			** PUBLIC DISCLOSURE COPY	* *					
	Ω	00	Return of Organization Exempt From	n Income Tax	OMB No. 1545-0047				
For	m Y	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code	(except private foundations	2015				
Depa	rtment	of the Treasury	Do not enter social security numbers on this form as it m	ay be made public.	Open to Public				
		enue Service	Information about Form 990 and its instructions is at www.	w.irs.gov/form990.	Inspection				
AI	or th	1	lar year, or tax year beginning and ending						
Ba	Check if		forganization	D Employer identificat	tion number				
_	⊐Addr		Brothers Big Sisters of						
	chan		a Bay, Inc.	****	*3085				
	chan Initial returr		usiness as r and street (or P.O. box if mail is not delivered to street address) Room/s		5005				
		711	S. Dale Mabry HWY 300		59-3600				
	termi ated	n	own, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	6,090,824.				
	Amer	ided Tamp	a, FL 33609	H(a) Is this a group retu					
	Appli tion	^{ca-} F Name a	nd address of principal officer: Stephen A. Koch	for subordinates?					
	pend	^{ing} same	as C above	H(b) Are all subordinates inclu					
		empt status:		527 If "No," attach a lis	t. (see instructions)				
			bbbstampabay.org	H(c) Group exemption r					
				Year of formation: 1964 M S	tate of legal domicile: ${f FL}$				
Pa	art I								
ø	1	Briefly describ	be the organization's mission or most significant activities: Provide	children facing	J				
anc			ty with strong relationships that bet						
ern	2	3 Number of voting members of the governing body (Part VI, line 1a) 3 4 Number of independent voting members of the governing body (Part VI, line 1b) 4							
Š	3								
م	4								
ties	5		of individuals employed in calendar year 2015 (Part V, line 2a)		113				
Activities & Governance	6		of volunteers (estimate if necessary)		2990				
Ac			d business revenue from Part VIII, column (C), line 12		0.				
	d b	Net unrelated	business taxable income from Form 990-T, line 34						
		Contributions	and grants (Part VIII, line 1h)	Prior Year 3,249,000.	Current Year 4,191,464.				
Revenue	8			0.	0.				
evel	10	•	come (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4, and 7d)	156.	-10,066.				
ň	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-98,816.	1,432,856.				
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,150,340.	5,614,254.				
	13		milar amounts paid (Part IX, column (A), lines 1-3)	0.	0.				
	14		to or for members (Part IX, column (A), line 4)	0.	0.				
ş				2,114,146.	3,995,777.				
Expenses	16a	Professional fu	r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) 763,615.	0.	0.				
épe	b	Total fundraisi	ing expenses (Part IX, column (D), line 25) F 763, 615.						
ŵ	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)	817,887.	1,308,960.				
	18	Total expense	es. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,932,033.	5,304,737.				
	19	Revenue less	expenses. Subtract line 18 from line 12	218,307.	309,517.				
Net Assets or Fund Balances				Beginning of Current Year	End of Year				
sset	20	Total assets (F	Part X, line 16)	882,690.	2,462,286.				
at As	21		s (Part X, line 26)	55,653.	303,188.				
			fund balances. Subtract line 21 from line 20	827,037.	2,159,098.				
	art II	.							
			I declare that I have examined this return, including accompanying schedules and st		nowledge and belief, it is				
true	, corre	cī, and complete.	. Declaration of preparer (other than officer) is based on all information of which prep	barer nas any knowledge.					
		1		1					

Sign Here	Signature of officer Stephen A. Koch, President & CEO Type or print name and title	Date								
	Print/Type preparer's name Nancy M. Ridenour Firm's name ► PDR Certified Public Accountants	Date Check PTIN 04/11/16 if self-employed ₽00232551 Firm's FIN **-***7531								
Preparer		Firm's EIN ** - *** 7531								
Use Only	Firm's address 29750 U.S. HWY 19 N. #101 CLEARWATER, FL 33761-1510	Phone no. 727 - 785 - 4447								
May the II	May the IRS discuss this return with the preparer shown above? (see instructions)									

532001 12-16-15 LHA For Paperwork Reduction Act Notice, see the separate instructions.

	Big Brothers Big Sisters of
	1990 (2015) Tampa Bay, Inc. **-**3085 Page 2
Pa	rt 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:
	To provide children facing adversity with strong and enduring,
	professionally supported one-to-one relationships that change their lives for the better, forever.
	Tives for the better, forever.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	•
2	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
3	
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
4	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
4a	revenue, if any, for each program service reported. (Code:) (Expenses \$ 4,133,861. including grants of \$) (Revenue \$
чa	(Code:) (Expenses \$ 4,133,861. including grants of \$) (Revenue \$] In 2015, 97% of the matched children graduated or were promoted to the
	next grade level. 96% of the matched children maintained or improved
	their academic performance. 99% of children matched in the program had
	no involvement with DJJ and 96% of the children had no involvement in
	DJJ after one year of not being in the program. 88% of matched children
	maintained or improved in attendance. 93% of matched children improved
	in classroom behavior. In 2015, 70% of the matched children maintained
	or improved in the area of social acceptance. 70% maintained or
	improved in the area of scholastic competency. 80% maintained or
	improved in the area of educational expectations. 75% maintained or
	improved in the area of risky behaviors.
4b	(Code:) (Expenses \$
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 4,133,861.

Big Brothers Big Sisters ofForm 990 (2015)Tampa Bay, Inc.Part IVChecklist of Required Schedules

-*3085	Page 3
------------	--------

		_	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	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			37
_	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		v
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			v
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete Schedule D, Part III</i>	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		v	
	Part VI	11a	X	<u> </u>
d	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total		х	
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	<u>л</u>	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VIII</i>	110		x
h	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	11c		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
۵	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
-	Schedule D, Parts XI and XII	12a	х	
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	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		v	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			x
	complete Schedule G, Part III	19	000	

