AGENDA
SESSION OF THE PARKS AND RECREATION ADVISORY TO BE HELD AT THE CITY OF KISSIMMEE
CITY HALL, COMMISSION CHAMBERS
101 CHURCH STREET, KISSIMMEE, FLORIDA 34741-5054
WEDNESDAY, FEBRUARY 12, 2020
6:00 PM

1. MEETING CALLED TO ORDER

"As a courtesy to others, please silence all electronic devices during the meeting."

"Citizens desiring to speak under Hear Audience shall submit a request form from the Secretary prior to the meeting. Forms are available at the door or from the Secretary."

2. MINUTES

2.A PARKS AND RECREATION BOARD MINUTES APPROVAL

Approve meeting minutes of Parks and Recreation Advisory Board from the December 11th, 2019 meeting.

3. HEAR AUDIENCE

"ANYTHING REQUIRING A VOTE WILL BE HEARD AT A LATER TIME"

4. DISCUSSION

5. NEW BUSINESS

5.A FEE WAIVER REVIEW AND SCORING - APPLICATION PERIOD III

Application Period III Applications for review and scoring are:

Veteran's Health Expo - June 6, 2020
Freedom Fund Banquet - June 27, 2020
Team Kareem - June 27, 2020
Keep Kids off the Street - August 29, 2020
Puerto Rican Parade & Festival - September 12, 2020

5.B COMMUNITY BENEFIT FUND APPLICATION

Boys and Girls Club of Central Florida (Osceola County)

5.C UPCOMING EVENTS AND DATES

- Osceola County Fair - February 14th thru February 23rd - Osceola Heritage Park
- African American Read In - February 15th - Berlinsky Community House
- Chili Cook Off - February 22nd - Lakefront Park
- Spring Games - February 27th - March 20th - Fortune Road Athletic Complex
- Dining with the Departed - March 7th - Rosehill Cemetery
- March for Meals - March 14th - Kissimmee Lakefront Park
- Kowtown - March 21st - Kissimmee Lakefront Park
- Cattle Drive - March 30th - Downtown Kissimmee
- Kissimmee Bike Bonanza - April 3rd - Kissimmee Lakefront Park
- School of Government - April 16th
- Earth Day Clean Up - April 22nd - Experience Kissimmee
- Caribbean Fusion Festival (CAFA) - April 26th - Kissimmee Lakefront Park

6. HEAR CHAIRMAN AND BOARD MEMBERS

7. ADJOURNMENT

IN ACCORDANCE WITH FLORIDA STATUTES 286.105: ANY PERSON WISHING TO APPEAL ANY DECISION MADE BY THE CITY COMMISSION WITH RESPECT TO ANY MATTER CONSIDERED AT SUCH MEETING OR HEARING WILL NEED TO ENSURE THAT VERBATIM RECORD OF THE PROCEEDINGS IS MADE, WHICH RECORD INCLUDES THE TESTIMONY AND EVIDENCE UPON WHICH THE APPEAL IS MADE.

IN ACCORDANCE WITH FLORIDA STATUTE 286.26, PERSONS NEEDING ASSISTANCE TO PARTICIPATE IN ANY OF THESE PROCEEDINGS SHOULD CONTACT THE OFFICE OF THE CITY CLERK, 101 CHURCH STREET, KISSIMMEE, FL 34741, (407) 518-2309.

ITEM 5.A
FEE WAIVER REVIEW AND SCORING - APPLICATION PERIOD III

Item Details
Application Period III Applications for review and scoring are:

Veteran's Health Expo - June 6, 2020
Freedom Fund Banquet - June 27, 2020
Team Kareem - June 27, 2020
Keep Kids off the Street - August 29, 2020
Puerto Rican Parade & Festival - September 12, 2020

Attachment(s):
1. 2020 Veterans Health e-binder
2. 2020 Freedom Fund e-binder
3. 2020 Team Kareem e-binder
4. 2020 KKOTS e-Binder
5. 2020 PR Parade Festival e-binder
6. 2019-2020 Fee Grant P3 spreadsheet

FEE WAIVER GRANT RANKING FORM

OSCEOLA CO DEMOCRATIC VETERANS CAUCUS **VETERANS HEALTH EXPO**

Event Date: 6/5/2020 **Year of fee waiver award: 1**

Organization Structure (Mandatory Questions – No Point Value)	
How long has the sponsoring organization been incorporated?	
How long has the sponsoring organization physically been in operation?	
Please provide an organization chart of the Local Organizing Committee and describe how the sponsoring organization recruit volunteers to facilitate the event?	
Organization & Experience (50 Available Points)	**Value**
Has the sponsoring organization previously produced an event in Kissimmee? a. If so, please identify the event(s).	20
Has this specific event been previously produced? a. If so, when and where was the event held.	10
What is the uniqueness of the proposed event?	10
How does the proposed event support the organization's mission and benefit residents?	10
Event Revenue & Economic Impact (25 Available Points)	**Value**
Will the proposed event impact local businesses? a. If so, please describe the impact.	15
Evaluation of Itemized Budget (submitted by sponsoring organization)	10
Marketing (15 Available Points)	**Value**
How does the proposed event benefit the image or reputation of the City?	5
Identify all forms of advertisement to be used and provide a timeline for all promotion and advertising.	5
How much money will the sponsoring organization commit towards advertising?	5
Collaboration (10 Available Points)	**Value**
Is the sponsoring organization collaborating with any other non-profit group? a. If so, please state the commitment of all other groups.	5
Has the sponsoring organization solicited local vendors to support the event? a. If so, please identify all vendors that have committed to the event.	5
After Action Report (Previous Award Recipients Only)	**Value**
If an organization has previously received grant funding from the Event Fee Waiver Program, did the City After Action Report indicate the organization adhered to the requirements within this policy, event policies & guidelines, or any contracts/agreements.	No: -10

	Percentage of Maximum of Award			
PARAB Score (Points)	**Year 1**	**Year 2**	**Year 3**	**Year 4**
90-100	100	80	60	40
80-89	90	70	50	30
70-79	80	60	40	20
60-69	70	50	30	10
50-59	60	40	20	
40-49	50	30	10	
30-39	40	20		
20-29	30	10		
10-19	20			
0-9	10			

FEE WAIVER GRANT RANKED BY: ______________________________

Fee Waiver Amount Requested: $3000 **Previous Year's Fee Waiver Award:** n/a

CITY OF
KISSIMMEE
1883

SPECIAL EVENT FEE WAIVER GRANT APPLICATION

Requesting Organization Information	
Organization Name: Healing Understand Guiding and Supportive Services (HUGS)	Telephone Number: (407) 278-5361
Address: 16 N. Clyde Ave	
City: Kissimmee State: Florida	Zip: 34741
Name of Chief Officer: Dr. Eugenia Agard	
Eligibility/Type: ☒ Non-Profit ☐ Government ☐ Agency with City Membership *If non-profit, attach a copy of your organization's 501(c) certificate.*	

Event Contact Information	
Name: Dr. R. LeWayne Johnson	Title: President
Telephone Number: (321) 443-5634	Email: shirl0309@aol.com

Event Information		
Name of Event: Veterans' Health Expo & Job Fair		
Date of Event: 20 June 2020	Start Time: 0800	End Time: 1600
Location of Event: Kissimmee Civic Center		
Event Set-Up Date: 19 June 2020	Set-Up Time: 1300	Strike Time: 1600
Type of Event: Medical Expo & Job Fair		
Estimated Number of Attendees: 160+		
Brief Description of Event: Medical Expo featuring medical exams, counseling, and screening for male and female veterans (PTSD, Sexual Assault, Suicide prevention) and other health care needs. Provide job interviews with various companies and organizations for veterans.		
Grant Request Amount ($3,000 Max): $3,000		

Event Information (All Events)		
Will your event require outdoor staging?	☐ Yes	☒ No
Will your event require the rental of the modular stage for Veterans lawn?	☐ Yes	☒ No
Will your event require tents?	☐ Yes	☒ No
Will your event require vehicle access into the park?	☐ Yes	☒ No
Will your event require road closures?	☐ Yes	☒ No
If yes, please provide details on your requested road closures:		
Will your event require portable restrooms?	☐ Yes	☒ No
Will your event require utilities?	☐ No ☒ Power ☒ Water	

Will your event hire production companies? (Lighting, Staging, Audio, Décor, Film, Broadcast, etc.)	☐ Yes	☒ No
If yes, please provide company name, point of contact, and phone number:		

Will your event require the use of additional space?

