & Seminars	2,367	2,367		
Park Rental Agreement	2,300	2,300		
Copier lease maintenance-	2,206	2,206		
Computer lease-senior pro	2,149	2,149		
Adult soccer leagues	1,947	1,947		
Other Expense	1,443	1,443		
Open gym programs	1,215	1,215		
Printing - newsletters	1,200	1,200		
Community Foundation Expe	1,150	1,150		
Gator football	970	970		
Children & teen activitie	789	789		
E-Sports	771	771		
Swim lessons	666	666		
Cordillo Building	649	649		
Roller Hockey	575	575		
Supplies Office	545	545		
Grounds maintenance - She	335	335		
Supplies general purpose-	250	250		
Printing gen - senior	170	170		
Program Utilitiy Vehicle	50	50		
Total	\$ 771,497	\$ 684,697	\$ 86,800	\$ 0

1520 Hilton Head Island Recreation
57-0827128
FYE: 6/30/2022

Federal Statements

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Schedule A, Part II, Line 1(e)

Description	Amount
CIP-Town of Hilton Head	\$ 341,362
Town of Hilton Head	926,643
Therapeutic Leader	25,000
Gen Fund Reim -Senio	135,935
Friends Drive	72,614
Total	\$ 1,501,554

Schedule A, Part II, Line 8(e)

Description	Amount
Interest from reserve account	\$
Interest	2,045
Unrealized gain(loss)	-28,365
Total	\$ -26,320

Schedule A, Part II, Line 9(e)

Description	Amount
Realized gain	\$ -39,805
Less: Deductions	-1,000
Total	\$ -40,805

Schedule A, Part II, Line 12 - Current year

Description	Amount
Flag football	\$ 11,364
Open gym programs	22,847
Miscellaneous income	3,091
Karate-Shotokan	43,630
Outdoor Programs	36,021
Cheerleading camp	10,714

Federal Statements

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Schedule A, Part II, Line 12 - Current year (continued)

Description	Amount
Pickleball income	\$ 33,438
Senior trips	1,699
Volleyball-girls camp	33,181
Rental-Shelter Cove	30,035
Gator football	530
Senior Center Membership	10,618
Lacrosse	5,571
Adult soccer leagues	14,580
Exercise Classes - Seniors	2,042
Jr Academy Soccer	45,765
Children & teen activities	1,976
Swim team	21,155
Youth Fitness	2,330
Youth basketball	60,240
Swim lessons	26,117
Aquatics	38,260
Football Camp	46,108
Rec swim	83,098
Challenge program	124,335
Beaufort County pool	135,000
Discovery club	57,187
Youth soccer	110,425
After-school club	163,370
Summer day camp	242,193
Vending Machines	14,034
Community Youth Events	75,529
Adult basketball leagues	3,243
Fitness Program New	127,605
Fitness Program Cla	30,786
Therapeutic Recreation	3,946
Miscellaneous - Senior	90
Fast Trackers	75
Classes & Seminars - Senior	12,754
Senior Center Facilities	7,840
Town of HHI Other Reimburseme	87
Youth tennis	47,313
E-Sports	450
Fencing	5,489

1520 Hilton Head Island Recreation
57-0827128
FYE: 6/30/2022

Federal Statements

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Schedule A, Part II, Line 12 - Current year (continued)

Description	Amount
Senior Social Acitivities	\$ 5,786
Discovery club state grants	226,512
Concessions	3,136
Heritage Booth	1,550
Special Events	362,568
From CSA Import	
Total	\$ 2,345,713

57-0827128

Federal Statements

FYE: 6/30/2022

Concessions**Other Direct Fundraising or Gaming Expenses**

<u>Description</u>	<u>Amount</u>
Heritage Booth	\$
Total	\$ 0

Federal Statements**Heritage Booth****Other Direct Fundraising or Gaming Expenses**

<u>Description</u>	<u>Amount</u>
Heritage Booth	\$
Heritage -senior	
Total	\$ 0