Big Brothers Big Sisters of

Part M Checklist of Required Schedules (continued) 20a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H 20a Xes No 21b Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule I, Pars I and II 20b X 20b Did the organization report more than \$5,000 of grants or other assistance to a ray domestic organization or or domestic organization or export more than \$5,000 or grants or other assistance to a ray domestic organization area 21 X 21 Did the organization report more than \$5,000 or grants or other assistance to a ray domestic organization scurrent and former officers, directors, trustees, key employees, and highest componested omployees? If "Yes," complete Schedule I, Pars I and III 22 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 off the year, it due as uptaneous any tomesets of tax-exempt bonds sue with an outstanding principal amount of more than \$100.000 as of the schedule I, Pars I and III 24a X 24a Did the organization maintain an escrew account other than a refunding serrow at any time during the year? 24a X 24b Did the organization aware that I engaged in an excress benefit transaction with a disqualified person II a prior year. The schedule I, Part I 26c X <		990 (2015) Tampa Bay, Inc. **-***	3085	Р	age 4
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X bit H* "Yes" to line 20a, did the organization statach a copy of its audited financial statements to this return? 20b X 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or of onesetic dividuals on repart X, column (A), line 21 If "Yes," complete Schedule I, Parts I and II 21 X 21 X 22 X 22 X 22 X 23 Did the organization neever than \$5,000 or grants or other assistance to or of onesetic individuals on repart X, column (A), line 21 If "Yes," complete Schedule I, Parts I and III 22 X 24 Did the organization neever Yes' to Part II, Schedule I, Parts I and III 22 X 24 Did the organization neever Yes' to Part II, Schedule I, Parts I and III 23 X 24 Did the organization neever than a constraint of the state method reparts perform? 24a X 24 Did the organization neever than a encore account of the reparazization and provide schedule I, Part I 24a X 25 Did the organization neever than a encore account of the reparazization angage in an excess benefit transaction with a disqualified person in a price year, and that the transaction with a disqualified person in a price year, and that the transaction neever than 25,000 years. Highest compares 24 complete Schedule I, Part I 25b X	Pa	rt IV Checklist of Required Schedules (continued)			
bit 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic organization report more than \$5,000 of grants or other assistance to a for domestic organization or domestic organization report more than \$5,000 of grants or other assistance to a for domestic organization and and other officers, directors, trustess, key employees, and highest compensation of the organizations current and forme officers, directors, trustess, key employees, and highest compensation of the organization accurent and forme officers, directors, trustess, key employees, and highest compensation of the organization accurent and the organization nearest "Yes" to Part VI. Section A, line 3, 4, or 5 about compensation of the organization accurent and the organization mantan an escrew accur of the trunt a refunding escrew at any time during the year to defease any tax-section with a disqualified person during the year? 24b 24c 24 b Extended K. (If 'We', 2 or bla accurent of the organization acque in an excess benefit transaction with a disqualified person during the year? 24d 25d				Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization are domestic government on Part K, column (A), line 21 // Yes, "complete Schedule I, Parts I and III 21 X 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X, column (A), line 21 // Yes, "complete Schedule I, Parts I and III 22 X 23 Did the organization assert Yes' to Part VI, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustee, key employees, and highest compensated employees? If 'Yes, "complete Schedule A, II 'No'; go to line 25a X 24 Did the organization have a tax exempt bond sevem than 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," complete Schedule A, II 'No'; go to line 25a X 24 Did the organization mixes any proceeds of tax exempt bonds beyond a temporary period exception? 24b 24c 25 Section 501(x)3, 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prory exer, and that the transaction has not beam reported on any of the organization's purpore, substantial contributor or employees thread, agant selection committee member, or to a 35% controlled entrols or family member of any other assistance to an officer, director, trustee, or employees. Justees Complete Schedule L, Part IV 25b X 26 Did the organization provide agant or	20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
domestic government on Part IX, column (A), line 19 // "Yes," complete Schedule I, Parts I and II 21 X 22 Did the organization report more than S5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27 // "Yes," complete Schedule I, Parts I and III 22 X 23 Did the organization nawser "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization survert and former offices, director, trustees, key employees, and highest compensated employees? // "Yes," complete Schedule X. If 'No', go to line 25a 28 24a Did the organization inwist any proceeds of tax-exempt bonds beyond a temporary period exception? 24b 24b Did the organization inwist any proceeds of tax-exempt bonds beyond a temporary period exception? 24c 24b Did the organization inwist any proceeds of tax-exempt bonds outstanding at any time during the year? 24d 25a Section 50(KS), 50(Hz), And 50(Hz) organizations. Dut the organization invests any "on behalf Of 'Issuer for bonds outstanding at any time during the year? 24d 25a Section 50(KS), 50(Hz), And 50(Hz) organizations. Dut the organization spore spor	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X, column (A), line 27. If 'Yes,' complete Schedule I, Parts I and III 22 X 23 Did the organization asser 'Yes' to Part VI, 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 23 X 24a Did the organization nave a taxexempt bond issue with an outstanding principal amount of more than \$10(0000 as of the last day of the year, that was issued attre December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No', go to line 25a 24a X 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24a 24d X 25a Section 501(c/K), 501(c/A), and 501(c/K29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a X 25a Did the organization aware that engaged in a excess benefit transaction with a disqualified person in any of the organization aware that engage in an excess benefit transaction with a disqualified person in a proy year, and that the transaction with a disqualified person in a proy year, and that the transaction report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, substantial contribution tor a dimany of these persons? If 'Yes,' complete Schedu	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
Part X, column (A), line 27. If 'Yes,' complete Schedule I, Parts I and III. 22 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, directory, trustees, key employees, and highest compensation of the organization's current and former officers, directory, trustees, key employees, and highest compensation of the organization act as a 'on behalf of' issuer for bonds 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 I, I''No', or to line 25a 24b 24b 24b 24b b Did the organization invest any proceeds of tax evempt bonds beyond a temporary period exception? 24b 24c 24d c Did the organization invest any proceeds of tax evempt bonds outstanding at any time during the year? 24d 24d 24d d Did the organization and at a an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 24d 25a d Did the organization and that the angaed in an excess benefit transaction with a disqualified person in a prior year, and b is the organization and that the angaed in an excess benefit transaction with a disqualified person? If 'Yes,' complete Schedule L, Part I 25a X 28 Did the organization report any amount on Part X, line 5, 6, or 22 for raceivables from or payables to any current or former officer, director, trustee, or key employees, orbitalid person? If 'Yes,' complete Schedule L, Part IV 26a		domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization is current and former officers, firactors, incuses, key employees, and highest compensated employees? If 'Yes,' complete Schedule J. 2a X 24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than 510,000 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 fine 25a 24a X 25 Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24d 24a 26 Did the organization and as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 24a 26 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disquallified person in a prior year, and that the transaction aware that it engaged in an excess benefit transaction with a disquallified person in a prior year, and that the transaction report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustes, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II 25a X 27 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustes, key employees, highest complete Schedule L, Part IV 25b X 28 </td <td>22</td> <td></td> <td></td> <td></td> <td></td>	22				
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete 23 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 L, If Wo, 'g of time 25a 24a X 2 bid the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24b 24c 2 bid the organization and as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24c 24c 2 B Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Did the organization engage in a excess benefit transaction with a disqualified person in a prince year, and that the transaction and not been reported any nor tor forms 990 or 904.52? If "Yes," complete Schedule L, Part I 25a 2 B Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any ourrent or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II 25a 2 B Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any ourrent or former officers, director, trustee, key employees, substantial contributor or employee thereof, a grant salection committee member, or to a 35% controlled entity or family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 2 A A metty to which a current or former officer, director, trustee, or key employee? If "Yes," comple			22		
Schedule J 23 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 24a X 25 Did the organization miretain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24d 24d 26 Did the organization miretain an escrow account other than a refunding escrow at any time during the year? 24d 24d 27 Z4d 25a X 28 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization ergage 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 rivers, "complete Schedule L, Part I 25a X 28 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustes, key employees, highest complexes, or disqualified person? If 'Yes,' complete Schedule L, Part II 26a X 29 Did the organization proved a grant selection committee member, or to a 35% controlled entity or family member of any of these person? If 'Yes,' complete Schedule L, Part IV 26a X 29 Did the organization provide a grant or other assistance to an officer, furstee, organization arguing and provide schedule L, Part IV 27a X	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
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 lans 24b through 24d and complete Schedule L, If 'No'', go to line 25a 24a X b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b 24b c Did the organization antiania an escrow account other than a retunding escrow at any time during the year? 24c 24c 25a Section 501(c)(a), 501(c)(a), and 501(c)(a) organization. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 25a X b Is the organization mayere that it engaged in an excess benefit transaction with a disqualified person during the year? 25a X 25b Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial continuotr or employee thereot, a grant selection committee member, or to a 30% controlled entity or family member of a upret or filming thresholds, conditions, and exceptions): 26a X 27 X Xas the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributors or apploable filming thresholds, conditions, and exceptions): 27a X 28 A current or former officer, director, trustee, or key employee (or family member of a current or indirer director endirector, trustee, or key employee (or fam					
is tad up of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete 24a X b Did the organization maintain an ecrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24d 24d c Did the organization maintain an ecrow account other than a refunding escrow at any time during the year? 24d 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization access benefit transaction with a disqualified person in a prior year, and that the transaction naw that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction nay of the organization is prior Forms 990 or 990-E27 If 'Yes,' complete Schedule L, Part I 25a X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributors for applicable fing thresholds, conditions, and exceptions): a Acurent or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a X 28 Did the organization a party to a business transaction with a disqualified person? If 'Yes,'' 27 X 29 Did the organization reported ormer officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a X 29 A current or former officer, director, trustee, or key employee? If 'Yes,' complete		Schedule J	23	X	<u> </u>
Schedule K. If 'No', go to line 25a 24a X b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24b 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 24c 24c 25a Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? // 'Yes,' complete Schedule L, Part I 25a X b Is the organization axer that it engaged in an excess benefit transaction that 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-E2? // 'Yes,' complete Schedule L, Part I 25b X 25D Did the organization axer as period a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? // 'Yes,' complete Schedule L, Part I/ 28a X 27 Was the organization provide a grant or other assistance to an officer, director, trustee, or key employee, substantial contributors for applicable filing thresholds, conditions, and exceptions): 28a X 28 A M A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part I/ 28b X	24a	· · · · · · · · · · · · · · · · · · ·			
b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 24c d Did the organization cat as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 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 in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If 'Yes,' complete Schedule L, Part I 25a 25 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustee, key employees, indiscutified persons? If 'Yes,' complete Schedule L, Part II 26 X 27 Did the organization aport any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II 26 X 28 Was the organization aparty to a business transaction with a disqualified person in a prior year, and the organization receive memore three, receive memore the Schedule L, Part IV 27 X 28 A current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a fa					
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bords? 24d d Did the organization act as an 'on behalf of'' issuer for bonds outstanding at any time during the year? 24d 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 in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 // 'Yes,'' complete Schedule L, Part I 25a X 25 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? // 'Yes,'' complete Schedule L, Part I 26 X 27 Did the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): 26 X 28 A current or former officer, director, trustee, or key employee (r a family member of a current or former officer, director, trustee, or key employee? If 'Yes,'' complete Schedule L, Part IV 28a X 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,'' complete Schedule L, Part IV 28a X 29 Did the organization receive contributions of any historical treasures, or otheresize softer officer					
any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 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? II "Yes," complete Schedule L, Part I 25a 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 930 or 930-E27 If "Yes," complete Schedule L, Part I 25b X 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, directors, trustees, key employees, indicest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization aports to a business transaction with or of the following parties (see Schedule L, Part IV instructions for applicable) filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X 28 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X 29 Did the organization receive more? If "Yes," complete Schedule L, Part IV 28a X 29 Did the organization receive more? If "Yes," complete Schedule L, Part IV 28a X 29 Did the organiza			24b		<u> </u>
d Did the organization act as an 'no behalf of' issuer for bonds outstanding at any time during the year?. 24d 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 with a disqualified person on 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 25b X 261 Did 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 25b X 262 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustee, key employees, ustantial contributor or employee threed, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II 26 X 27 Did the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28a X 28 Was the organization receive more thicer, director, trustee, or key employee? 27 X 29 Did the organization receive contributions of art, historical treasures, or complete Schedule L, Part IV 28a X 29 X Did the organization receive contretime officer, director, trustee, or key employee? <td>С</td> <td></td> <td></td> <td></td> <td></td>	С				
25a Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Did the organization engage in an excess benefit transaction with a disquilified person during the year' <i>II</i> "Yes," complete Schedule <i>L</i> , Part I 25a X b Is the organization aware that it engaged in an excess benefit transaction with a disquilified person in a prior year, and that the transaction has not been reported on any of the organization spior Forms 990 or 990-E27 <i>II</i> "Yes," complete Schedule <i>L</i> , Part I 25b X 26 Did the organization aware that it engaged in an excess benefit transaction with a disquilified persons in a prior year, and that the transaction has not been reported on any of the organization provide a grant or other assistance to an officer, director, trustee, key employees, ubstantial contributor or employee thereol, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>II</i> "Yes," complete Schedule <i>L</i> , Part II 27 X 28 Was the organization present any to a business transaction with one of the following parties (see Schedule L, Part IV 28a X 29 Did the organization report or normer officer, director, trustee, or key employee (<i>II</i> "Yes," complete Schedule <i>L</i> , Part IV 28a X 29 Did the organization neceive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>II</i> "Yes," complete Schedule <i>L</i> , Part IV 28b X 29 Did the organization neceive contribuitions of art, historical treasures, or other similar assets, or					
transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a 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-E2? If "Yes," complete Schedule L, Part I 25b X 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28a X 29 Did the organization receive more flicer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or complete Schedule L, Part IV 28a X 29 Did the organization receive any ethan \$\$25,000 in on cash co			24d		
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-E2? If "Yes," complete Schedule L, Part I 25b X 26 Did the organization report any amount on Part X, line 6, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II 26b X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 X 28 Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV 28a X 29 Did the organization accelve more than 825,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 28a X 30 Did the organization eceive more than 825,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 31 Did the organization exelve more than 825,000 in non-cash contributions? If "Yes," complete Schedule M. 30 X 32 Did the organization ecleve more than 825,000 in non-cash contributions? If "Yes," complete Schedule M. 30 X	25a				v
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part I 25b X 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II 25b X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV 28a X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): 28a X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV. 28a X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 29 X 30 Did the organization neceive contributions of an entity disregarded as separate from the organization under Regulations sections 501.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 31 X 31 Did the organization neave a controlled entity within the meaning of section 512(b)(13)? 33 X	_		25a		
Schedule L, Part I 25b X 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV 28 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): 28a X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 28b X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29a X 30 Did the organization neetive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30a X 31 Did the organization neetive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M <td>b</td> <td></td> <td></td> <td></td> <td></td>	b				
 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>II</i> "Yes," <i>complete Schedule L, Part II</i> 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>II</i> "Yes," <i>complete Schedule L, Part II</i> 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? <i>II</i> "Yes," <i>complete Schedule L, Part IV</i> 28 A family member of a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>II</i> "Yes," <i>complete Schedule L, Part IV</i> 28 Did the organization receive more than \$25,000 in non-cash contributions? <i>II</i> "Yes," <i>complete Schedule M</i> 29 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?/<i>II</i> "Yes," <i>complete Schedule N, Part I</i> 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?/<i>II</i> "Yes," <i>complete Schedule N, Part I</i> 33 Did the organization neated to any tax-exempt or taxable entity? <i>II</i> "Yes," <i>complete Schedule R, Part I, III, or IV, and Part V, line 1</i> 34 Was the organization have a controlled entity within the meaning of section 512(v
former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): 28a X 29 Did the organization receive more officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X 29 Did the organization receive more than \$25,000 in ono-cash contributions? If "Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in ono-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization liquidate, terminate, or discolve and cease operations? If "Yes," complete Schedule N, Part I 30 X 31 Did the organization onellow of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I 31 X 32 Did the organization nealed to any tax-exempt or taxable entity?		· · · · · · · · · · · · · · · · · · ·	25b		
complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): 28a X 29 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X 29 Did the organization receive more officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV. 28c X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I 30 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 X 33 Did the organization neelated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part	26				
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X 29 Did the organization receive on to former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization liquidate, terminate, or dissolve and cease operations? if "Yes," complete Schedule M 29 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?/If "Yes," complete Schedule N, Part I 31 X 32 Did the organization necle on ton'U disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I 33 X 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, IIII, or IV, and Part V, line					v
contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): 28a X 28 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X 29 A current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 30 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 33 X 33 Did the organization nelated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1 34 X 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X			26		
of any of these persons? If "Yes," complete Schedule L, Part III 27 X 28<	27				
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I 30 X 31 Did the organization eliquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 31 X 32 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1 31 32 X 33 Did the organization nelated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 33 X 34 Was t			07		v
instructions for applicable filing thresholds, conditions, and exceptions):a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV28aXb A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV28bXc An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV28cX29Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M29X30Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M30X31Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I31X32Did the organization nelated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 134X34Was the organization have a controlled entity within the meaning of section 512(b)(13)?35aX35Did the organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 235b36Section 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 235b			27		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?/If "Yes," complete Schedule N, Part I 31 X 33 Did the organization neated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 33 X 34 Was the organization neated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a Did the organization neation on the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? 35a X 36 Section 501(c)(3) organizations. Did the organization make a	28				
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?If "Yes," complete Schedule N, Part I 31 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization neated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a X Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X X 36 <td< td=""><td>_</td><td></td><td>00-</td><td></td><td>v</td></td<>	_		00-		v
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?/f "Yes," complete Schedule N, Part I 31 X 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 34 If "Yes," complete Schedule R, Part V, line 1 35a X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 36 Section 501c(C)(3) organizations. Did the organization make any transaction sent transfers to an exempt non-charitable related organization? 35b 37 Did the organization conduct more than 5% o					
director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?If "Yes," complete Schedule N, Part I 31 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 33 X 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 34 X 35a Did the organization section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35a X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 36 X			280		
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 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 32 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 33 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 34 X 35a Did the organization neceive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? 35a X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 36 X	С		000		v
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i> 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N, Part I</i> 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete Schedule N, Part II</i> 32 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</i> "Yes," <i>complete Schedule R, Part I</i> 33 X 34 Was the organization related to any tax-exempt or taxable entity? <i>If</i> "Yes," <i>complete Schedule R, Part II, III, or IV, and Part V, line 1</i> 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X b If "Yes," complete Schedule R, Part V, line 2 35b 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 36 X	20			x	
contributions? If "Yes," complete Schedule M30X31Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I31X32Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?/f "Yes," complete Schedule N, Part II32X33Did 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 I33X34Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 134X35aDid the organization have a controlled entity within the meaning of section 512(b)(13)?35aXbIf "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 235b36Section 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 236X37Did the organization conduct more than 5% of its activities through an entity that is not a related organizationX		-	29		<u> </u>
31 Did the organization liquidate, terminate, or dissolve and cease operations? 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?/f "Yes," complete 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?/f "Yes," complete 32 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 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 35b 35b 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 36 X	30		20		x
If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?/If "Yes," complete 32 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 32 X 34 Was the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 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 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 35b 35b 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 36 X	21		30		
 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete Schedule N, Part II 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</i> "Yes," complete Schedule R, Part I 34 Was the organization related to any tax-exempt or taxable entity? <i>If</i> "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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</i> "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? <i>If</i> "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 	51	· · · · · · · · · · · · · · · · · · ·	21		x
Schedule N, Part II 32 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 33 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 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 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 35b 35b 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 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 4 X	32	Did the organization call exchange dispose of or transfer more than 25% of its net assets?//f "Ves " complete	51		
 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</i> "Yes," <i>complete Schedule R, Part I</i> 34 Was the organization related to any tax-exempt or taxable entity? <i>If</i> "Yes," <i>complete Schedule R, Part II, III, or IV, and Part V, line 1</i> 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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</i> "Yes," <i>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</i> "Yes," <i>complete Schedule R, Part V, line 2</i> 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 	02		32		x
sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 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 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 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 35b 35b 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 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 4 X	33		02		
 Was the organization related to any tax-exempt or taxable entity? <i>If</i> "Yes," <i>complete Schedule R, Part II, III, or IV, and</i> <i>Part V, line 1</i> Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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)? Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i> Did the organization conduct more than 5% of its activities through an entity that is not a related organization 	00		33		x
Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 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)? 35a X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 36 X	34				<u> </u>
 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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)? 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 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 	•.		34		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 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 	35a				
within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 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 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization					<u> </u>
 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	~		35b		
If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 6	36				
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	-	····· · · · · · ·	36		X
	37		_		
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 37 X		and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38				
Note. All Form 990 filers are required to complete Schedule O		· · · ·	38	Х	