☐ Green/Dressing Room	☐ Locker-room(s)	☒ Reception Area
☐ Autograph Area	☐ Food Prep Area	☐ Dance Floor
☒ Private Meeting Space	☐ Rehearsal Space	☐ None

Fishing Tournaments		
Will your event require the boat ramp?	☐ Yes	☒ No
How many boats are expected to participate?		
Will your event require space for a tournament draw?	☐ Yes	☒ No
Will your event require space for a weigh-in?	☐ Yes	☒ No

Entertainment (All Events)		
Will your event require alcoholic beverages to be dispensed or sold? *The sale of alcohol at an event may require the use of the City's contracted and licensed concessionaire.*	☐ Yes	☒ No
Will your event require a DJ?	☐ Yes	☒ No
Does your entertainer have special requirements and/or a technical rider?	☐ Yes	☒ No
Will your event have performers?	☐ Yes	☒ No
If yes, please specify whether they are international, national, or local artists:		

Audio Visual (Indoor Events Only)		
Will your event require the rental of audio equipment?	☒ Yes	☐ No

Will your event require any additional audio-visual equipment?

☒ Podium	☒ Easels	☒ Projector & Screen
☒ TV/VCR/DVD	☒ Microphones	☒ Extension Cords/Strips
☐ None		

Promotions (All Events)		
Will your event require banners to be hung?	☒ Yes	☐ No
At what level will your event be promoted?	☒ Local ☒ Regional ☐ National	
Will any media outlets be invited to the event?	☒ Yes	☐ No
If yes, what type of media will be invited? Channel 13, Telemundo, Washington Post, Military NEWS		

Organization Structure (Mandatory Questions – No Point Value)
How long has the sponsoring organization been incorporated? 2016
How long has the sponsoring organization physically been in operation? 2016
Please provide an organization chart of the Local Organizing Committee and describe how the sponsoring organization recruit volunteers to facilitate the event? Democratic Veterans Caucus of Florida-Osceola County Democratic Veterans' Caucus of Florida (see attached document for local committee).

Organization & Experience (50 Available Points)
Has the sponsoring organization previously produced an event in Kissimmee? If so, please identify the event(s): Yes. The sponsoring organization previously produced a Town Hall Meeting where Osceola County Veterans, Mayor Alvarez, Commissioner Eady, Mary Jane Arrington and representatives from the Veterans' Administration were in attendance. The Town Hall Meeting was held at the Kissimmee Oaks Golf Club House in September of 2018.
Has this specific event been previously produced? If so, when and where was the event held: No.
What is the uniqueness of the proposed event? The event will serve the Veterans, their wives and relatives of Osceola County. It aims to spread awareness about Veterans' issues such as homelessness, medical needs, and employment needs.
How does the proposed event support the organizations mission and impact to residents? This event is set to be the most exciting professional and educational medical and job fair benefiting the Kissimmee and Osceola County Veterans.

Event Revenue & Economic Impact (25 Available Points) – *An itemized budget is required to be submitted with this application.*
Will the proposed event impact local businesses? If so, please describe the impact: No. See attached document for itemized budget.

Marketing (15 Available Points)
How does the proposed event benefit the image or reputation of the City? The event will focus on the Veterans living both in the city of Kissimmee and outside the city of Kissimmee. The event will illustrate the caring that the city of Kissimmee has about the Veterans.
Identify all forms of advertisement to be used and provide a timeline for all promotion and advertising: News media, Social Media and the Veterans' Administration

How much money will the sponsoring organization commit towards advertising?
$0.00

Collaboration (10 Available Points)
Is the sponsoring organization collaborating with any other non-profit group? If so, please state the commitment of all other groups: The OCDVC intends to partner with the following organizations: Kissimmee Chambers of Commerce, Veterans' Administration, Advent Health Care, Veteran Service Organization, Disabled Veterans' Club, American Legion, Eagles, VFW, Amazon, UPS, FEDEX, U.S. Military and HUGS
Has the sponsoring organization solicited local vendors to support the event? If so, please identify all vendors that have committed to the event: No.

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: DEC 16 2014

HUGS COMMUNITY SERVICES INC
2423 AURORA COURT
KISSIMMEE, FL 34744-0000

Employer Identification Number:
47-2446380
DLN:
26053739001244
Contact Person:
CUSTOMER SERVICE ID# 31954
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990/990-EZ/990-N Required:
Yes
Effective Date of Exemption:
November 25, 2014
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

From: Eugenia Agard <eugeniaagard4hugs@gmail.com>
Sent: Friday, January 17, 2020 3:56 PM
To: KAIA GREENE
Subject: Re: OCDVC Fee waiver - follow up

EXTERNAL EMAIL: This email originated from outside of the organization. DO NOT REPLY, CLICK LINKS, or OPEN ATTACHMENTS unless you recognize the sender and know the content is safe

Hello Mrs. Greene,

Good afternoon dear! Happy New Year to you! So yes HUGS is partnering with Osceola Vets to empower our community and to support those that have served us. Please find my Tax Exemption form attached as requested. Let me know if this clarifies all issues on this matter.

HUGS!
God bless you,

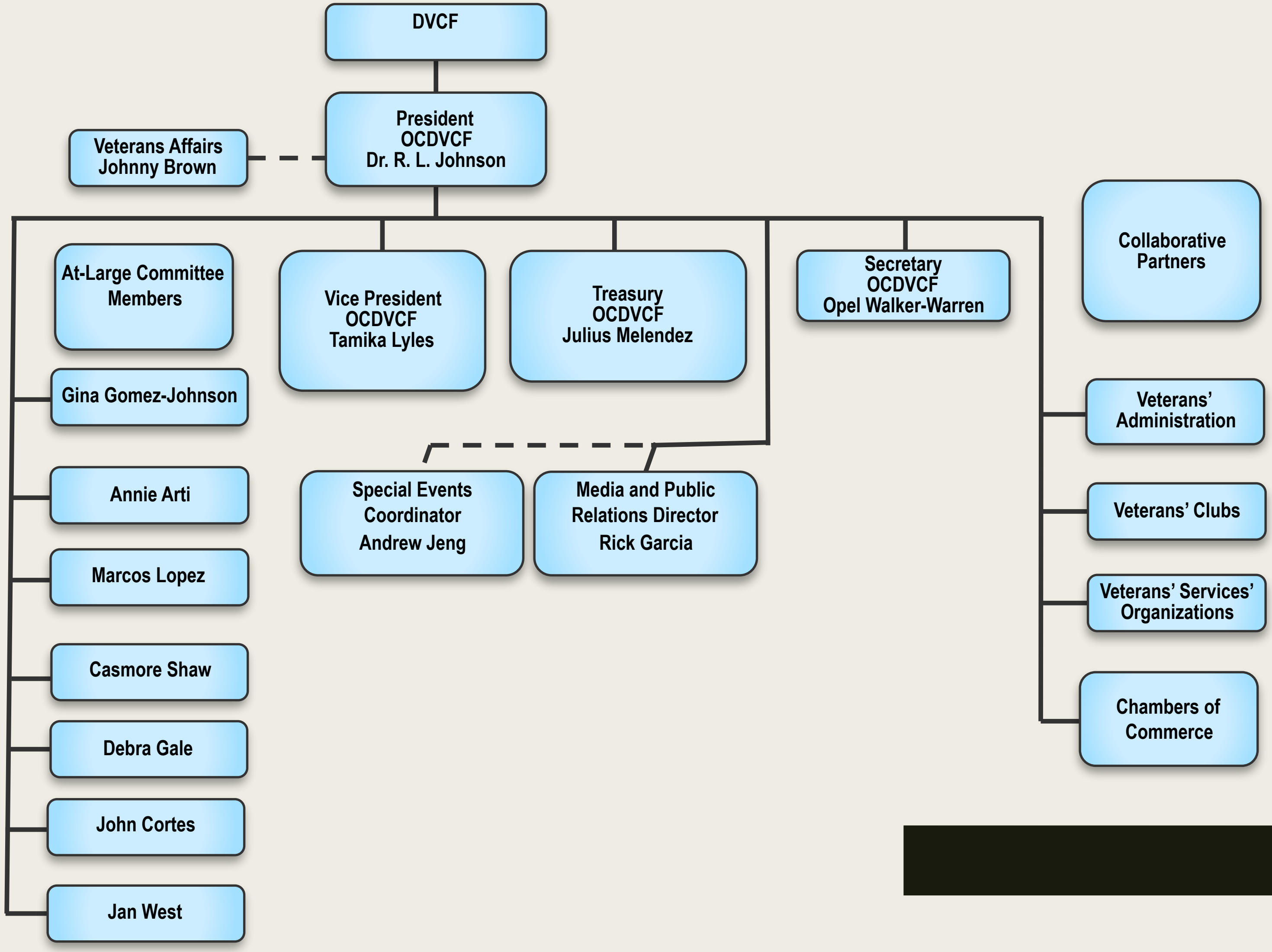
Dr. Agard

Eugenia Agard, DBH, LMHC
https://www.youtube.com/watch?v=C7kfHUTvo_Q
HUGS
Healing Understanding Guiding and Supportive Services
"Healing one heart at a time"
407-791-1900
www.HUGSTherapyServices.com