-*3085 Page 4

	Big Brothers Big Sisters of			~ ~ -		_				
	990 (2015) Tampa Bay, Inc.		**-***3	085	P	age 5				
Pa										
	Check if Schedule O contains a response or note to any line in this Part V									
					Yes	No				
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1 a	0							
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0									
с	Did the organization comply with backup withholding rules for reportable payments to vendors and r									
	(gambling) winnings to prize winners?									
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	113		37					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	X					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				37				
				3a		X				
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other									
	financial account in a foreign country (such as a bank account, securities account, or other financial	accol	int)?	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 A									
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X				
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	action	?	5b		X				
	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	ne org	anization 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 contribu-	tions	or gifts							
	were not tax deductible?			6b						
7	Organizations that may receive deductible contributions under section 170(c).									
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices	provided to the payor?	7a		X				
				7b						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as reo	quired							
	to file Form 8282?	1		7c		X				
	If "Yes," indicate the number of Forms 8282 filed during the year	7d								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontra	ct?	7e		X				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f		X				
g	If the organization received a contribution of qualified intellectual property, did the organization file F			7g		X				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz			7h		X				
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	l by th	ie			37				
	sponsoring organization have excess business holdings at any time during the year?			8		X				
9	Sponsoring organizations maintaining donor advised funds.									
а				9a		X				
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		X				
10	Section 501(c)(7) organizations. Enter:		1							
а	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:	ı	1							
а	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								
	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.									
а	Is the organization licensed to issue qualified health plans in more than one state?			13a						
	Note. See the instructions for additional information the organization must report on Schedule O.									
b	Enter the amount of reserves the organization is required to maintain by the states in which the		1							
	organization is licensed to issue qualified health plans	13b								
	Enter the amount of reserves on hand	13c				v				
				14a		X				
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e()		14b	1	1				

Form 990	(2015)	
-----------------	--------	--

					. –		
	990 (2015) Tampa Bay, Inc.		**_**				age 6
Pa	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 th	•	,	ra "No)" re	espon	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule C	. See II	nstructions.				
	Check if Schedule O contains a response or note to any line in this Part VI				<u></u>		X
<u>Sec</u>	tion A. Governing Body and Management						
					$ \rightarrow $	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		11			
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.						
b	Enter the number of voting members included in line 1a, above, who are independent	1b		11			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with	any other				
	officer, director, trustee, or key employee?			2	2		Х
3	Did the organization delegate control over management duties customarily performed by or under th	e direc	t supervision				
	of officers, directors, or trustees, or key employees to a management company or other person?				3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 9	990 wa	s filed?		1		Х
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?			;		Х
6	Did the organization have members or stockholders?				3		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a						
	more members of the governing body?			7	a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s						
	persons other than the governing body?			7	b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye						
а	The governing body?	-	-	8	a	Х	
b	Each committee with authority to act on behalf of the governing body?				_	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			ç)		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R				_		
			/		Т	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10	Da		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such c				<u> </u>		
-	and branches to ensure their operations are consistent with the organization's exempt purposes?			10	b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo				la la	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	9 8010	o ming the form				
12a				12	2a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				_	X	
2	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Y				+		
U	in Schedule O how this was done	cs, ut	.301100	10	2c	х	
13	Did the organization have a written whistleblower policy?				3	X	
14	Did the organization have a written document retention and destruction policy?				4	x	
	Did the process for determining compensation of the following persons include a review and approv			·· -'	+		
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		aspendent				
				46	-	Х	
a b	The organization's CEO, Executive Director, or top management official				5a 5h	X	
b	Other officers or key employees of the organization			10		21	
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).						
ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange						х
	taxable entity during the year?			10	ba		
a	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga						
<u></u>	exempt status with respect to such arrangements?			. 16	ib		
-	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright FL	- /0		<u>, </u>			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	(Sect	on 501(c)(3)s on	y) avai	lable	е	
	for public inspection. Indicate how you made these available. Check all that apply.						
	X Own website Another's website X Upon request Other (explain						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	nflict o	f interest policy,	and fir	anc	ial	
_	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 bo	oks an	d records:				
	Leslie M. Lee - 727-518-8860						

Form 990 (2015)	rampa .	bay, Inc	•		
Part VII	Compensation	of Officer	s, Directors,	Trustees, Ke	ey Employees, H	lighest Compensated

Employees, and Independent Contractors

For

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 (Ď), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

Name and Title Average hours per lice Ownerspace biology and a detector under biology and a detector under the detector under biology and a detector under the detector under biology and a detector under the detector the detector under the detector the detector under the	(A)	(B) (C)							(D)	(E)	(F)
hours per week (list any nurs for net and and any the second and a mount of origination and any the second and any the second and any the second and any the second any the second any the second any term of any term	Name and Title	Average	Position				one	Reportable	Reportable	Estimated	
Work (ist ary hours for select or organization organization below line)Norm (W2/1099-MISC)Outer and the organization organization organization organization and related organization organizations below line)(1) David Fox3.50XX0.0.0.Board Chair3.50XX0.0.0.(2) Vincent Pavese3.50XX0.0.0.(3) Mike Attinella3.50XX0.0.0.(4) Irv Cohen3.50XX0.0.0.(5) Brian Auld3.50XX0.0.0.(6) Mary Ann Fullerton3.50XX0.0.0.(7) Todd Fultr3.50XX0.0.0.(8) Lise Letizio3.50XX0.0.0.(9) Bethle McLaughlin3.50XX0.0.0.(10) Nait Scheele3.50XX0.0.0.(11) Tami Sheehan-Broadrick3.50XX0.0.0.(12) Joe Trigenit3.50XX0.0.0.(13) Bet Nucleon ChairXX0.0.0.0.(14) Kat Scheele3.50XX0.0.0.(13) Bet Nucleon ChairXX0.0.0.0.(14) Kat Beena Broadrick3.50XX0.0.0.(15) Development Commit			box	, unles	ss pe	rson	is bot	h an	·		
I) David Fox 3.50 X X 0. 0. (1) David Fox 3.50 X X 0. 0. 0. (2) Vincent Pavese 3.50 X X 0. 0. 0. Board chair-elect X X 0. 0. 0. 0. (3) Mike Attinella 3.50 X X 0. 0. 0. (4) Irve Cohen 3.50 X X 0. 0. 0. (5) Brian Auld 3.50 X X 0. 0. 0. (6) Mary Am Pullerton 3.50 X X 0. 0. 0. (7) Todde Valuz 3.50 X X 0. 0. 0. (7) Todde Kaiz Cohir X X 0. 0. 0. (9) Belle McLauphlin 3.50 X X 0. 0. (19) Betheele McLauphlin 3.50 X X 0. 0. (10) Kait Scheele 3.50 X X 0. 0. (10) Kait Scheele 3.50 X X 0. 0							l				
I) David Fox 3.50 X X 0. 0. (1) David Fox 3.50 X X 0. 0. 0. (2) Vincent Pavese 3.50 X X 0. 0. 0. Board chair-elect X X 0. 0. 0. 0. (3) Mike Attinella 3.50 X X 0. 0. 0. (4) Irve Cohen 3.50 X X 0. 0. 0. (5) Brian Auld 3.50 X X 0. 0. 0. (6) Mary Am Pullerton 3.50 X X 0. 0. 0. (7) Todde Valuz 3.50 X X 0. 0. 0. (7) Todde Kaiz Cohir X X 0. 0. 0. (9) Belle McLauphlin 3.50 X X 0. 0. (19) Betheele McLauphlin 3.50 X X 0. 0. (10) Kait Scheele 3.50 X X 0. 0. (10) Kait Scheele 3.50 X X 0. 0			irecto							, and a second s	•
(1) David Fox Beard Chair3.50 XXX0.0.Board Chair3.50 (2) Vincent Pavese3.50 XXX0.0.0.Board chair-electXXX0.0.0.0.(3) Mike Attinella3.50 XXX0.0.0.(4) Irv Cohen3.50 Treasurer/Finance Committee ChairXX0.0.0.(5) Brian Auld3.50 XXX0.0.0.(6) Mary Ann Fullerton3.50 Cala Live Auction ChairXX0.0.0.(7) Todd Fultz3.50 XXX0.0.0.0.(8) Lisa Letizio3.50 XXX0.0.0.0.(9) Bethlee McLaughlin3.50 XXX0.0.0.0.(11) Tani Shehan-Fordrick3.50 XXX0.0.0.0.(12) Joe Trepani3.50 XXX0.0.0.0.0.(13) Beth Vivio Board Governance Committee Co-ch (13) Beth Vivio3.50 XX0.0.0.0.0.(14) Kathelem Wade Board Governance Committee Co-ch (14) Kathelem Wade3.50 XX0.0.0.0.0.(15) Pinw Woods Board Governance Committee Co-ch (14) Rathelem Wade3.50 XX0.0.0.0.0.(15) Lynw Woods Board Alumni Chair3.50 <td></td> <td></td> <td>e or d</td> <td>stee</td> <td></td> <td></td> <td>Isated</td> <td></td> <td>•</td> <td>(1099-10130)</td> <td></td>			e or d	stee			Isated		•	(1099-10130)	
(1) David Fox Beard Chair3.50 XXX0.0.Board Chair3.50 (2) Vincent Pavese3.50 XX0.0.0.(3) Mike Attinella3.50 XX0.0.0.(3) Mike Attinella3.50 Treasurer/Finance Committee ChairXX0.0.0.(4) Irv Cohen3.50 Treasurer/Finance Committee ChairXX0.0.0.(5) Brian Auld3.50 Treasurer/Finance Committee ChairXX0.0.0.(6) Mary Ann Fullerton3.50 Cala Live Auction ChairXX0.0.0.(7) Todd Fultz3.50 SonXX0.0.0.(8) Lisa Letizio3.50 Todd FultzXX0.0.0.(9) Bethlee McLaughlin3.50 Companies for Kids Co-chairXX0.0.0.(11) Tani Sheehan-Fordrick3.50 XX0.0.0.0.(12) Joe Trepani3.50 Companies for Kids Co-chairXX0.0.0.(13) Beth Vivio3.50 Resource Development Committee Co-ch (13) Beth Vivio3.50 XX0.0.0.(14) Kathieen Wade3.50 S.50 Board Governance Committee Co-ch (14) Modofs3.50 XX0.0.0.(15) Dyn Woods3.50 Resource Development Committee Co-ch (14) Kathieen Wade3.50 XX0.0.0.(14) Kathieen Wade3.50			truste	al trus		yee	mper				-
(1) David Fox Beard Chair3.50 XXX0.0.Board Chair3.50 (2) Vincent Pavese3.50 XXX0.0.0.Board chair-electXXX0.0.0.0.(3) Mike Attinella3.50 XXX0.0.0.(4) Irv Cohen3.50 Treasurer/Finance Committee ChairXX0.0.0.(5) Brian Auld3.50 XXX0.0.0.(6) Mary Ann Fullerton3.50 Cala Live Auction ChairXX0.0.0.(7) Todd Fultz3.50 XXX0.0.0.0.(8) Lisa Letizio3.50 XXX0.0.0.0.(9) Bethlee McLaughlin3.50 XXX0.0.0.0.(11) Tani Shehan-Fordrick3.50 XXX0.0.0.0.(12) Joe Trepani3.50 XXX0.0.0.0.0.(13) Beth Vivio Board Governance Committee Co-ch (13) Beth Vivio3.50 XX0.0.0.0.0.(14) Kathelem Wade Board Governance Committee Co-ch (14) Kathelem Wade3.50 XX0.0.0.0.0.(15) Pinw Woods Board Governance Committee Co-ch (14) Rathelem Wade3.50 XX0.0.0.0.0.(15) Lynw Woods Board Alumni Chair3.50 <td></td> <td>below</td> <td>id ual</td> <td>ution</td> <td>5</td> <td>amplo</td> <td>est co o yee</td> <td>er</td> <td></td> <td></td> <td>organizations</td>		below	id ual	ution	5	amplo	est co o yee	er			organizations
(1) David Fox Beard Chair3.50 XXX0.0.Board Chair3.50 (2) Vincent Pavese3.50 XXX0.0.0.Board chair-electXXX0.0.0.0.(3) Mike Attinella3.50 XXX0.0.0.(4) Irv Cohen3.50 Treasurer/Finance Committee ChairXX0.0.0.(5) Brian Auld3.50 XXX0.0.0.(6) Mary Ann Fullerton3.50 Cala Live Auction ChairXX0.0.0.(7) Todd Fultz3.50 XXX0.0.0.0.(8) Lisa Letizio3.50 XXX0.0.0.0.(9) Bethlee McLaughlin3.50 XXX0.0.0.0.(11) Tani Shehan-Fordrick3.50 XXX0.0.0.0.(12) Joe Trepani3.50 XXX0.0.0.0.0.(13) Beth Vivio Board Governance Committee Co-ch (13) Beth Vivio3.50 XX0.0.0.0.0.(14) Kathelem Wade Board Governance Committee Co-ch (14) Kathelem Wade3.50 XX0.0.0.0.0.(15) Pinw Woods Board Governance Committee Co-ch (14) Rathelem Wade3.50 XX0.0.0.0.0.(15) Lynw Woods Board Alumni Chair3.50 <td></td> <td>,</td> <td>Indiv</td> <td>Instit</td> <td>Offic</td> <td>Keye</td> <td>High empl</td> <td>Form</td> <td></td> <td></td> <td></td>		,	Indiv	Instit	Offic	Keye	High empl	Form			
(2) Vincent Pavese Board chair-elect3.50 XXXX0.0.(3) Mike Attinella Audit Committee Chair3.50 XXX0.0.0.(4) Irv Cohen Treasurer/Finance Committee Chair3.50 XXX0.0.0.(5) Brian Auld Teasurer/Finance Committee Chair3.50 XXX0.0.0.(6) Mary Ann Fullerton (6) Mary Ann Fullerton 	(1) David Fox	3.50									
Board chair-electXXX0.0.0.(3) Mike Attinella3.50XX0.0.0.Audit Committee ChairXX0.0.0.0.(4) Irv Cohen3.50XX0.0.0.Treasurer/Finance Committee ChairXX0.0.0.(5) Brian Auld3.50X0.0.0.(6) Mary Ann Fullerton3.50X0.0.0.(7) Todd Fultz3.50X0.0.0.Bowl For Kids' Sake ChairXX0.0.0.(8) Lisa Letizio3.50XX0.0.0.Human Resource ChairXX0.0.0.0.(10) Kait Scheele3.50XX0.0.0.(11) Tami Sheehan-Broadrick3.50XX0.0.0.(12) Joe Trepani3.50XX0.0.0.(13) Beth Vivio3.50XX0.0.0.(13) Beth Vivio3.50XX0.0.0.(14) Kathleen Wade3.50XX0.0.0.(15) Lynn Wods3.50XX0.0.0.(16) Kent Bailey3.50XX0.0.0.(15) Lynn Wods3.50XX0.0.0.DirectorXX0.			Х		Х				0.	0.	0.
(3) Mike Attinella 3.50 X X X 0. 0. 0. Audit Committee Chair X X X 0. 0. 0. 0. (4) Irv Cohen 3.50 X X 0. 0. 0. 0. (5) Brian Auld 3.50 X X 0. 0. 0. 0. (6) Mary Ann Fullerton 3.50 X X 0. 0. 0. 0. (7) Todd Pultz 3.50 X X 0. 0. 0. 0. (8) Lisa Letizio 3.50 X X 0. 0. 0. 0. (9) Bethlee McLaughlin 3.50 X X 0. 0. 0. 0. (10) Kait Scheele 3.50 X X 0. 0. 0. 0. Gala Silent Auction Chair X X 0. 0. 0. 0. 0. (10) Kait Scheele 3.50 X X 0. 0. 0. 0. Gala Silent Auction Chair X.50	(2) Vincent Pavese	3.50									_
Audit committee ChairXXX0.0.0.Treasurer/Finance Committee Chair 3.50 XX0.0.0.Treasurer/Finance Committee Chair X X0.0.0.0.(5) Bria Auld 3.50 XX0.0.0.0.Timediate Past Board Chair X X X 0.0.0.0.(6) Mary Ann Fullerton 3.50 X X 0.0.0.0.(7) Todd Fultz 3.50 X X 0.0.0.0.(8) Lisa Letizio 3.50 X X 0.0.0.(9) Bethlee McLaughlin 3.50 X X 0.0.0.(10) Kait Scheele 3.50 X X 0.0.0.(11) Tami Schehan-Broadrick 3.50 X X 0.0.0.(12) Joe Trepani 3.50 X X 0.0.0.(13) Beth Vivio 3.50 X X 0.0.0.(14) Kathleen Wade 3.50 X X 0.0.0.Board Governance Committee Chair X X 0.0.0.(14) Kathleen Wade 3.50 X X 0.0.0.(15) Lynn Woods 3.50 X X 0.0.0.Board Governance Committee Chair X X 0.0.0.(16) Kent Balley 3.50	Board chair-elect		Х		Х				0.	0.	0.
(4)Irv Cohen3.50XXX0.0.0.Treasurer/Finance Committee ChairXXX0.0.0.0.(5)Brian Auld3.50XX0.0.0.0.(6)Mary Ann Fullerton3.50XX0.0.0.0.(7)Todd Fultz3.50XX0.0.0.0.(7)Todd Fultz3.50XX0.0.0.0.(8)Lisa Letizio3.50XX0.0.0.0.(8)Lisa Letizio3.50X0.0.0.0.0.(9)Bethlee McLaughlin3.50X0.0.0.0.0.(10)Kait Scheele3.50X0.0.0.0.0.(11)Tami Sheehan-Broadrick3.50XX0.0.0.0.(12)Joe Trepani3.50XX0.0.0.0.0.(13)Beth Vivio3.50XX0.0.0.0.0.0.(14)Kathleen Wade3.50XX0.<	(3) Mike Attinella	3.50									
Treasurer/Finance Committee ChairXXX0.0.0.(5) Brian Auld3.50XX0.0.0.Immediate Past Board ChairXX0.0.0.Gala Live Auction ChairX.X0.0.0.Gala Live Auction ChairXX0.0.0.Goal Live Auction ChairXX0.0.0.Bowl For Kids' Sake ChairXX0.0.0.Bowl For Kids' Sake ChairXX0.0.0.Human Resource ChairXX0.0.0.(9) Bethlee McLaughlin3.50X0.0.0.Companies for Kids Co-chairXX0.0.0.(10) Kait Scheele3.50X0.0.0.Gala Silent Auction ChairXX0.0.0.(11) Tami Sheehan-Broadrick3.50X0.0.0.(12) Joe Trepani3.50X0.0.0.(13) Beth Vivio3.50X0.0.0.(14) Kathleen Wade3.50X0.0.0.Board Governance Committee ChairXX0.0.0.(15) Lynn Woods3.50X0.0.0.0.(16) Kent Bailey3.50X0.0.0.0.DirectorX0.0.0.0.0. </td <td>Audit Committee Chair</td> <td></td> <td>Х</td> <td></td> <td>Х</td> <td></td> <td></td> <td></td> <td>0.</td> <td>0.</td> <td>0.</td>	Audit Committee Chair		Х		Х				0.	0.	0.
(5)Brian Auld3.50XXX0.0.0.Immediate Past Board Chair3.50XX0.0.0.0.(6)Mary Ann Pullerton3.50XX0.0.0.0.Gala Live Auction ChairXX0.0.0.0.0.(7)Todd Fultz3.50XX0.0.0.0.Bowl For Kids' Sake ChairXX0.0.0.0.0.(8)Lisa Letizio3.50X0.0.0.0.0.Human Resource ChairXX0.0.0.0.0.0.(10)Kait Scheele3.50XX0.0.0.0.0.0.Gala Silent Auction ChairXXX0. <t< td=""><td>(4) Irv Cohen</td><td>3.50</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	(4) Irv Cohen	3.50									
Immediate Past Board Chair X X X X 0. 0. 0. 0. (6) Mary Ann Fullerton 3.50 X X X 0. 0. 0. 0. Gala Live Auction Chair X X X 0. 0. 0. 0. (7) Todd Fultz 3.50 X X 0. 0. 0. 0. (8) Lisa Letizio 3.50 X X 0. 0. 0. 0. (9) Bethlee McLaughlin 3.50 X X 0. 0. 0. 0. (10) Kait Scheele 3.50 X X 0. 0. 0. 0. Gala Silent Auction Chair X X 0. 0. 0. 0. 0. (11) Tami Sheehan-Broadrick 3.50 X X 0. 0. 0. 0. (12) Joe Trepani 3.50 X X 0. 0. 0. 0. (13) Beth Vivio	Treasurer/Finance Committee Chair		Х		Х				0.	0.	0.
(6)Mary Ann Fullerton3.50XXX0.0.0.Gala Live Auction ChairXXX0.0.0.0.0.(7)Todd Fultz3.50XX0.0.0.0.Bowl For Kids' Sake ChairXX0.0.0.0.0.(8)Lisa Letizio3.50XX0.0.0.0.Human Resource ChairXX0.0.0.0.0.(9)Bethlee McLaughlin3.50XX0.0.0.0.(10) Kait Scheele3.50XX0.0.0.0.(11) Tami Sheehan-Broadrick3.50XX0.0.0.0.(11) Tami Sheehan-Broadrick3.50XX0.0.0.0.(12) Joe Trepani3.50XX0.0.0.0.0.(13) Beth Vivio3.50XX0.0.0.0.0.(14) Kathleen Wade3.50XX0.0.0.0.0.Board Alumni ChairXX0.0.0.0.0.0.(16) Kent Bailey3.50X0.0.0.0.0.0.0.DirectorXX0.0.0.0.0.0.0.0.	(5) Brian Auld	3.50									
Gala Live Auction ChairXXX0.0.0.(7) Todd Fultz3.50XX0.0.0.Bowl For Kids' Sake ChairXXX0.0.0.(8) Lisa Letizio3.50XX0.0.0.Human Resource ChairXXX0.0.0.(9) Bethlee McLaughlin3.50XX0.0.0.Companies for Kids Co-chairXXX0.0.0.(10) Kait Scheele3.50XX0.0.0.(11) Tami Sheehan-Broadrick3.50XX0.0.0.(12) Joe Trepani3.50XX0.0.0.(13) Beth Vivio3.50XX0.0.0.Resource Development Committee Co-chXX0.0.0.(14) Kathleen Wade3.50XX0.0.0.Board Governance Committee ChairXX0.0.0.(15) Lynn Woods3.50X0.0.0.0.DirectorXX0.0.0.0.(16) Kent Bailey3.50X0.0.0.0.DirectorXX0.0.0.0.	Immediate Past Board Chair		Х		Х				0.	0.	0.
(7)Todd Fultz3.50XXX00.Bowl For Kids' Sake Chair3.50XX0.0.0.(8)Lisa Letizio3.50XX0.0.0.Human Resource ChairXXX0.0.0.(9)Bethlee McLaughlin3.50XX0.0.0.(10)Kait Scheele3.50XX0.0.0.(11)Tami Sheehan-Broadrick3.50XX0.0.0.(11)Tami Sheehan-Broadrick3.50XX0.0.0.(11)Tami Sheehan-Broadrick3.50XX0.0.0.(12)Joe Trepani3.50XX0.0.0.(13)Beth Vivio3.50XX0.0.0.(14)Kathleen Wade3.50XX0.0.0.Board Governance Committee ChairXX0.0.0.0.(15)Lynn Woods3.50XX0.0.0.0.DirectorXX0.0.0.0.0.0.(16)Ket Bailey3.50X0.0.0.0.0.DirectorXX0.0.0.0.0.0.	(6) Mary Ann Fullerton	3.50									
Bowl For Kids' Sake ChairXXXX0.0.0.(8) Lisa Letizio3.50XX0.0.0.0.(9) Bethlee McLaughlin3.50XX0.0.0.0.(10) Kait Scheele3.50XX0.0.0.0.(11) Kait Scheele3.50XX0.0.0.0.(11) Tami Sheehan-Broadrick3.50XX0.0.0.0.(11) Tami Sheehan-Broadrick3.50XX0.0.0.0.(12) Joe Trepani3.50XX0.0.0.0.(13) Beth Vivio3.50XX0.0.0.0.(14) Kathleen Wade3.50XX0.0.0.0.(15) Lynn Woods3.50XX0.0.0.0.(16) Kent Bailey3.50XX0.0.0.0.(17) Debbie Booth3.50X0.0.0.0.DirectorXX0.0.0.0.0.	Gala Live Auction Chair		Х		Х				0.	0.	0.
(8)Lisa Letizio3.50XXX0.0.0.Human Resource ChairXXX0.0.0.0.(9)Bethlee McLaughlin3.50XX0.0.0.Companies for Kids Co-chairXXX0.0.0.(10)Kait Scheele3.50XX0.0.0.Gala Silent Auction ChairXXX0.0.0.(11)Tami Sheehan-Broadrick3.50XX0.0.0.Resource Development Committee/Art oXX0.0.0.0.(12)Joe Trepani3.50XX0.0.0.(13)Beth Vivio3.50XX0.0.0.(14)Kathleen Wade3.50XX0.0.0.Board Governance Committee ChairXX0.0.0.0.(15)Lynn Woods3.50XX0.0.0.DirectorXX0.0.0.0.0.(16)Kent Bailey3.50X0.0.0.0.DirectorXX0.0.0.0.0.	(7) Todd Fultz	3.50									_
Human Resource ChairXXX0.0.0.(9) Bethlee McLaughlin3.50XX0.0.0.Companies for Kids Co-chairXXX0.0.0.(10) Kait Scheele3.50XX0.0.0.Gala Silent Auction ChairXXX0.0.0.(11) Tami Sheehan-Broadrick3.50XX0.0.0.Resource Development Committee/Art oXX0.0.0.0.(12) Joe Trepani3.50XX0.0.0.(13) Beth Vivio3.50XX0.0.0.(14) Kathleen Wade3.50XX0.0.0.Board Governance Committee ChairXXX0.0.0.(15) Lynn Woods3.50XX0.0.0.DirectorXX0.0.0.0.(17) Debbie Booth3.50X0.0.0.DirectorXX0.0.0.0.			Х		Х				0.	0.	0.
(9)Bethlee McLaughlin3.50XXX0.0.0.(10)Kait Scheele3.50XX0.0.0.0.(11)Tami Sheehan-Broadrick3.50XX0.0.0.0.(11)Tami Sheehan-Broadrick3.50XX0.0.0.0.(12)Joe Trepani3.50XX0.0.0.0.(13)Beth Vivio3.50XX0.0.0.0.(13)Beth Vivio3.50XX0.0.0.0.(14)Kathleen Wade3.50XX0.0.0.0.Board Governance Committee ChairXX0.0.0.0.0.(15)Lynn Woods3.50XX0.0.0.0.DirectorXX0.0.0.0.0.0.(17)Debbie Booth3.50X0.0.0.0.	(8) Lisa Letizio	3.50									-
Companies for Kids Co-chairXXX0.0.0.(10) Kait Scheele3.50XX0.0.0.Gala Silent Auction ChairXXX0.0.0.(11) Tami Sheehan-Broadrick3.50XX0.0.0.(12) Joe Trepani3.50XX0.0.0.(13) Beth Vivio3.50XX0.0.0.(13) Beth Vivio3.50XX0.0.0.(14) Kathleen Wade3.50XX0.0.0.Board Governance Committee ChairXX0.0.0.(15) Lynn Woods3.50XX0.0.0.Board Alumni ChairXX0.0.0.0.(16) Kent Bailey3.50X0.0.0.0.DirectorXX0.0.0.0.(17) Debbie Booth3.50X0.0.0.0.			X		X				0.	0.	0.
(10) Kait Scheele3.50XXX0.0.0.Gala Silent Auction ChairXXX0.0.0.0.(11) Tami Sheehan-Broadrick3.50XX0.0.0.0.(12) Joe Trepani3.50XX0.0.0.0.(13) Beth Vivio3.50XX0.0.0.0.(13) Beth Vivio3.50XX0.0.0.0.(14) Kathleen Wade3.50XX0.0.0.0.(15) Lynn Woods3.50XX0.0.0.0.(16) Kent Bailey3.50X0.0.0.0.0.DirectorXX0.0.0.0.0.(17) Debbie Booth3.50X0.0.0.0.0.	(9) Bethlee McLaughlin	3.50									-
Gala Silent Auction ChairXXX0.0.0.(11) Tami Sheehan-Broadrick3.50XX0.0.0.Resource Development Committee/Art oXX0.0.0.(12) Joe Trepani3.50Companies for Kids Co-chairXX0.0.0.(13) Beth Vivio3.50Resource Development Committee Co-chXX0.0.0.(14) Kathleen Wade3.50Board Governance Committee ChairXX0.0.0.(15) Lynn Woods3.50Board Alumni ChairXX0.0.0.0.(16) Kent Bailey3.50DirectorXX.0.0.0.0.(17) Debbie Booth3.50DirectorXX.0.0.0.0.			X		X				0.	0.	0.
(11) Tami Sheehan-Broadrick3.50XXX0.0.0.Resource Development Committee/Art oXXX0.0.0.0.(12) Joe Trepani3.50XX0.0.0.0.(13) Beth Vivio3.50XX0.0.0.0.(14) Kathleen Wade3.50XX0.0.0.0.Board Governance Committee ChairXXX0.0.0.0.(15) Lynn Woods3.50XX0.0.0.0.Board Alumni ChairXX0.0.0.0.(16) Kent Bailey3.50X0.0.0.0.DirectorXX0.0.0.0.0.(17) Debbie Booth3.50X0.0.0.0.0.	(10) Kait Scheele	3.50									-
Resource Development Committee/Art oXXX0.0.0.(12) Joe Trepani3.50XX0.0.0.Companies for Kids Co-chairXXX0.0.0.(13) Beth Vivio3.50XX0.0.0.Resource Development Committee Co-chXXX0.0.0.(14) Kathleen Wade3.50XX0.0.0.Board Governance Committee ChairXXX0.0.0.(15) Lynn Woods3.50X0.0.0.0.Board Alumni ChairXX0.0.0.0.(16) Kent Bailey3.50X0.0.0.0.DirectorXX0.0.0.0.(17) Debbie Booth3.50X0.0.0.0.DirectorXX0.0.0.0.			X		X				0.	0.	0.
(12) Joe Trepani3.50XX0.0.0.Companies for Kids Co-chairXXX0.0.0.(13) Beth Vivio3.50XX0.0.0.Resource Development Committee Co-chXXX0.0.0.(14) Kathleen Wade3.50XX0.0.0.Board Governance Committee ChairXX0.0.0.(15) Lynn Woods3.50XX0.0.0.Board Alumni ChairXX0.0.0.0.(16) Kent Bailey3.50X0.0.0.0.DirectorXX0.0.0.0.(17) Debbie Booth3.50X0.0.0.0.DirectorXX0.0.0.0.	(11) Tami Sheehan-Broadrick	3.50									_
Companies for Kids Co-chairXXX0.0.0.(13) Beth Vivio3.50XX0.0.0.Resource Development Committee Co-chXX0.0.0.(14) Kathleen Wade3.50XX0.0.0.Board Governance Committee ChairXX0.0.0.0.(15) Lynn Woods3.50XX0.0.0.0.Board Alumni ChairXX0.0.0.0.(16) Kent Bailey3.50X0.0.0.0.DirectorXX0.0.0.0.(17) Debbie Booth3.50X0.0.0.0.DirectorXX0.0.0.0.			Х		Х				0.	0.	0.
(13) Beth Vivio3.50XX0.0.0.Resource Development Committee Co-chXXX0.0.0.(14) Kathleen Wade3.50XX0.0.0.Board Governance Committee ChairXX0.0.0.0.(15) Lynn Woods3.50XX0.0.0.0.Board Alumni ChairXX0.0.0.0.(16) Kent Bailey3.50X0.0.0.0.DirectorXX0.0.0.0.(17) Debbie Booth3.50X0.0.0.0.DirectorX0.0.0.0.0.	(12) Joe Trepani	3.50									-
Resource Development Committee Co-chXXX0.0.0.(14) Kathleen Wade3.50XX0.0.0.Board Governance Committee ChairXXX0.0.0.(15) Lynn Woods3.50XX0.0.0.Board Alumni ChairXXX0.0.0.(16) Kent Bailey3.50X0.0.0.0.DirectorXX0.0.0.0.(17) Debbie Booth3.50X0.0.0.0.DirectorXX0.0.0.0.			X		X				0.	0.	0.
(14) Kathleen Wade3.50XX0.0.0.Board Governance Committee ChairXXX0.0.0.0.(15) Lynn Woods3.50XX0.0.0.0.Board Alumni ChairXXX0.0.0.0.(16) Kent Bailey3.50X0.0.0.0.DirectorXX0.0.0.0.(17) Debbie Booth3.50X0.0.0.0.DirectorX0.0.0.0.0.	(13) Beth Vivio	3.50									-
Board Governance Committee ChairXXX0.0.0.(15) Lynn Woods3.50XX0.0.0.Board Alumni ChairXXX0.0.0.(16) Kent Bailey3.50X0.0.0.0.DirectorXX0.0.0.0.(17) Debbie Booth3.50X0.0.0.0.DirectorX0.0.0.0.0.			X		X				0.	0.	0.
(15) Lynn Woods 3.50 X X X 0. 0. 0. Board Alumni Chair X X X 0. 0. 0. 0. (16) Kent Bailey 3.50 X 0. 0. 0. 0. 0. Director X X 0. 0. 0. 0. 0. (17) Debbie Booth 3.50 X 0. 0. 0. 0. 0. Director X X 0. 0. 0. 0. 0.	(14) Kathleen Wade	3.50									-
Board Alumni ChairXXX0.0.0.(16) Kent Bailey3.50DirectorX.0.0.0.0.(17) Debbie Booth3.50DirectorX.0.0.0.0.			X		X				0.	0.	0.
(16) Kent Bailey 3.50 X 0.	· · · •	3.50									
Director X 0. <t< td=""><td></td><td></td><td>X</td><td></td><td>X</td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></t<>			X		X				0.	0.	0.
(17) Debbie Booth 3.50 0. <td>_</td> <td>3.50</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	_	3.50									
Director X 0. 0. 0.			X						0.	0.	0.
		3.50									<u>^</u>
	Director		Х						0.	0.	