On Fri, Jan 17, 2020 at 9:18 AM KAIA GREENE <KGREENE@kissimmee.org> wrote:

> Dr. Agard,
>
> Thanks for the voicemail. I’m headed into a class shortly.
>
> The OCDVC fee waiver application is missing the 501c certificate. Also, if you can email with the tax exempt certificate a short note acknowledging that HUGS is cosponsoring the event with OCDVC.
>
> Thanks,

Osceola County Democratic Veterans' Caucus of Florida Organization Chart



Osceola County Democratic Veterans' Caucus of Florida Organization Chart

Members' Names	Phone Numbers	email	District
Dr. R. LeWayne Johnson	(321) 443-5634	shirl0309@aol.com	9
Tamika Lyles	(228) 257-0335	tamika.lyles@hotmail.com	9
Julius Melendez	(407) 729-1640	juliusmelendez@yohoo.com	9
Opel Walker-Warren	(407) 914-4879	owarren@logccf.org	9
Andrew Yeng	(321) 439-5330	ajeng6699@gmail.com	301
Rick Garcia	(407) 276-0399		
Gina Gomez-Johnson	(321) 443-2984	shirl0309@aol.com	9
Annie Arti	(517) 862-1434	annieartis@gmail.com	
Marcos Lopez	(407) 222-6959	mlope69@yahoo.com	9
Casmore Shaw	(407) 244-6115	casmoore75@gmail.com	9
Debra Gale	(321) 442-1095	chair@osceolademocrats.com	9
John Cortes	(407) 227-4737	jcotes325@gmail.com	9
Jan West	(407) 892-7496	jwestosceoladems@gmail.com	9
Johnny Brown	(407) 346-2599	jb173@cfl.rr.com	9

21 Aug 19

OCDVCF

VETERANS' HEALTH EXPO & JOB FAIR

Site	Estimated	Actual
Room and hall fees	$0.00	$0.00
Site staff		
Equipment		
Tables and chairs	$200.00	
Total	**$200.00**	**$0.00**

Decorations	Estimated	Actual
Flowers	$0.00	$0.00
Candles		
Lighting		
Balloons	$50.00	
Paper supplies	$100.00	$0.00
Total	**$150.00**	**$0.00**

Publicity	Estimated	Actual
Graphics work	$500.00	$0.00
Photocopying/Printing	$200.00	
Postage		
Total	**$700.00**	**$0.00**

Miscellaneous	Estimated	Actual
Telephone	$0.00	$0.00
Transportation		
Stationery supplies	$300.00	
Fax services		
Total	**$300.00**	**$0.00**

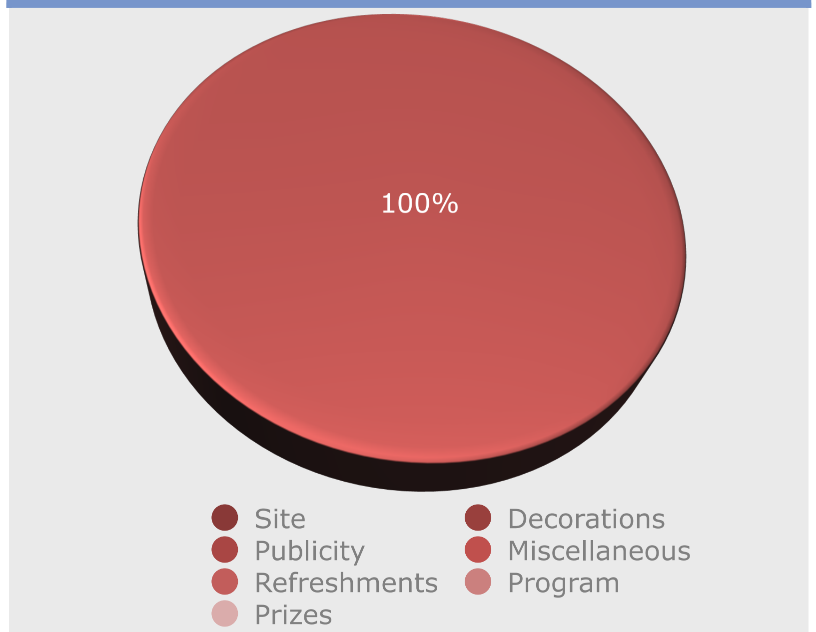
Refreshments	Estimated	Actual
Food	$0.00	$0.00
Drinks		
Linens		
Staff and gratuities		
Total	**$0.00**	**$0.00**

Program	Estimated	Actual
Performers	$0.00	$0.00
Speakers		
Travel		
Hotel		
Other		
Total	**$0.00**	**$0.00**

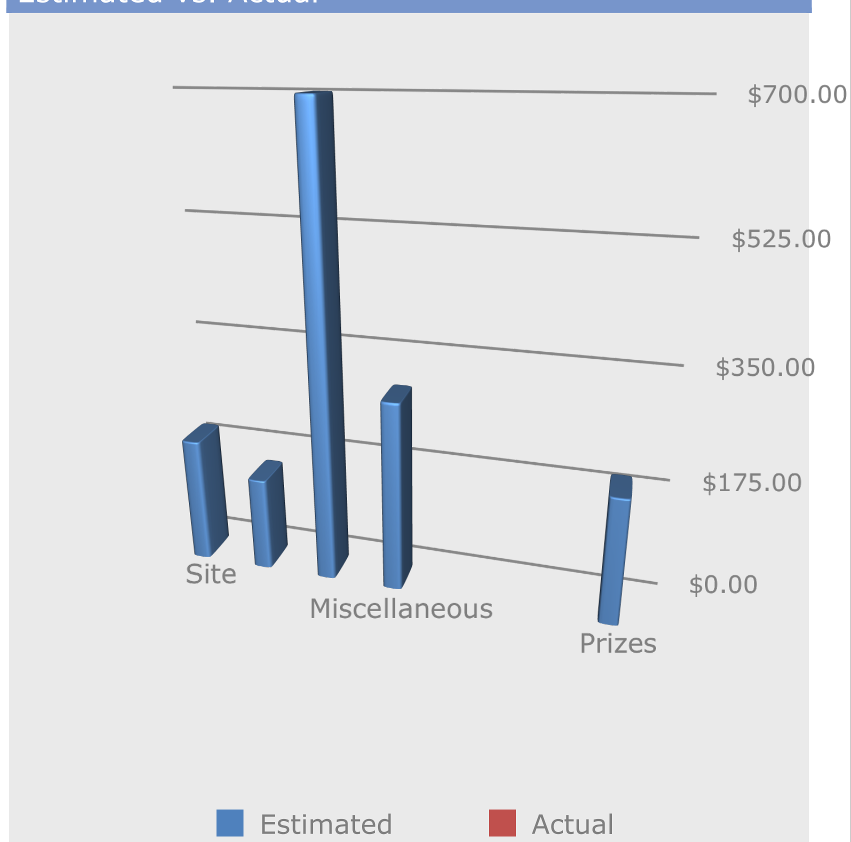
Prizes	Estimated	Actual
Ribbons/Plaques/Trophies		$0.00
Gifts	$200.00	
Total	**$200.00**	**$0.00**