Big	Bı	other	rs	Big	Sisters	of
Tamp	ba	Bay,	Ιı	nc.		

**_	* *	*3	085	Page 8
-----	-----	----	-----	---------------

		ba Bay	, Inc.								**_***	8085	<u>р</u>	age 8
Par	t VII Section A. Officers, Direct	ors, Trust	ees, Key Em	ploy	ees,	and	d Hi	ighe	st C	Compensated Employe	es (continued)			
	(A) Name and title			box	not ch , unles	s per	itior more rson	than is bot pr/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estimate amount other	of
		Q	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	or	mpensa from th rganizat nd relat ganizati	ie tion ted
(18)	Sergio Cadavid		3.50								_			_
Dire				х						0.	0.	·		0.
	Katie Cole	ŀ	3.50	v						0	0			0
Dire			3.50	X						0.	0.	·		0.
(20) Dire	Tammy Curtis	-	5.50	x						0.	0.			0.
	Ryan Deneen		3.50	<u>л</u>						0.	0.0	<u>'</u>		0.
Dire	-	ŀ	5.50	x						0.	0.			0.
	Jim Estes		3.50								•			
Dire	ctor			х						0.	0.			0.
(23)	Sean Goodrich		3.50											
Dire	ctor			Х						0.	0.	•		0.
(24)	Kevin Hawkins		3.50											_
Dire			<u> </u>	Х						0.	0.	·		0.
	Andrew Jenkins	-	3.50	v						0	0			0
Dire			3.50	X						0.	0.	·		0.
(20) Dire	Wrede Kirkpatrick	ŀ	2.30	x						0.	0.			0.
	0.4.4.4.4			- 23						0.	0.			0.
	Total from continuation sheets t									161,918.	0			0.
	Total (add lines 1b and 1c)									161,918.	0.	,		0.
2	Total number of individuals (includ								no r	eceived more than \$100	,000 of reportable			
_	compensation from the organization	on 🕨												1
													Yes	No
3	Did the organization list any forme line 1a? <i>If</i> "Yes," <i>complete Schedu</i>											3		x
4	For any individual listed on line 1a	, is the sur	m of reportab	le co	ompe	ensa	atior	n and	d ot	her compensation from	the organization			
	and related organizations greater	than \$150	,000? If "Yes,	" со	mple	ete S	Sche	edule	J	for such individual		4	X	
5	Did any person listed on line 1a re		•							ted organization or indivi	dual for services			
0	rendered to the organization? If ")	Yes," comp	olete Schedul	e J f	or sı	ich j	pers	son .				5		X
	tion B. Independent Contractors									March	\$100.000 of a sum of	4!		
1	Complete this table for your five h the organization. Report compens	-	-	-										
	Name and	(A) business a	address	NC	ONE	2				(B) Description of s	ervices		(C) ensatio	n
									_					
									_					
2	Total number of independent cont			ot lii	nited	d to		se lis 0	stec	d above) who received m	nore than			

Big Brothers Big Sisters of Tampa Bay, Inc.

Form 990 Tampa B	Bay, Inc.								**_**	3085
Part VII Section A. Officers, Directors,		nplo	yee	s, a	nd H	ligh	est	Compensated Employ	ees (continued)	
(A) Name and title	(B) Average hours	(cł		(C Posi all t	ition		ly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) Kara Klinger Director	3.50	x						0.	0.	0.
(28) Michael Kraskow	3.50									
Director		Х						0.	0.	0.
(29) Lisa Langer	3.50									
Director		Х						0.	0.	0.
(30) Tony Leavine	3.50									
Director		Х						0.	0.	0.
(31) James Nichols	3.50									
Director		Х						0.	0.	0.
(32) Marion Rich	3.50									
Director		X						0.	0.	0.
(33) Richard Salazar	3.50	v						0	0	0
Director	3.50	Х						0.	0.	0.
(34) Travis Santos Director	5.50	x						0.	0.	0.
(35) Todd Simmons	3.50	<u>^</u>						0.	0.	0.
Director	5.50	x						0.	0.	0.
(36) George Spowart	3.50									
Director		х						0.	0.	0.
(37) Kathryn Supernaw	3.50									
Director		х						0.	Ο.	0.
(38) Pamme Taylor	3.50									
Director		Х						0.	0.	0.
(39) Paul Vincent	3.50									
Director		Х						0.	0.	0.
(40) Danielle Vona	3.50									
Director	40.00	X						0.	0.	0.
(41) Stephen A. Koch	40.00			37				1 C 1 0 1 0	0	0
President & CEO				X				161,918.	0.	0.
										<u> </u>
	•		-							
Total to Part VII, Section A, line 1c								161,918.		

Big Brothers Big Sisters of Form 990 (2015) Tampa Bay, Inc. Part VIII Statement of Revenue

		Check if Schedule O cont	ains a response	or note to any line	e 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
its	1 a	Federated campaigns	1a	488,753.				
iran		Membership dues						
Ğ,		Fundraising events		55,154.				
ar /		Related organizations						
s, Diji		Government grants (contribut		2,606,490.				
ŝ		All other contributions, gifts, gran						
her	•	similar amounts not included abo		1,041,067.				
Ģţ	a	Noncash contributions included in lines		264,377.				
Contributions, Gifts, Grants and Other Similar Amounts	-	Total. Add lines 1a-1f			4,191,464.			
				Business Code	, ,			
ø	2 a							
ي ڏ	b							
Sei	c							
eve	d							
Program Service Revenue	e							
Pre		All other program service reve	enue					
		Total. Add lines 2a-2f						
	3	Investment income (including	dividends, inter	est, and				
		other similar amounts)		►	-10,066.	-10,066.		
	4	Income from investment of ta						
	5	Royalties		🕨 🚺				
			(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less: rental expenses						
		Rental income or (loss)						
		••••		>				
		Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
	-	and sales expenses						
	с	Gain or (loss)						
		Net gain or (loss)						
e		Gross income from fundraisin	g events (not					
Other Revenu		including \$ 55	<u>,154</u> . of					
Sev.		contributions reported on line	,					
er		Part IV, line 18						
Ę		Less: direct expenses		476,570.				
Ŭ	С	Net income or (loss) from fund	draising events	>	1,253,787.			1,253,787.
	9 a	Gross income from gaming ac						
		Part IV, line 19	а					
		Less: direct expenses						
	С	Net income or (loss) from gam	ning activities					
	10 a	Gross sales of inventory, less	returns					
		and allowances	a					
	b	Less: cost of goods sold	b					
	с	Net income or (loss) from sale	s of inventory .	►				
		Miscellaneous Revenu	e	Business Code				
	11 a	BP Settlement Income		900099	179,069.	179,069.		
	b							
	с							
		All other revenue						
		Total. Add lines 11a-11d		►	179,069.			
	12	Total revenue. See instructions.			5,614,254.	169,003.	Ο.	1,253,787.