Total Expenses	Estimated	Actual
	$1,550.00	**$0.00**

Actual Cost Breakdown



Estimated vs. Actual



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OCDVCF

Event Budget for *Event Name*: INCOME

Admissions

Estimated	Actual			Estimated	Actual
0	0	Adults @	$0.00	$0.00	$0.00
0	0	Children @	$0.00	$0.00	$0.00
0	0	Other @	$0.00	$0.00	$0.00
				$0.00	**$0.00**

Ads in program

Estimated	Actual			Estimated	Actual
0	0	Covers @	$0.00	$0.00	$0.00
0	0	Half-pages @	$0.00	$0.00	$0.00
0	0	Quarter-pages @	$0.00	$0.00	$0.00
				$0.00	**$0.00**

Exhibitors/vendors

Estimated	Actual			Estimated	Actual
0	0	Large booths @	$0.00	$0.00	$0.00
0	0	Med. booths @	$0.00	$0.00	$0.00
0	0	Small booths @	$0.00	$0.00	$0.00
				$0.00	**$0.00**

Sale of items

Estimated	Actual			Estimated	Actual
0	0	Items @	$0.00	$0.00	$0.00
0	0	Items @	$0.00	$0.00	$0.00
0	0	Items @	$0.00	$0.00	$0.00
0	0	Items @	$0.00	$0.00	$0.00
				$0.00	**$0.00**

Total Income

Estimated	Actual
$0.00	**$0.00**

Income Comparison

OCDVCF

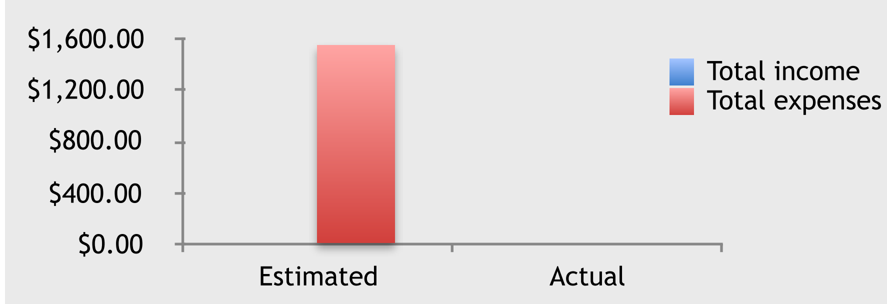
Event Budget for *Event Name*: PROFIT/LOSS SUMMARY

	Estimated	Actual
Total income	$0.00	$0.00
Total expenses	$1,550.00	$0.00

Total profit (or loss)

	($1,550.00)	**$0.00**

Profit vs. Loss



CITY OF KISSIMMEE 1883

Organization: HUGS/OCDVC **Event:** Veterans Health Expo & Job Fair **Date:** June 6, 2020

Facility Fee:				
Civic Center Grand Ballrooms	$133.00 per hour		(June 19 Set up day) $66.50 x 3 hours	$ 199.50
			(June 20 Event day) $133.00 x 9 hours	$ 1,197.00
Willow Room	$39.00 per hour		$39.00 x 9 hours	$ 351.00
Rental Items:				
Tables, 8'	$8.00 per Table		25 tables x $8.00 per table	$ 200.00
Table Linens	$5.00 per Table		25 tables x $5.00 per table	$ 125.00
Table Skirting	$5.00 per Table		25 tables x $5.00 per table	$ 125.00
Podium	$50.00 per		1 podium x $50.00	$ 50.00
Stage	$25.00 per 4x8 ft panel		6 stage panels x $25.00 per panel	$ 150.00
Grand Ballroom AV package:	$440			$ 440.00
2 Ballroom projectors				
2 Projector Screens				
Wi-Fi				
House Speakers				
2 Microphones				
AV Cart				
Tax:			7.5%	EXEMPT
Staff:				
Event Coordinator	$25.00 per hour		(June 19 & 20) 1 staff x $25.00 hr x 12 hours	$ 300.00
Event Staff	$15.00 per hour		2 staff x $15.00 hr x 9 hours	$ 270.00
Facility Technician	$15.00 per hour		1 staff x $15.00 hr x 9 hours	$ 135.00
Total Estimate				**$ 3,542.50**
Reservation Deposit (Amount Paid on Balance to Hold Date - Non Refundable)				**$ (400.00)**
Total Balance Due Before Damage Deposit				**$ 3,142.50**
Damage Deposit (Refundable)				**$ 349.50**
Fee Waiver Amount				
Total Due 30 Days Prior to Event				**$ 3,492.00**

FEE WAIVER GRANT RANKING FORM

OSCEOLA COUNTY NAACP **FREEDOM FUND BANQUET**

Event Date: 6/27/2020 **Year of fee waiver award: 1**

Organization Structure (Mandatory Questions – No Point Value)	
How long has the sponsoring organization been incorporated?	
How long has the sponsoring organization physically been in operation?	
Please provide an organization chart of the Local Organizing Committee and describe how the sponsoring organization recruit volunteers to facilitate the event?	
Organization & Experience (50 Available Points)	**Value**
Has the sponsoring organization previously produced an event in Kissimmee? a. If so, please identify the event(s).	20
Has this specific event been previously produced? a. If so, when and where was the event held.	10
What is the uniqueness of the proposed event?	10
How does the proposed event support the organization's mission and benefit residents?	10
Event Revenue & Economic Impact (25 Available Points)	**Value**
Will the proposed event impact local businesses? a. If so, please describe the impact.	15
Evaluation of Itemized Budget (submitted by sponsoring organization)	10
Marketing (15 Available Points)	**Value**
How does the proposed event benefit the image or reputation of the City?	5
Identify all forms of advertisement to be used and provide a timeline for all promotion and advertising.	5
How much money will the sponsoring organization commit towards advertising?	5
Collaboration (10 Available Points)	**Value**
Is the sponsoring organization collaborating with any other non-profit group? a. If so, please state the commitment of all other groups.	5
Has the sponsoring organization solicited local vendors to support the event? a. If so, please identify all vendors that have committed to the event.	5
After Action Report (Previous Award Recipients Only)	**Value**
If an organization has previously received grant funding from the Event Fee Waiver Program, did the City After Action Report indicate the organization adhered to the requirements within this policy, event policies & guidelines, or any contracts/agreements.	No: -10

	Percentage of Maximum of Award			
PARAB Score (Points)	**Year 1**	**Year 2**	**Year 3**	**Year 4**
90-100	100	80	60	40
80-89	90	70	50	30
70-79	80	60	40	20
60-69	70	50	30	10
50-59	60	40	20	
40-49	50	30	10	
30-39	40	20		
20-29	30	10		
10-19	20			
0-9	10			

FEE WAIVER GRANT RANKED BY: ____

Fee Waiver Amount Requested: $3,000 **Previous Year's Fee Waiver Award:** $2,943

CITY OF
KISSIMMEE
1883

Important Notice:
If you have previously received a fee waiver grant and did not complete all commitments or failed to perform in any way, points may be deducted from your current fee waiver ranking or your submittal may be eliminated altogether from the fee waiver grant process. That determination will be made by the individuals ranking this application.

Funding Cap:
There is a funding cap of $5,000 per event. No applicant shall receive a grant in an amount greater than $5,000. This is not a cash grant. Funds awarded may only be used for City services which includes but are not limited to:

- Staffing costs
- Equipment Rentals
- Facility Rentals
- Traffic / Street / Sanitation Services
- Permit Fees (excluding Kissimmee Police Department alcohol permit fee)

Event must be held on City owned property. Special circumstances for equipment rentals shall be approved by the Parks and Recreation Director or designee. The Kissimmee Parks and Recreation Advisory Board (PARAB) is a nine (9) member board that will conduct the review and ranking of all applications. The PARAB also determines the amount of each fee waiver grant.

Grant Final Report:
After City Commission approval the sponsoring organization shall enter into a License Agreement/Contract with the City of Kissimmee. Included in the License Agreement/Contract are reporting requirements to validate that all funds were used appropriately and in accordance with all established policies. Organizations are obligated to report to the City how granted funds were used. Please provide the following information no later than 30 days after the event:

1) Actual Event Budget including Profit and Loss Statement and Revenue Report.
2) Complete list of all vendors associated with the event including their contact information.
3) A copy of all marketing material used to market, promote and advertise the event.