Big Brothers Big Sisters of
Tampa Bay, Inc.Part IX Statement of Functional Expenses

Pa	rt IX Statement of Functional Expens	es			
Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	er organizations must co	omplete column (A).	
	Check if Schedule O contains a respor	nse or note to any line in	this Part IX		
	not include amounts reported on lines 6b, 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,	161,918.	124,677.	12,953.	24,288.
6	trustees, and key employees Compensation not included above, to disqualified	101, 510.	124,077•	12,555	24,200.
6	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	3,256,949.	2,507,851.	260,556.	488,542.
8	Pension plan accruals and contributions (include	-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_,,		
Ū	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	328,523.	252,963.	26,282.	49,278.
10	Payroll taxes	248,387.	191,258.	19,871.	37,258.
11	Fees for services (non-employees):				
а	Management				
b	Legal				
с	Accounting	177,065.	136,340.	14,165.	26,560.
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
	column (A) amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion	179,830.	138,469.	14,386.	26,975.
13	Office expenses	1/9,030.	130,409.	14,300.	20,975.
14	Information technology				
15 16	Royalties	217,282.	167,308.	17,382.	32,592.
17	Occupancy Travel		20770001		01/0711
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	10,767.	8,291.	861.	1,615.
20	Interest	8,392.	6,462.	671.	1,259.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	49,459.	38,083.	3,957.	7,419.
23	Insurance	94,820.	73,011.	7,586.	14,223.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
я	Miscellaneous	257,776.	247,700.	3,506.	6,570.
b	Volunteer evaluations	114,077.	87,839.	9,126.	17,112.
c	Dues	79,731.	61,393.	6,378.	11,960.
d	Bad debt	74,035.	57,007.	5,923.	11,105.
e	All other expenses	45,726.	35,209.	3,658.	6,859.
25	Total functional expenses. Add lines 1 through 24e	5,304,737.	4,133,861.	407,261.	763,615.
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 Figure if following SOP 98-2 (ASC 958-720)				
50004	0 12-16-15				Form 990 (2015)

11

12 13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

32

33

34

Schedule D

_iabilities

Vet Assets or Fund Balances

10a Land, buildings, and equipment: cost or other

basis. Complete Part VI of Schedule D

b Less: accumulated depreciation 10b

Total assets. Add lines 1 through 15 (must equal line 34)

Form	ı 990 (i	Big Brothers Big Sisters of Tampa Bay, Inc.		**_	*
Pa	rt X	Balance Sheet			_
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		
	1	Cash - non-interest-bearing	262,685.	1	
	2	Savings and temporary cash investments	105,219.	2	
	3	Pledges and grants receivable, net	362,872.	3	
	4	Accounts receivable, net	50,295.	4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ţ		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	L
<	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	47,088.	9	

10a

Investments - publicly traded securities

Investments - other securities. See Part IV, line 11

Investments - program-related. See Part IV, line 11

Intangible assets

Other assets. See Part IV, line 11

Accounts payable and accrued expenses

Grants payable

Deferred revenue Tax-exempt bond liabilities

Escrow or custodial account liability. Complete Part IV of Schedule D

Loans and other payables to current and former officers, directors, trustees,

key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🔟 and

Unrestricted net assets

Temporarily restricted net assets

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here

Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of

Total liabilities. Add lines 17 through 25

and complete lines 30 through 34.

complete lines 27 through 29, and lines 33 and 34.

903,758.

534,352.

41,081.

11,783.

1,667.

882,690.

52,153.

3,500.

55,653.

601,480.

170,809.

827,037.

882,690.

54,748.

10c

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30 31

32

33

34

(B) End of year

> 976,630. 204,782.

479,470.

140,606.

57,337.

369,406.

228,608.

2,515.

2,932.

6,350.

2,462,286.

128,412.

168,426.

303,188.

1,498,804.

431,685.

228,609.

2,462,286. Form **990** (2015)

2,159,098.

	Big Brothers Big Sisters of	**_**	+2005		40
	n 990 (2015) Tampa Bay, Inc. rt XI Reconciliation of Net Assets	~~_~~	*3085	Pa	ge 12
14					X
	Check if Schedule O contains a response or note to any line in this Part XI	·····			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,61	4,2	54.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,30		
3	Revenue less expenses. Subtract line 2 from line 1	3			17.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	82	7,0	37.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6	1,09	2,8	25.
7	Investment expenses	7			
8	Prior period adjustments	8			95.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-1	7,6	86.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	2,15	9,0	98.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
4	Accounting method used to prepare the Form 990: Cash X Accrual Other			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
22	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		x
Za	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed		2a		
	separate basis, consolidated basis, or both:	uona			
	Separate basis, consolidated basis, or both.				
h	Were the organization's financial statements audited by an independent accountant?		2b	х	
, D	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat		25		
	consolidated basis, or both:	0 00010,			
	X Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit			
-	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si				
	Act and OMB Circular A-133?	<u> </u>	3a	х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	х	

SCHE	DULE A						-	I	OMB No. 1545-0047
	90 or 990-EZ)			arity Status ar					2015
•	,	Co		janization is a section 50 4947(a)(1) nonexempt cha			or a section		ZU I J
Department	of the Treasury			Attach to Form 990 or I					Open to Public
Internal Reve	nue Service			A (Form 990 or 990-EZ) and		tions is at W	ww.irs.gov/fo	rm990.	Inspection
Name of	the organizati	•		Big Sisters c	f				identification number
Dert	Decem		a Bay, In						*-***3085
Part I				S (All organizations must c			e instruction	S.	
				s: (For lines 1 through 11, o					
				ation of churches describe)(A)(i).		
2). (Attach Schedule E (Forr					
3	•	•		organization described in s					
4		-	ation operated in	conjunction with a hospita	l describe	d in sectio	n 170(b)(1)(A)(iii). Enter 1	the hospital's name,
	city, and stat								
5				college or university owne	d or opera	ited by a go	overnmental	unit describ	ed in
c 🗌			Complete Part II.)			70/1-1/41/41/			
6 🗌 7 X		-	-	rnmental unit described in			-	ha ganaral	nublic described in
/ [2]	0			stantial part of its support	from a gov	ernmental	unit or from	ne general	public described in
8	-		complete Part II.)	(b)(1)(A)(vi). (Complete Par	+ 11 \				
9				ore than 33 1/3% of its su	,	contributio	ne mombor	shin foos a	nd gross receipts from
J				pject to certain exceptions					
				me (less section 511 tax) fr					
			mplete Part III.)			0000 0090		gamzation	
10				lusively to test for public sa	afety. See	section 50	9(a)(4).		
11 🗌	-	-	-	lusively for the benefit of, t	•			arry out the	purposes of one or
	more publicly	supported or	ganizations descr	ibed in section 509(a)(1)	or section	509(a)(2). S	See section	5 09(a)(3). C	heck the box in
	lines 11a thro	ough 11d that	describes the typ	e of supporting organizatio	on and con	nplete lines	11e, 11f, an	d 11g.	
a 🗌	Type I. A s	upporting orga	anization operated	l, supervised, or controlled	by its sup	ported org	anization(s),	typically by	giving
	the suppor	ted organizatio	on(s) the power to	regularly appoint or elect	a majority	of the direc	ctors or truste	ees of the s	upporting
	organizatio	n. You must c	complete Part IV,	Sections A and B.					
b 🗌	Type II. A s	supporting org	anization supervis	sed or controlled in connec	tion with i	ts supporte	ed organizatio	on(s), by ha	ving
	control or r	nanagement c	of the supporting o	organization vested in the s	same pers	ons that co	ntrol or mana	age the sup	ported
	¬ ~	. ,	-	V, Sections A and C.					
c 🗆	••	-	• •	ting organization operated				lly integrate	ed with,
		•	.,.	ons). You must complete					
d 🗆	••			pporting organization ope				•	.,
		-		nization generally must sa	•		-	d an attenti	veness
. [- ·		,	complete Part IV, Section				II. True e III.	
e 🗆		•		a written determination fro			турет, туре	п, туре п	
f Ent	-	-		tionally integrated support		zation.			
		••	•	orted organization(s).					
	(i) Name of supp	<u> </u>	(ii) EIN	(iii) Type of organization		organization	(v) Amount o	monetary	(vi) Amount of
	organizatior	1		(described on lines 1-9		in your document?	support	(see	other support (see
				above (see instructions))	Yes	No	instruct	ions)	instructions)
Total									
	Deportwork Do	duction Act N	l Notico soo the In	atructions for			Soho	dulo A (Eor	m 990 or 990-E7) 2015

Big Brothers Big Sisters of

Schedule A (Form 990 or 990-EZ) 2015 Tampa Bay, Inc. Part II Support Schedule for Organizations Descri

-<u>*3085</u> Page 2

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2,225,921.	2,245,949.	2,433,713.	3,249,000.	4,191,464.	14,346,047.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	2,225,921.	2,245,949.	2,433,713.	3,249,000.	4,191,464.	14,346,047.
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.						14,346,047.
	ction B. Total Support	I					
	ndar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	2,225,921.	2,245,949.	2,433,713.	3,249,000.	4,191,464.	14,346,047.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	902.	448.	470.	156.	-10,066.	-8,090.
9	Net income from unrelated business						
-	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)	3,704.	470.	150.	75.	179.069.	183,468.
11	Total support. Add lines 7 through 10	0 / / 0 1 0	1,01		,		14,521,425.
	Gross receipts from related activities,	etc. (see instructio	(ne)			12	
	First five years. If the Form 990 is for			fourth or fifth tax	 x vear as a sectio		
10	organization, check this box and stop	-				11001(0)(0)	
Sec	ction C. Computation of Publi	ic Support Per	centage				
	Public support percentage for 2015 (li			olumn (f))		14	98.79 %
	Public support percentage from 2014					15	95.70 %
	33 1/3% support test - 2015. If the o						
	stop here. The organization qualifies	-					
h	33 1/3% support test - 2014. If the o						
~	and stop here. The organization quali	-					
17a	10% -facts-and-circumstances test						
.,,	and if the organization meets the "fac						
	meets the "facts-and-circumstances"				-	-	
Ь	10% -facts-and-circumstances test						
N.	more, and if the organization meets th	-					
	organization meets the "facts-and-circ						
10	•		•	•			
IÖ	Private foundation. If the organization	n ulu not check a l	JUX UIT IIITIE 13, 16a	, 100, 178, 01 170	, check this dox a	ind see instruction:	> ▶∟

Schedule A (Form 990 or 990-EZ) 2015

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support							
Calendar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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 per- formed, 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 organ-							
ization'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 disgualified persons							
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
c Add lines 7a and 7b							
8 Public support. (Subtract line 7c from line 6.)							<u> </u>
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	6) 2015	(f) Total
9 Amounts from line 6	(a) 2011	(0) 2012	(0) 2013	(u) 2014	(6	12013	(I) IOLAI
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
b Unrelated business taxable income							
(less section 511 taxes) from businesses							
acquired after June 30, 1975							
 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 							
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
13 Total support. (Add lines 9, 10c, 11, and 12.)					<u> </u>) (0)	L
14 First five years. If the Form 990 is for	0	, ,	, ,	,	`		
check this box and stop here						<u></u>	>
Section C. Computation of Publi		-	(2)				
15 Public support percentage for 2015 (li					15		%
16 Public support percentage from 2014					16		%
Section D. Computation of Inves		•					
17 Investment income percentage for 20			ne 13, column (f))	•••••	17		%
18 Investment income percentage from 2					18		%
19a 33 1/3% support tests - 2015. If the						b, and line 1	7 is not
more than 33 1/3%, check this box an						- 00 1 /00/	►
b 33 1/3% support tests - 2014. If the o	•			•			
line 18 is not more than 33 1/3%, chec							
20 Private foundation. If the organization	i did not check a	1 box on line 14, 19	a, or 19b, check t	nis box and see in	structio	ns	▶∟

-*3085 Page 4

Schedule A (Form 990 or 990 EZ) 2015 Tampa Bay, Inc. Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer* (*b*) *and* (*c*) *below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If* "Yes," *describe in Part VI when and how the organization made the determination.*
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked 11a or 11b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, Ioan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "*Yes*," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in Part VI.*
- **c** Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "Yes," *provide detail in Part VI.*
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2	_	
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b	_	<u> </u>
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

Big Brothers Big Sisters of

-*3085 Page 5

Sche	dule A (Form 990 or 990-EZ) 2015 Tampa Bay, Inc. *	*-**308	5 Pa	age 5
	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
-	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	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,			
800	supervised, or controlled the supporting organization.	2		<u> </u>
Sec	tion C. Type II Supporting Organizations		Yes	No
4	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		Tes	NO
1	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		
Sec	tion D. All Type III Supporting Organizations			i
			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 in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion 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 yea(see instruc	ctions):		
a	The organization satisfied the Activities Test. <i>Complete line 2 below.</i>			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>	,	,	
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	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.	2a		
h	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	Zd		
u	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 been engaged in the se			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	20		
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
a	trustees of each of the supported organizations? Provide details in <i>Part VI.</i>	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	Зb		
				<u> </u>

Schedule A (Form 990 or 990-EZ) 2015

Big Brothers Big Sisters of

Schedule A (Form 990 or 990-EZ) 2015 Tampa Bay, Inc. 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. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 2 Other gross income (see instructions) 3 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or 6 collection of gross income or for management, conservation, or 6 maintenance of property held for production of income (see instructions) 7 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior 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 Subtract line 2 from line 1d 3 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, 4 see instructions). 4 5 5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by .035 6 6 Recoveries of prior-year distributions 7 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 1 2 Enter 85% of line 1 2 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 4 Enter greater of line 2 or line 3 4 5 5 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to 6 emergency temporary reduction (see instructions) 6

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

Schedule A (Form 990 or 990-EZ) 2015

Big Brothers Big Sisters of 990-EZ 2015 Tampa Bay, Inc.