Failure to provide the Grant Final Report may negatively impact future requests.

Event Approval:
The Kissimmee Parks and Recreation Department will provide written notification of the approval or denial of any special requests, IE: insurance amendments, contract revisions, fees, policy amendments or any other special requests submitted in writing by the event organizer. No revisions and/or amendments to the final Contract/License Agreement or related items may be made without prior written notification and written approval from the Kissimmee Parks and Recreation Director or designee

The Kissimmee Parks and Recreation Department will provide a copy of the signed Contract/License Agreement to the event organizer to confirm final approval of the event.

All applicants that receive a grant in any amount must utilize the City seal/logo on all marketing, promotional and advertising materials including but not limited to print media, radio, television, website and social media.

3

2020

CITY OF
KISSIMMEE
1883

Special Events Fee Waiver Grant Application

Some organizations have the opportunity to apply for a grant to waive certain fees to hold, **open to the public community events.** Grant funds are intended to supplement the costs of the event and are not intended to cover the total cost of the event. There are Three (3) application periods. Generally, the timeframes for the application periods are:

APPLICATION PERIOD I
Events held between October 1st and January 31st

April 1st	Application Period Opens
May 1st	Application Period Closes
May	Application Review Period
June PARAB Meeting	"Park Tank" -Applicants invited to attend PARAB meeting for Q&A session
July/August/September	Attend Monthly Special Events Committee Meeting

APPLICATION PERIOD II
Events held between February 1st and May 31st

August 1st	Application Period Opens
September 1st	Application Period Closes
September	Application Review Period
October PARAB Meeting	"Park Tank" -Applicants invited to attend PARAB meeting for Q&A session
November/December/January	Attend Monthly Special Events Committee Meeting

APPLICATION PERIOD III
Events held between June 1st and September 30th

December 1st	Application Period Opens
January 1st	Application Period Closes
January	Application Review Period
February PARAB Meeting	"Park Tank" -Applicants invited to attend PARAB meeting for Q&A session
March/April/May	Attend Monthly Special Events Committee Meeting

The submission of a Fee Waiver Grant Application does not guarantee award of the grant or approval of an event. All organizations, whether applying for a grant or not, must complete an event reservation application and provide a reservation deposit to hold the date of the proposed event. Organizations that do **not** receive a grant will be charged accordingly.

Eligibility:
In order to be eligible to apply for a fee waiver grant, the event must be an open to the public, community event, and the organization must meet at least 1 (one) of the following criteria:

1) Non-profit organization with a current 501(C)3 certificate
2) Government agency
3) An agency in which the City is a member

CITY OF
KISSIMMEE
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Event Name:

Requesting Organization: Osceola County NAACP Branch 5121

Address: PO Box 450778, Kiss 34744

Organization phone: 407-847-6227

Select Eligibility Status: ☒ *Non Profit* ☐ *Government* ☐ *Agency in which City is a member*

Event contact: Freedom Fund Banquet

Title: Freedom Fund Banquet

Event contact cell number: 407-860-9355

Event contact email: djmcmillon@aol.com

Organization's chief officer:
Deloris J. McMillon, President
Ann Jones, Secretary

Event Date: June 27, 2020

Event Type:
Banquet

Event Location:
Kissimmee Civic Center

Event Set up time:
10:00 AM

Event Start and End Time:
5:00 — 9:00 p.m.

Event Strike time:
10:00 p.m.

Anticipated attendance:
225

Brief Description of the Event:
Banquet to include program

Grant amount request: **$** 3,000

Lakefront Park Events NO

1. Will your rental require outdoor staging? Yes ☐ No ☒
2. Will your event require rental of the City mobile stage (Event Lawn) or the installation of the modular stage (Civic Lawn)? Yes ☐ No ☒
3. Will your event require tents? Yes ☐ No ☒ If yes, how many?
4. Will your event require vehicles to access the park? Yes ☐ No ☒
5. Will your event require any road closures? Yes ☐ No ☒

If yes, please provide details:

6. Will your event require potable restrooms? Yes ☐ No ☒ If yes, how many?
7. Will your event require utilities? None ☐ Power ☐ Water ☐

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8. Will your event require the hiring of any outside production companies (Lighting, staging, audio, décor, film, broadcast, etc.)? Yes ☐ No ☒

If yes, please provide company name, point of contact and phone number:

9. Will your event require the use of additional space?

Green Room/Dressing Room ○ | Reception Area ⊗ LOBBY
Lockerroom ○ | Food Prep Area ⊗
Autograph Area ○ | Dance Floor ○
Private meeting space ○ | Rehearsal Space ○
None ○

Fishing Tournaments NO

1. Will your event require the boat ramp? Yes ☐ No ☒ How many boats:
2. Will your event require space for a tournament draw? Yes ☐ No ☒
3. Will your event require space for a weigh-in? Yes ☐ No ☒

Entertainment (ALL EVENTS)

1. Will your event require alcoholic beverages to be dispensed, provided and/or sold? Yes ☐ No ☒

(The City of Kissimmee's licensed and contracted concessions has sole rights to any alcohol sales and/or consumption.)

2. Will your event require a DJ? Yes ☐ No ☒
3. Does your entertainer have special requirements and/or a technical rider? Yes ☒ No ☒ N/A
4. Will your event have performers? Please specify whether they are international, national or local artists.

N/A ST. LUKE WARLOSSE MALE CHORUS

Audio Visual (Indoor Events only)

1. Will your event require rental of Civic Center audio equipment? Yes ☒ No ☐

(The City cannot provide AV Equipment for outdoor events. The licensee with an outdoor event is solely responsible for providing AV equipment.)

2. Will your event require any additional AV equipment?

Podium ◉ | Easels ○
Projector & Projection Screen ○ | TV/VCR/DVD ○
Extension cords/Power strips ○ | Microphones ○

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None ○

Promotions(ALL EVENTS)

1. Will your event require banners to be hung? Yes ☐ No ☒
2. At what level will your event be promoted? Local ☒ Regional ☐ National ☐ * Local Only and Neighboring Counties
3. Will media be invited to the event? Yes ☒ No ☐

If yes, what type of media?

Organization and Experience (ALL EVENTS) – 50 points

1. Has the sponsoring organization previously produced events in Kissimmee? If so, please identify those events. (20 points)

- Freedom Fund Banquet since 2016 (4yrs) • Back to school events • Co Sponsored Veterans Dinner
- Cosponsored The Trailblazers Breakfast
- Co Sponsored with Osceola Visionaries • 3 political forums

2. Has the specific event been produced previously? If so, when and where (10 points)

Yes – Civic Center 2016 – 2019 held the Freedom fund Banquet which was greatly attended by politicians, polic officers and Community faith base organizations and leaders

3. How long has the sponsoring organization been in operation? (5 points)

Osceola County NAACP was organized in the mid 1960's
The National – NAACP was founded in February 19

4. What is the uniqueness of the proposed event? (10 points) The community along with the elected local and state officials will have the opportunity to meet, listen and exchange educational, social, ~~educat~~ economical views and strategies that will impact all the citizens of Osceola County with a shared Vision.

5. Please provide an organizational chart of the Local Organizing Committee. Does the sponsoring organization recruit volunteers to facilitate this event? (5 points) Deloris McMillon, President, Elder Nina Hill, Vice President, Richard Saunders, Treasurer, Anna Pinellas executive committee. We recruit High school juniors and seniors wanting to earn Community service hours toward graduation.

Event Revenue and Economic Impact – 25 points

Contributions and donations allow the organization to offer relevant workshops, Town Hall Meetings, voter registration drives, Scholarships. The oraganization will allow representation at the State, Regional and National Conferences

1. Please attach an itemized budget for the proposed event. (10 points)

Meals – $ 3,000
Program booklets and other printing items $ 1,800
and table centerpieces

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2. Will the proposed event impact local business? If so, please describe that impact.(15 points)

- Out of town guests will shop at local businesses
- Visitors will have the opportunity to enjoy leisure time at our beautiful Lakefront

Marketing – 15 points

1. How does the proposed event benefit the image/reputation of the City of Kissimmee? (5 points)

Visitors will have the opportunity to experience and enjoy the friendly hospitality of a diverse community and also witness the family oriented atmosphere of the County.