Sche	dule A (Form 990 or 990-EZ) 2015 Tampa Bay, In	C.	*	*-***3085 Page 7
Pa		(a)(3) Supporting Orga	anizations (continued)	× · · ·
Sect	ion D - Distributions		(00//////00/	Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exemption	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	S	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsive	9	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	-		
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015:			
a				
b				
C				
d	From 2013			
e	From 2014			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2015 distributable amount			
i	Carryover from 2010 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2015 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2015, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2016. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а				
b				
с	Excess from 2013			
d	Excess from 2014			
e	Excess from 2015			
			.	

Schedule A (Form 990 or 990-EZ) 2015

Schedule A	(Form 990 or 990-EZ) 2015				Sisters	of	**-***3085 Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1, line 1; Part IV, Section D, li	nation. F 2, 3b, 3c, 4 nes 2 and	Provide the e 1b, 4c, 5a, 6, 3; Part IV, Se	xplanation , 9a, 9b, 9c ection E, lir	;, 11a, 11b, and ⁻ nes 1c, 2a, 2b, 3a	11c; Part IV, Sectic a and 3b; Part V, Iir	line 17a or 17b; Part III, line 12; on B, lines 1 and 2; Part IV, Section C, ne 1; Part V, Section B, line 1e; Part V, any additional information.

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

 Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990. OMB No. 1545-0047

Employer identification number

Name of the organization

Schedule B

(Form 990, 990-FZ.

Department of the Treasury

Internal Revenue Service

or 990-PF)

Big Brothers Big Sisters of

Tampa Bay, Inc.

-*3085

Organization	type	(check one)	۱٠
or guinzation	JPC 1		<i>.</i>

Section:
X 501(c)(3) (enter number) organization
4947(a)(1) nonexempt charitable trust not treated as a private foundation
527 political organization
501(c)(3) exempt private foundation
4947(a)(1) nonexempt charitable trust treated as a private foundation
501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

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

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, 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. Do not 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 is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Schedule B	(Form 99	0, 990-EZ	, or 990-PF) (2015)
------------	----------	-----------	-------------	----------

Name of organization Big Brothers Big Sisters of Tampa Bay, Inc.

-*3085

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a)	(b)	(c)	(d)			
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution			
1		- \$\$148,728.	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a)	(b)	(c)	(d)			
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution			
2		- \$ <u>293,468.</u> -	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
3		- \$ <u>256,591.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
4		- \$ <u>613,411.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
5		- \$ <u>1,123,159.</u> -	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
6		\$495,096.	Person X Payroll Noncash (Complete Part II for noncash contributions.)			

Schedule B (Form 990, 990)-EZ, or 990-PF) (2015)
---------------------------	-------------------------

Name of organization

Big Brothers Big Sisters of Tampa Bay, Inc.

-*3085

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		¢	
		\$	

Name of orga	(Form 990, 990-EZ, or 990-PF) (2015) anization others Big Sisters of		Page 4 Employer identification number		
	Bay, Inc.		**-***3085		
Part III	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete completing Part III, enter the total of exclusively religiou	columns (a) through (e) and the follow	n section 501(c)(7), (8), or (10) that total more than \$1,000 for ing line entry. For organizations ess for the year. (Enter this info. once.) \$\$		
	Use duplicate copies of Part III if addition	al space is needed.	· · · ·		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-		(e) Transfer of gift			
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gift			
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-		(e) Transfer of gift	I		
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gift			
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		

SC	HEDULE D	Supplement	al Financial Statements		OMB No. 1545-0047
	n 990)	Complete if the organization answered "Yes" on Form 990,			2015
Depart	ment of the Treasury	Part IV, line 6, 7, 8, 9, 10	, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.		Open to Public
	Revenue Service	Information about Schedule D (For	rm 990) and its instructions is at www.irs.	gov/form9	90. Inspection
Nam	e of the organizati		isters of	Em	ployer identification number * * - * * * 3085
Pa	t I Organiza	Tampa Bay, Inc.	d Funds or Other Similar Funds		
1 0		n answered "Yes" on Form 990, Part IV, lir			
	organizatio		(a) Donor advised funds	(b) Fu	nds and other accounts
1	Total number at er	nd of year			
2		f contributions to (during year)			
3	Aggregate value o	f grants from (during year)			
4	Aggregate value a	t end of year			
5	-		writing that the assets held in donor advised		
			exclusive legal control?		Ves No
6	•		dvisors in writing that grant funds can be u	•	
			or donor advisor, or for any other purpose co	-	
Pa			ganization answered "Yes" on Form 990, Pa		
1		servation easements held by the organizat		art iv, iirie i	
		n of land for public use (e.g., recreation or e		ically impo	stant land area
		of natural habitat	Preservation of a certific	, ,	
		n of open space			
2		• •	fied conservation contribution in the form of	a conserv	ation easement on the last
	day of the tax yea	• •			Held at the End of the Tax Year
а	Total number of co	onservation easements		2a	
b					
с	Number of conser	vation easements on a certified historic str	ucture included in (a)	2c	
d	Number of conser	vation easements included in (c) acquired	after 8/17/06, and not on a historic structur	e	
3		vation easements modified, transferred, re	leased, extinguished, or terminated by the o	organizatio	n during the tax
	year ►				
4		where property subject to conservation ea			
5		tion have a written policy regarding the pe	t holds?		Yes No
6			handling of violations, and enforcing conse		
Ŭ		i nouis devoted to monitoring, inspecting,		a valion ca	sements during the year
7	Amount of expens	 ses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation	on easeme	ents during the year
	▶\$	5, 1 5,	5 , 5		5 ,
8	Does each conser	vation easement reported on line 2(d) abov	ve satisfy the requirements of section 170(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, descril	be how the organization reports conservat	on easements in its revenue and expense s	tatement,	and balance sheet, and
		-	tion's financial statements that describes th	ie organiza	ation's accounting for
De	conservation ease		f Art Historical Traceurse ar Oth		
Pa			f Art, Historical Treasures, or Oth	ier Simi	iar Assets.
		f the organization answered "Yes" on Form			
Ia	•		SC 958), not to report in its revenue stateme nibition, education, or research in furtherand		
		tnote to its financial statements that descr			c service, provide, in Part Alli,
b			SC 958), to report in its revenue statement a	nd balanc	e sheet works of art historical
-	-		ducation, or research in furtherance of publ		
	relating to these it		,		,
	-			►	\$
2	If the organization		asures, or other similar assets for financial g		de
	the following amou	unts required to be reported under SFAS 1	16 (ASC 958) relating to these items:		
а	Revenue included	on Form 990, Part VIII, line 1		►	\$
				►	
LHA	For Paperwork R	eduction Act Notice, see the Instruction	s for Form 990.		Schedule D (Form 990) 2015

LHA For Pa	aperwork Reduction	Act Notice, see t	the Instructions fo	r Form 990
532051 11-02-15				

		thers Big	Sisters of						
		ay, Inc.			* *	-***3085	5 Page 2		
Par	t III Organizations Maintaining C	Collections of A	rt, Historical Tr	easures, or Oth	er Similar /	Assets(contin	ued)		
3	Using the organization's acquisition, access	ion, and other record	ls, check any of the	following that are a	significant use	of its collection	ı items		
	(check all that apply):								
а	Public exhibition	d	Loan or exc	hange programs					
b	Scholarly research	e	Other						
с	c Preservation for future generations								
4	Provide a description of the organization's c	ollections and explai	n how they further t	he organization's exe	empt purpose	in Part XIII.			
5	During the year, did the organization solicit of	or receive donations	of art, historical trea	sures, or other simila	ar assets				
	to be sold to raise funds rather than to be maintained as part of the organization's collection?								
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the organizatio	n answered "Yes" o	n Form 990, P	art IV, line 9, or			
	reported an amount on Form 990, Pa	rt X, line 21.							
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for contribution	is or other assets no	t included				
	on Form 990, Part X?					📖 Yes	└── No		
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:						
						Amount			
С	Beginning balance				1c				
d	Additions during the year				1d				
е	Distributions during the year				1e				
f	Ending balance				1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or cu	ustodial account liab	ility?	🔛 Yes	L No		
	If "Yes," explain the arrangement in Part XIII.								
Par	t V Endowment Funds. Complete i	if the organization an	swered "Yes" on Fo	orm 990, Part IV, line	10.				
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years		years back		
	Beginning of year balance	247,208.	47,156.	32,778.		,887.	19,290.		
b	Contributions	1,675.	7,592.	14,378.	8	,891.	4,597.		
С	Net investment earnings, gains, and losses	-11,122.							
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs	9,153.							
f	Administrative expenses								
g	End of year balance	228,608.	54,748.	47,156.	32	,778.	23,887.		
2	Provide the estimated percentage of the cur	rent year end balanc	e (line 1g, column (a	a)) held as:					
а	Board designated or quasi-endowment		_%						
b	Permanent endowment 100.00	%							
С	Temporarily restricted endowment	%							
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.							
3a	Are there endowment funds not in the posse	ession of the organization	ation that are held a	nd administered for	the organization	on –			
	by:						Yes No		
	(i) unrelated organizations					3a(i)	X		
	(ii) related organizations						X		
b	If "Yes" on line 3a(ii), are the related organization					3b			
4	Describe in Part XIII the intended uses of the		wment funds.						
Par	t VI Land, Buildings, and Equipm								
	Complete if the organization answere	d "Yes" on Form 990			(, line 10.				
	Description of property	(a) Cost or o	• •		Accumulated	(d) Book	value		
		basis (investr	,	(other) de	preciation				
	Land		000.				4,000.		
	Buildings				157,423		3,973.		
	Leasehold improvements	44.0	830.		43,830		0.		
	Equipment		532.		333,099	• 86	5,433.		
	Other								
Total	Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, column (B), line 1	0c.)	🕨	369	9,406.		

Schedule D (Form 990) 2015

Big	B	rothe	rs	Big	Sisters	of
Tamp	зa	Bay,	Ιı	nc.		

Schedule D (Forn				Inc.			**.	-***3085 F	Page 3
Part VII Inv	estments	s - Other Secu	rities.						
				on Form 990, F	Part IV, line	11b. See Form 990, Part	X, line 12.		
(a) Description of	f security or c	ategory (including name	e of security)	(b) Book	value	(c) Method of valuat	tion: Cost or end	l-of-year market val	lue
(1) Financial deri	ivatives								
(2) Closely-held		ests							
(3) Other									
(A) Benef	ficial	interest	in a						
	etual t			228	3,608.	End-of-Yea:	r Market	Value	
(C)									
(D)									
(E)									
(F)									
(G)									
(H)									
	at aqual Form	000 Dart V col (D)	ino 10) 🕨	228	3,608.				
		990, Part X, col. (B) - Program Re		220	,000•				
		-			No. + N/ Koo - 1	11 - O Fame 000 David	V line 10		
		organization answe	ered "Yes	(b) Book		11c. See Form 990, Part (c) Method of valuat	X, line 13.	of yoar market ya	
	Description	I OI IIIVESLITIEITL			value			-or-year market var	
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
		990, Part X, col. (B) I	ine 13.) ►						
Part IX Oth	ner Asset	s.							
Con	nplete if the	organization answe			Part IV, line	11d. See Form 990, Part	X, line 15.		
			(a)	Description				(b) Book valu	le
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
) must equa	al Form 990, Part X,	col. (B) lir	ne 15.)					
	ner Liabili		()	/			F 1		
Con	nplete if the	organization answe	ered "Yes'	' on Form 990. F	Part IV. line [.]	11e or 11f. See Form 99). Part X. line 25		
1.) Description of liab				b) Book value		-	
	ncome taxes		,			,			
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)				25.)					
		al Form 990, Part X,			🕨				
2. Liability for un	ncertain tax	positions. In Part >	(III, provid	e the text of the	footnote to	the organization's finan	cial statements t	hat reports the	

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII 🗴

	Big Brothers Big Sisters of	-			
Sche	dule D (Form 990) 2015 Tampa Bay, Inc.			**_	***3085 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	nts Wi	th Revenue per R	leturr	າ.
	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	6,707,079.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	1,092,825.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	1,092,825.
3	Subtract line 2e from line 1			3	5,614,254.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			_
с	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	5,614,254.
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme	ents W	ith Expenses per	Retu	irn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	6,397,562.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	1,092,825.		
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	1,092,825.
3	Subtract line 2e from line 1			3	5,304,737.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			•
С	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	5,304,737.
Pa	t 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 V, line 4:

The Organization receives income from certain endowment funds that are
neither in the Organization's possession nor under its control. These
external endowment assets are held in perpetuity and are invested and
managed by outside trustees in accordance with trust agreements as
directed by the donors.
In 2002, the Organization established an endowment account with the
Pinellas County Community Foundation (PCCF) in the amount of \$10,000. In
2009, the Organization established the Charles Manly endowment account
with the Community Foundation of Tampa Bay (CFTB). It is the intent of the
donors and the Organization to accumulate donations and earnings until the
fund reaches a balance of \$25,000. Although the Organization does not have
532054 09-21-15 Schedule D (Form 990) 2015

Schedule D (Form 990) 2015 Part XIII Supplemental Information (continued) the right to receive the endowment assets per the Trust Agreement, the contribution to the endowment fund is considered an asset of the Organization as it has been named beneficiary. Earnings on the endowment funds are periodically distributed to the Organization in accordance with the trust agreement. In 2013, the Organization established a scholarship endowment account with the Community Foundation of Tampa Bay. The Organization utilized CFTB's Leave a Challenge Grant Program (the Grant Program) which incorporates a one-to-three match. The Organization had a goal of raising \$50,000 with \$37,500 to be raised by the Organization and \$12,500 to be awarded through the Grant Program. As of January 2014, the Organization was awarded the challenge grant by CFTB. Although the Organization does not have the right to receive the endowment assets per the Trust Agreement, the contribution to the endowment fund is considered an asset of the Organization as it has been named beneficiary. Earnings on the endowment funds are distributed to the Organization semi-annually at a distribution rate between 3.50% -5.50% of the fund's balance as of December 31st of the year preceding the distribution. For 2015, the spending policy is 4% of the December 31, 2014 endowment account balance.