2. Identify all forms of advertisement to be used. Please provide a timeline for all promotion and advertising. (5 points)

Flyers
Local Newspaper
Facebook Posting
Announcement Bulletins in local churches

3. How much money will the sponsoring organization commit towards advertising? (5 points)

$300.00

Collaboration – 10 points

1. Is the sponsoring organization collaborating with any other non-profit group? If so, please state the commitments of all other groups.(5 points)

Osceola Visionaries commits to selling tickets
Local churches and organizations committed to attending and participating on program

2. Has the sponsoring organization solicited local vendors to support the event? If so, please identify all vendors/merchants that have committed to the event. (5 points)

Osceola Press
Kissimmee Florist
Walmart backery (Osceola Parkway)
Classic catering Design

** Eligibitity
- No individual NAACP branch in any State has a 501(c)3 certificate but operates under the National NAACP office tax ID# 593557155
- The following city employees are members of Osceola County NAACP:
  - Deputy City Manager Desree Matthews
  - City Commissioner Angela Eady
  - EVENTS & VENUES SUPERVISOR Jamie Paul

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Review Board information

1. *Past evaluation:*
   (see attached)

2. *Attendance measures*
   Previous year's ANTICIPATED attendance:

   Previous year's ACTUAL attendance:

   Current year's ANTICIPATED attendance:

3. *Post event requirements bonus +/-*

For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Grant Final Report? (-5 points/0 points/+5 points)

- Final budget *Yes* *No*
- List of vendors *Yes* *No*
- Marketing materials *Yes* *No*

Scoring Criteria:

Park Tank Score	Percentage of Requested Grant Waived
90 – 100 points	100%
80 – 90 points	90%
70 – 80 points	80%
60 – 70 points	70%
50 – 60 points	60%
40 – 50 points	50%
30 – 40 points	40%
20 – 30 points	30%
10 – 20 points	20%
0 – 10 points	10%

Event Name: Osceola County NAACP Freedom Fund Banquet
Event Coordinator: Benjamin Burnett
Event Organizer: Deloris McMillon
Event Type: Banquet
Date: June 29, 2019
Location: Kissimmee Civic Center- Grand Ballroom
Move in Time: 11:00 a.m.
Event Time: 6:00 p.m.-9:00 p.m.
Move Out Time: 10:00 p.m.
Attendees: 270
Vendors: Classic Catering
Repeat Event: Yes

Summary:

- Clients arrived on time for event move in.
- Doors were opened at 5:15 p.m.
- Banquet began shortly after 6:00 p.m.
- Food was served from 7:00 p.m.- 7:45 p.m.
- Mayor Alvarez and wife, Mayor Demings, Sheriff Gibson, Commissioner Eady, Deputy CM, Chief Odell and a variety of Dignitaries from Osceola County in attendance.
- The program ended at 9:30 p.m. and guests started to leave.
- Move out of Ballroom was completed by 10:15 p.m. and Classic Catering left facility at 10:30 p.m.

Deposit Refund Information
Deposit Amount Paid: $292.60
Refund Granted: Yes
Household #: 743
Reservation #: 9025

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Organization: Osceola Co NAACP **Event:** Freedom Fund Banquet **Date:** June 27, 2020

Facility Fee:				
Civic Center Grand Ballrooms	$133.00 per hour		$133.00 x 12 hours	$ 1,596.00
Rental Items:				
Linen and Overlays	$10.00 per Table		25 tables x $10.00 per table	$ 250.00
Tables with Linens	$5.00 per Table		10 tables x $5.00 per table	$ 50.00
Tables Skirting	$5.00 per Table		10 tables x $5.00 per table	$ 50.00
Podium	$50.00 per		1 podium x $50.00	$ 50.00
Stage	$25.00 per 4x8 ft panel		6 stage panels x $25.00 per panel	$ 150.00
Grand Ballroom AV package:	$440			$ 440.00
2 Ballroom projectors				
2 Projector Screens				
Wi-Fi				
House Speakers				
2 Microphones				
AV Cart				
Tax:			7.5%	EXEMPT
Staff:				
Event Coordinator	$25.00 per hour		1 staff x $25.00 hr x 12 hours	$ 300.00
Event Staff	$15.00 per hour		1 staff x $15.00 hr x 12 hours	$ 180.00
Event staff (Lobby)	$15.00 per hour		1 staff x $15.00 x 4 hours	$ 60.00
Facility Technician	$15.00 per hour		1 staff x $15.00 hr x 6 hours	$ 90.00
Total Estimate				**$ 3,216.00**
Reservation Deposit (Amount Paid on Balance to Hold Date - Non Refundable)				**$ (400.00)**
Total Balance Due Before Damage Deposit				**$ 2,816.00**
Damage Deposit (Refundable)				**$ 292.60**
Fee Waiver Amount				
Total Due 30 Days Prior to Event				**$ 3,108.60**

FEE WAIVER GRANT RANKING FORM

TEAM KAREEM MEMORIAL FOUNDATION **WALK FOR TEAM KAREEM**

Event Date: 6/27/2020 **Year of fee waiver award: 1**

Organization Structure (Mandatory Questions – No Point Value)	
How long has the sponsoring organization been incorporated?	
How long has the sponsoring organization physically been in operation?	
Please provide an organization chart of the Local Organizing Committee and describe how the sponsoring organization recruit volunteers to facilitate the event?	
Organization & Experience (50 Available Points)	**Value**
Has the sponsoring organization previously produced an event in Kissimmee? a. If so, please identify the event(s).	20
Has this specific event been previously produced? a. If so, when and where was the event held.	10
What is the uniqueness of the proposed event?	10
How does the proposed event support the organization's mission and benefit residents?	10
Event Revenue & Economic Impact (25 Available Points)	**Value**
Will the proposed event impact local businesses? a. If so, please describe the impact.	15
Evaluation of Itemized Budget (submitted by sponsoring organization)	10
Marketing (15 Available Points)	**Value**
How does the proposed event benefit the image or reputation of the City?	5
Identify all forms of advertisement to be used and provide a timeline for all promotion and advertising.	5
How much money will the sponsoring organization commit towards advertising?	5
Collaboration (10 Available Points)	**Value**
Is the sponsoring organization collaborating with any other non-profit group? a. If so, please state the commitment of all other groups.	5
Has the sponsoring organization solicited local vendors to support the event? a. If so, please identify all vendors that have committed to the event.	5
After Action Report (Previous Award Recipients Only)	**Value**
If an organization has previously received grant funding from the Event Fee Waiver Program, did the City After Action Report indicate the organization adhered to the requirements within this policy, event policies & guidelines, or any contracts/agreements.	No: -10

	Percentage of Maximum of Award			
PARAB Score (Points)	**Year 1**	**Year 2**	**Year 3**	**Year 4**
90-100	100	80	60	40
80-89	90	70	50	30
70-79	80	60	40	20
60-69	70	50	30	10
50-59	60	40	20	
40-49	50	30	10	
30-39	40	20		
20-29	30	10		
10-19	20			
0-9	10			

FEE WAIVER GRANT RANKED BY: ____

Fee Waiver Amount Requested: $3,000 **Previous Year's Fee Waiver Award:** $1,420

KAIA GREENE

From: noreply@kissimmee.org
Sent: Friday, December 13, 2019 4:30 PM
To: JAMIE PAUL; KAIA GREENE
Subject: City of Kissimmee Fee Grant Application

A new entry to a form/survey has been submitted.

Form Name:	Fee Grant Application
Date & Time:	12/13/2019 4:29 PM
Response #:	72
Submitter ID:	10817
IP address:	107.146.28.42
Time to complete:	15 min. , 32 sec.