Part X, Line 2:

The Organization accounts for the effect of any uncertain tax positions based on a "more likely than not" threshold to the recognition of the tax positions being sustained based on the technical merits of the position under scrutiny by the applicable taxing authority. If a tax position or positions are deemed to result in uncertainties of those positions, the unrecognized tax benefit is estimated based on a "cumulative probability assessment" that aggregates the estimated tax liability for all uncertain Schedule D (Form 990) 2015 532055 09-21-15

Big Brothers Big Sisters ofSchedule D (Form 990) 2015Tampa Bay, Inc.Part XIIISupplemental Information (continued)
tax positions. The Organization has identified its tax status as a
tax-exempt entity as its only significant tax position; however, the
Organization has determined that such tax position does not result in an
uncertainty requiring recognition. The Organization is not currently under
examination by any taxing jurisdiction. The Organization's federal returns
are generally open for examination for three years following the date
filed.

SCHEDULE G (Form 990 or 990-EZ) epartment of the Treasury ternal Revenue Service Information about Schedule G (Form 990 or 990-EZ) and its instructions is at Www.irs.gov/form990.								OMB No. 1545-0047 2015 Open to Public Inspection	
Name of the organization	Big Bro	thers Big Sisters	of	5 11150 1		<i>j</i> 01//(entification number	
	Tampa B	ay, Inc.					**_**	3085	
		Complete if the organization answ	ered "\	′es" oi	n Form 990, Part IV,	line 1	7. Form 990-E	EZ filers are not	
required to c	omplete this par								
	•	sed funds through any of the followi	•		,	•			
c Phone solicita		g 🛄 Specia							
d 🗌 In-person solid	citations								
•		or oral agreement with any individua	•	Ũ					
• • •		art VII) or entity in connection with			-		Ye L		
compensated at lea		ividuals or entities (fundraisers) purs	suant to	o agre	ements under which	the	undraiser is to	be	
			1		1	1			
(i) Name and address or entity (fundra		(ii) Activity	have c	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	tò (c	Amount paid or retained by fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization	
			Yes	No					
			-						
Total				. 🕨					
 List all states in which or licensing. 	h the organizatio	n is registered or licensed to solicit	contrib	outions	s or has been notifie	d it is	exempt from	registration	

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

Schedule G (Form 990 or 990-EZ) 2015

Big Brothers Big Sisters of Schedule G (Form 990 or 990-EZ) 2015 Tampa Bay, Inc.

-*3085 Page 2

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.

	sts greater than \$5,000.						
		(2) = 0.00 %			(d) Total events		
		Annual Gala		7	(add col. (a) through		
		(event type)	(event type)	(total number)	col. (c))		
1	Gross receipts	651,144	. 349,881.	784,486.	1,785,511.		
2	Less: Contributions	45,879	. 660.	8,615.	55,154.		
3	Gross income (line 1 minus line 2)	605,265	. 349,221.	775,871.	1,730,357.		
4	Cash prizes			625.	625.		
5	Noncash prizes						
6	Rent/facility costs	13,357	. 47,729.	11,300.	72,386.		
7	Food and beverages	72,320	. 22,856.	3,108.	98,284.		
8	Entertainment				16,598.		
9	Other direct expenses	96,557	. 18,449.	173,671.	288,677. 476,570.		
10	10 Direct expense summary. Add lines 4 through 9 in column (d)						
11 Net income summary. Subtract line 10 from line 3, column (d)							
	3 4 5 6 7 8 9 10	 2 Less: Contributions	(event type) 1 Gross receipts 651,144 2 Less: Contributions 45,879 3 Gross income (line 1 minus line 2) 605,265 4 Cash prizes 605,265 4 Cash prizes 13,357 5 Noncash prizes 13,357 6 Rent/facility costs 13,357 7 Food and beverages 72,320 8 Entertainment 16,598 9 Other direct expenses 96,557 10 Direct expense summary. Add lines 4 through 9 in column (d)	Annual Gala Companies for Kids (event type) (event type) 1 Gross receipts 651,144. 349,881. 2 Less: Contributions 45,879. 660. 3 Gross income (line 1 minus line 2) 605,265. 349,221. 4 Cash prizes	Annual Gala Companies for Kids 7 1 Gross receipts 651,144. 349,881. 784,486. 2 Less: Contributions 45,879. 660. 8,615. 3 Gross income (line 1 minus line 2) 605,265. 349,221. 775,871. 4 Cash prizes 605,265. 349,221. 775,871. 5 Noncash prizes 13,357. 47,729. 11,300. 6 Rent/facility costs 72,320. 22,856. 3,108. 8 Entertainment 16,598. 9 90,557. 18,449. 173,671. 10 Direct expenses summary. Add lines 4 through 9 in column (d) 10 10 10 10		

\$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))				
Rev	1 Gross revenue								
es	2 Cash prizes								
Direct Expenses	3 Noncash prizes								
Direct [4 Rent/facility costs								
	5 Other direct expenses								
	6 Volunteer labor	└── Yes % └── No	└── Yes % └── No	Yes%					
	7 Direct expense summary. Add lines 2 through	n 5 in column (d)							
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)								
	Enter the state(s) in which the organization condu a Is the organization licensed to conduct gaming a b If "No," explain:	ctivities in each of these	states?		Yes No				
	a Were any of the organization's gaming licenses re o If "Yes," explain:			year?	Yes No				

Sch	medule G (Form 990 or 990-EZ) 2015 Tampa Bay, Inc.	* _ * * *	*3085	Page 3
_	Does the organization conduct gaming activities with nonmembers?		Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed	_		 .
40	to administer charitable gaming?	L	_ Yes	└── No
	Indicate the percentage of gaming activity conducted in:	يد ا	5 1	0/
	a The organization's facility		Ba	%
	An outside facility Enter the name and address of the person who prepares the organization's gaming/special events books and records	·····	Bb	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	3.		
	Name			
	Address 🕨			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	No No
ł	o If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amour	nt		
	of gaming revenue retained by the third party \blacktriangleright \$			
Ċ	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
ł	• 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 🕨 \$			
Pa	art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa	rt III, lines	9, 9b, 1	0b, 15b,
	15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).			

Part IV	Supplemental Information (continued)	
rarere		

sc	HEDULE J Compensation Information	OMB No.	1545-0047
(Fo	rm 990) For certain Officers, Directors, Trustees, Key Employees, and Highest	20	15
	Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.	20	IJ
Depa	Ttment of the Treasury Attach to Form 990.	Open to	
Intern	al Revenue Service Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form99		
Nan	· · · · · · · · · · · · · · · · · · ·	ployer identificati	
	Tampa Bay, Inc.	**-**308	5
Ра	rt I Questions Regarding Compensation		
			Yes No
a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990),	
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
	First-class or charter travel		
	Travel for companions Payments for business use of personal reside	nce	
	Tax indemnification and gross-up payments Health or social club dues or initiation fees		
	Discretionary spending account		
h	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or		
0	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,		
-	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization	ı's	
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization t		
	establish compensation of the CEO/Executive Director, but explain in Part III.		
	Compensation committee Written employment contract		
	Independent compensation consultant		
	Form 990 of other organizations	nittee	
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing		
	organization or a related organization:		
а	Receive a severance payment or change-of-control payment?		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		
-	contingent on the revenues of:	Fo	X
a ⊾	The organization?	5a 5b	
u	Any related organization? If "Yes" to line 5a or 5b, describe in Part III.	00	
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		
Ŭ	contingent on the net earnings of:		
а	The organization?	6a	X
	Any related organization?		X
-	If "Yes" on line 6a or 6b, describe in Part III.		
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments		
	not described on lines 5 and 6? If "Yes," describe in Part III	7	X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the		
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in		
	Regulations section 53.4958-6(c)?		
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule J (Forr	n 990) 2015

Big Brothers Big Sisters of Tampa Bay, Inc.

-*3085

Page **2**

Schedule J (Form 990) 2015

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	
		(i) Base (ii) Bonus & incentive compensation		(iii) Other reportable compensation	compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) Stephen A. Koch	(i)	161,918.	0.	0.		0.		0
President & CEO	(ii)	0.	0.	0.	0.	0.	0.	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(i) (ii)							
	(i)							
	(i) (ii)							
	(i)							
	(ii)			<u> </u>				
	(i)							
	(ii)							

Schedule J (Form 990) 2015

Page 3

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Part I, Line 3:

There is an independent review by the Board chair and executive committee,

relying on information from outside consultants nationally and locally for

top management and key employees for the organization

(Fo	rm 990)						20	15	
				answered "Yes" o	n Form 990, Part IV, lines 2	29 or 30.			
	nent of the Treasury Revenue Service	Attach to Form 990					Open To Inspe		c
					s instructions is at www.irs		-		mh ar
Name	e of the organization	J		isters of			identificatio * - * * * 3		nber
Par	tl Types of	Tampa Bay, I Property						000	
1 41		Поренц	(a)	(b)	(c)		(d)		
			Check if	Number of	Noncash contribution	Method	l of determin	ing	
			applicable		amounts reported on Form 990, Part VIII, line 1g	noncash co	ntribution ar	nounts	5
1	Art - Works of art			items contributed	Form 990, Part VIII, line Tg				
2		sures							
3		erests							
4		ations							
5		ehold goods							
6		hicles							
7									
8		+.,							
9		ty							
		ly traded							
10		y held stock							
11	Securities - Partne								
10									
12 13	Qualified conserva	laneous							
13									
-14		tion contribution. Other							
		ation contribution - Other							
15		lential							
16		mercial							
17		r							
18									
19 00									
20		l supplies							
21									
22									
23		ns							
		acts	X	30	209,223.				
25 00	· · -	uction Items		30	<u> </u>	T. TI A			
26	Other ()							
27 00	Other ()							
28	Other ())	lanation during						
		8283 received by the organ nization completed Form 82		• •					
								Yes	No
30a	• •	•			ported in Part I, lines 1 throu				
		•			d which is not required to be				37
			l?				<u>30a</u>	_	<u>X</u>
		the arrangement in Part II.							37
31					of any non-standard contrib		31		X
32a	•	tion hire or use third parties	or related o	rganizations to soli	cit, process, or sell noncash				v
	contributions?						32a		х

Noncash Contributions

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

Schedule M (Form 990) (2015)

OMB No. 1545-0047

b If "Yes," describe in Part II.

describe in Part II.

SCHEDULE M

Big	Br	othe	rs	Big	Sisters	of
Tamr	าล	Bav	Τr	n C		

Schedule M	(Form 990) (2015)	Tampa	Bav,	Inc.		**-***3085	Page 2
Part II	Supplemental	Informa	tion. Pro	vide the inf	ormation required by Part I, lines 30b, 32b, and 33 tributions, the number of items received, or a con	3 and whether the organiza	ation
	this part for any ac	Iditional Info	ormation.				

SCHEDULE O (Form 990 or 990-EZ) (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. Department of the Treasury Internal Revenue Service Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/responses		OMB No. 1545-0047				
Name of the organization Big Brothers Big Sisters of Tampa Bay, Inc.		dentification number * * 3 0 8 5				
Form 990, Part III, Line 3, Changes in Program Services:						
Effective January 1, 2015 Big Brothers Big Sisters of Pin	ellas C	County,				
Inc., merged with Big Brothers Big Sisters of Tampa Bay,	Inc. Th	newly				
merged entity retains the name Big Brothers Big Sisters o	f Tampa	Bay,				
Inc. as the surviving entity and new bylaws have been ado	pted.					
	<u>_</u>					
Form 990, Part VI, Section B, line 11:						
The 990 is reviewed by the CEO and Chief Financial & Oper	ating 0	ficor				
before being forwarded to the Board Treasurer and Chairma	n of th	le Audit				
Committee for review. After this review process has taken	place	it will be				
provided to all Board members for review, prior to filing	•					
Form 990, Part VI, Section B, Line 12c:						
The Board of Directors is required to sign a conflict of	interes	st policy				
every year.						
Form 990, Part VI, Section B, Line 15:						
There is an independent review by the Board chair and Exe	cutive	Committee,				
relying on information from outside consultants nationally and locally for						
top management and key employees for the organization						
Form 990, Part VI, Section C, Line 18:						
The Form 990 is posted to the Organization's website.						
0.0001001 0 01901100101 0 0001000						

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

All governing documents, conflict of interest policy, and financial

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
Name of the organization Big Brothers Big Sisters of Tampa Bay, Inc.	Employer identification number **-**3085
statements are available to the public upon request.	
Form 990, Part XI, line 9, Changes in Net Assets:	
Related to merger of Big Brothers Big Sisters of Pinellas	
County, Inc.	-17,686.