Survey Details

Page 1

City of Kissimmee Fee Grant Application (4 pages)

Event Information

Choose Eligibility Status

In order to be eligible to apply for a fee waiver grant the organization must meet at least 1 (one) of the following criteria:

Non-profit organization with a current 501(C) certificate

Government agency

An agency in which the City is a member

(o) Non Profit Organization

If non profit, attach a copy of the 501c certificate image010.jpg

New Standard Question

Requesting Organization:	Team Kareem	**Zip Code:**	34759
Address:	1080 Cypress Parkway	**Organization Phone:**	786-346-8910
City:	Kissimmee	**Email:**	info@teamkareem.com
State:	Florida		

New Standard Question

Event Name:	Walk with Team Kareem To Prevent Drowning	**Event Type:**	Memorial Walk
Potential Event Date	06/27/2020	**Event Contact:**	Arkeisha Reese
Event Location:	Kissimmee Civic Center	**Event Contact Cell Number:**	786-346-8910
Event Set Up Time:	6:00 am	**Grant Amount Requesting ($3,000 maximum):**	3,000
Actual Event Times:	8:00 am	**Organization's Chief Officer:**	Arkeisha Reese
Event Break Down Time:	12:00 pm	**Signature of Chief Officer:**	Arkeisha Reese
Anticipated Attendance:	300	**Brief Description of Event:**	

Walk with Team Kareem To Prevent Drowning will be held during water safety month as part of the
national initiative to raise awareness to the importance of drowning prevention and water safety
education.
Drowning can literally happen to anyone and within seconds. It is a serious and neglected public health threat. It is the number one cause of unintentional injury death for children under the age of five, and the second leading for children under fifteen. Water is tempting and unforgiving. It claims the lives of 372,000 people a year worldwide. Each year, an average of 760 children under the age of fifteen drown in the United States; 533 of them are under the age of five. In the autism community alone it claims the lives of 91% of the autistic
individuals who wander off.
This year, Florida, has lost more than twenty of our children to drowning.
We must come together and prevent this tragedy from happening to another child. Drowning is
preventable! By providing families and individuals with education on drowning prevention, swim lessons, CPR and reminding them of the importance of using water safety products we can save lives.
The Walk with Team Kareem To Prevent Drowning brings water safety and awareness together in honor of families effected by the tragedy of drowning.

Page 2

<u>Event Information (All Events)</u>

Will your event require outdoor staging?

(○) No

Size: Not answered

Will your event require the rental of the modular stage (Veterans Lawn)?

(○) No

Size: Not answered

Will your event require tents? If yes, how many?

(○) No

How many: Not answered

Will your event require vehicles to access the park?

(○) No

Will your event require any road closures?

(○) No

If yes, please provide details of your requested road closures:

Not answered

Will your event require portable restrooms? If yes, how many?

(○) No

How many: Not answered

Will your event require utilities?

[×] Electric

[×] Water

Will your event hire Production Companies (lighting, sound, decorating, television, radio, etc.)?

(○) No

Name of Company: Not answered

Point of Contact: Not answered

Contact Phone Number: Not answered

Will your event require the use of additional space?

[×] Reception Area

Fishing Tournaments

Will your event require the use of the boat ramp?

(○) No

How many Boats: Not answered

Will your event require space for a tournament draw?

(○) No

Will your event require space for a weigh in?

(○) No

Tournament Draw: Not answered

Entertainment (All Events)

Will your event require alcoholic beverages to be dispensed, provided and/or sold? (The sale of alcohol at an event may require the use of the City's contracted and licensed concessionaire.)

(○) No

Will your event require a DJ?

(○) Yes

Does your entertainer have special requirements and/or a technical rider?

(○) No

Will your event have performers? Please specify whether they are international, national or local artists.

Not answered

Audio Visual (Indoor Events Only)

Will your event require rental of Civic Center audio equipment? (The City cannot provide AV equipment for outdoor events. That is the sole responsibility of the outdoor event licensee.)

(○) No

Will your event require additional AV Equipment?

[×] Podium

Promotions (All Events)

Will your event require banners to be hung?

(○) No
If yes, please provide size and location for the banners.
Not answered

At what level will your event be promoted?

(○) Regional

Will media outlets be invited to the event?

(○) Yes
If yes, what type of media will be invited?
Spectrum News 13 will be at the event and provide promotion. In previous years, Positively Osceola has come to the event.

Page 3

Organization Structure (Mandatory Questions - no point value)

How long has the sponsoring organization been incorporated?

5 years

How long has the sponsoring organization physically been in operation?

5 years

Please provide an organizational chart of the Local Organizing Committee and describe how the sponsoring organization recruits volunteers to facilitate the event?

Team Kareem is led by an all volunteer board and it's founder, Arkeisha Reese.
Many of our volunteers are long standing, having been with us for years. In recruiting, we utilize social media, word of mouth and current volunteers.
image1.jpeg

Organization and Experience (50 Available Points)

Has the sponsoring organization previously produced an event in Kissimmee? If so, please identify the events. (20 pts)

In it's 4th year, the Walk with Team Kareem To Prevent Drowning has always been at the City of Kissimmee. We have utilized both Kissimmee Lakefront Park and the Kissimmee Civic Center to host the event. In addition to this event, Team Kareem also coordinates a Christmas toy giveaway in Historic Downtown Kissimmee in December. Team Kareem is a member of both the Downtown Business Association and Kissimmee Main Street where we remain connected to Kissimmee through events and volunteer opportunities.

Has this specific event been produced previously? If so, when and where was the event held? (10 pts)

In it's 4th year, the Walk with Team Kareem To Prevent Drowning has always been at the City of Kissimmee. We have utilized both Kissimmee Lakefront Park and the Kissimmee Civic Center to host the event. Last year's event was held on June 22, 2019 at Kissimmee Lakefront Park and had an attendance of 300 people.

What is the uniqueness of the proposed event? (10 pts)

Walk with Team Kareem To Prevent Drowning is the only event of its kind in Osceola County. No other event focuses water safety and education in an effort to prevent drowning like this, with 100% of the proceeds going towards providing free swimming and CPR lessons to residents of Osceola County.

How does the proposed event support the organization's mission and benefit Kissimmee residents? (10 pts)

By teaching children to swim we are assisting in the health and safety of residents of Kissimmee.

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Event Revenue and Economic Impact (25 Available Points)

Will the proposed event impact local businesses? If so, please describe the impact. (15 pts)

Yes, Walk with Team Kareem To Prevent Drowning brings individuals and families to Kissimmee from many states. These individuals rent hotels, eat at restaurants, and visit local shops.

Evaluation of Itemized Budget (Please attach the sponsoring organization's event budget). (10 pts)

File Name: Team Kareem Event Budget.xlsx

Page 5

Marketing (15 Available Points)

How does the proposed event benefit the image or the reputation of the City? (5 pts)

Walk with Team Kareem To Prevent Drowning shows the City of Kissimmee as a vested partner in increasing water education and drowning prevention.

Identify all forms of advertisement to be used and provide a timeline for all promotion and advertising. (5 pts)

Walk with Team Kareem To Prevent Drowning will utilize, print media, social media advertising, radio, television and flyers.

How much money will the sponsoring organization commit towards advertising? (5 pts)

$2,500

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Collaboration (10 Available Points)

Is the sponsoring organization collaborating with any other non-profit group? If so, please state the commitments of all other groups. (5 pts)

Although every year we partner with several area nonprofits, as of today we do not have commitment letters.

Has the sponsoring organization solicited local vendors to support the event? If so, please identify all vendors/merchants that have committed to the event. (5 pts)

Walk with Team Kareem To Prevent Drowning event includes local food trucks, artisan tables, first responders, local merchants and service providers.

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After Action Report (Previous Award Recipients Only)

If an organization has previously received grant funding from the Event Fee Waiver Program, did the City's After Action Report indicate that the organization adhered to the requirements within the fee waiver policy, event policies & guidelines, or any contracts/agreements. (If no, -10 pts)

[×] **Yes**
[ ] **No**

The overall percentage of the requested amount of expenses to be waived by the City shall be determined by the total points earned during the scoring process. The breakdown of the percentage that shall be waived is as follows:

	Percentage of Maximum of Award			
PARAB Score (Points)	**Year 1**	**Year 2**	**Year 3**	**Year 4**
90-100	100	80	60	40
80-89	90	70	50	30
70-79	80	60	40	20
60-69	70	50	30	10
50-59	60	40	20	
40-49	50	30	10	
30-39	40	20		
20-29	30	10		
10-19	20			
0-9	10			

Insurance

Do you currently have or have you applied for insurance? (All insurance must follow specific guidelines as outlined in the [Special Event Insurance guidelines](#))

(○) Yes

Please type your name to serve as a signature in the fields below acknowledging the information you have provided is correct.

Signature:	Arkeisha Reese
Date:	December 13, 2019

Thank you,
City of Kissimmee, FL

0000034 06/03/16

FLORIDA

Consumer's Certificate of Exemption

Issued Pursuant to Chapter 212, Florida Statutes

DR-14
R. 10/15

Certificate Number	Effective Date	Expiration Date	Exemption Category
85-8017022758C-7	05/24/2016	05/31/2021	501(C)(3) ORGANIZATION

This certifies that

TEAM KAREEM MEMORIAL FOUNDATION INC
11460 NW 31ST ST
CORAL SPRINGS FL 33065-3407

is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangibl
personal property purchased or rented, or services purchased.

Registered Agent Name & Address

REESE, ARKEISHA
3255 NW 94th AVE
9771
CORAL SPRINGS, FL 33075

Address Changed: 04/11/2019

Officer/Director Detail

Name & Address

Title Director

REESE, ARKEISHA
PO BOX 9771
CORAL SPRINGS, FL 33075

Title S

BRADY, SHERRONNI
PO 925238
Princeton, FL 33092

Title CFO

REESE, ANGELINA
PO BOX 9771
CORAL SPRINGS, FL 33075

Title VP

Smith, Edward
20521 NW 17th Ave
106
Miami Gardens, FL 33056

Title COO

Green, Keith, Jr.
1080 Cypress Parkway
PMB#159
Kissimmee, FL 34759

Walk for Team Kareem

Event Budget for Celebrar: EXPENSES

Site	Estimated	Actual
Coolers	$75.00	$0.00
Venue	$1,300.00	$0.00
Tents	$0.00	$0.00
Tables and chairs	$250.00	$0.00
Total	**$1,625.00**	**$0.00**

Performances	Estimated	Actual
DJ	$250.00	
Keynote Speaker	$0.00	
Bounce House	$100.00	
Face Painting	$200.00	
	$0.00	
Total	**$550.00**	**$0.00**

Marketing	Estimated	Actual
Graphics work	$500.00	
Photocopying/Printing	$1,000.00	
Social Media Boost	$1,000.00	
Total	**$2,500.00**	**$0.00**

Refreshments	Estimated	Actual
Drinks	$400.00	
Snacks	$500.00	
Water	$150.00	
	$0.00	$0.00
Total	**$1,050.00**	**$0.00**

Misc	Estimated	Actual
Ice	$50.00	
Plates	$100.00	
Forks	$50.00	
Napkins	$20.00	
Total	**$220.00**	**$0.00**

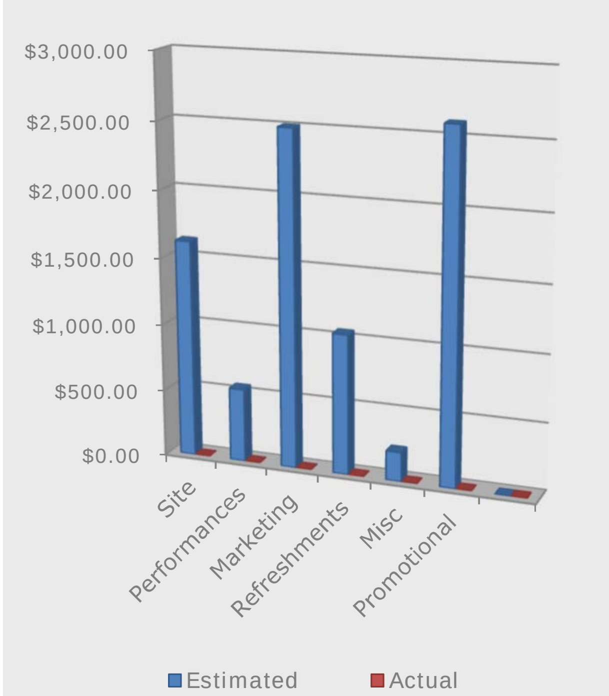
Promotional	Estimated	Actual
T-shirts	$2,300.00	
Banners	$300.00	
Total	**$2,600.00**	**$0.00**

	Estimated	Actual
		$0.00
Total	**$0.00**	**$0.00**

Total Expenses	Estimated	Actual
	$8,545.00	**$0.00**

Actual Cost Breakdown

Estimated vs. Actual



2019 Report

Prepared for: Arkeisha Reece, President

July 22, 2019

EXECUTIVE SUMMARY

Goals

Our goal was to provide water safety education and increase community engagement.

Outcomes

- 70 total participants in the walk
- Over 250 in attendance
- CPR demonstrations
- Memorial children's name call
- 13 vendors
- First responders in attendance
- Participants from throughout Florida and other states

BUDGETS

EXPENSES	Quantity	Unit Price	Cost
Venue	1	$ 250	$ 250
Tents	1	$ 150	$ 150
Bounce House	1	$ 150	$ 150
Face Painting	1	$ 240	$ 240
Talent	1	$ 400	$ 400
Merchandise	1	$ 1,000	$ 1,000
Food	1	$ 296	$ 296
Recognition Awards	20	$ 14	$ 280
Total			**$ 2,766**

INCOME	Quantity	Unit Price	Cost
Platinum Sponsor	1	$ 2,000	$ 2,000
Gold Sponsor	1	$ 1,000	$ 1,000
Silver Sponsors	2	$ 500	$ 1,000
Vendors	8	$ 100	$ 800
Nonprofit Vendors	5	$ 75	$ 375
Participants	40	$ 25	$ 1,000
Children Partipants	30	$ 15	$ 450
Auction	1	$ 375	$ 375
Total			**$ 7,000**

*Does not include COK fee waiver

Team Kareem Vender list

Vendor	Contact Person	Phone
Home Depot		407-935-9600
G'Fun Spot	Glen Johnson	407-218-3549
Girls Scout	Telisha Montgomery	321-987-0276
Florida Dept of Health	Kimberly Knight	407-943-2073
K+L Natural	Lashonda Morton	407-508-8806
Platinum Protection	Michelle Jackson	407-807-0997
Face Painting		
Anytime Fitness	Heather Johnson	407-978-6944
Warrior Fitness	Debbie Pellerin	407-800-9333
Fire Truck		
Police Depot	Srgt Ortiz	
My Castle Realty	Lucy Rivera	407-624-4756
Nani Bites	Nadia Rivera	917-804-9340
Mel Luxe Perfections	Malika Lowe	646-829-9655

Early Learning Coaltions of Oscela County	Dana Crupi	407-933-5353
K12	Deborah	
Chunky Beads Bows and Clothes Oh	Amanda Dormaier	407-844-0753
Venue 2120 LLC (Smoothie)	Adrienne	407-799-1447
Team Kareem		786-346-8910
Kingdom Stuffers	Kim Boettner	386-316-1517
Medic Express LLC	Dwight Swasey	407-497-8017

Team Kareem Walk-A-Thon
Event Coordinator: Christina Schipani
Event Organizer: Arkeisha Reese
Event Type: Walk-A-Thon
Date: June 22, 2019
Location: Light House Lawn
Move in Time: 8:00 a.m.
Event Time: 10:00 a.m.
Move Out Time: 3:00 p.m.
Attendees: Approximately 200
Vendors: 25 out of 32.
Repeat Event: Yes

Summary:

- 8:00 a.m. Vendor Check-In/Inspection began and ended a 9:30 a.m.
- 8:15 a.m. Client Arrived
- Entertainment/Activities
    - 10:15 a.m. Walk began 15 minutes late
    - 11:00 a.m. Rebel Art created live painting
    - 11:30 a.m. Zumba class
    - 12:00 p.m. CPR Demonstration
- 12:15 p.m. Vendors started breaking down
- 1:00 p.m. All Vendors cleared the park
- 3:00 p.m. Team Kareem strike complete with exception to the bounce house vendors
- 3:15 p.m. Bounce House vendor began strike
- 3:45 p.m. Park Clear

Issues:
- The client did not arrive to the event until 8:15 a.m., was scheduled for 8:00 a.m.
- Vendors said that did not receive any vendor information before Check-In from Client.
- Client did not provide assigned vendor spots to Event Staff.
- Client rented 1 spider box and 3 cord covers. Total: $125.00

Suggestions:
- Client is interested in potentially hosting event in the Arena next year due to the heat
- Vendor list must be provided to COK Event Coordinator at least 24 hours before event

Deposit Refund Information
Deposit Amount Paid: $140
Refund Granted: No, client will receive $15.00.
- Client rented the Spider Box ($50.00) and 3 Cord Covers ($25.00 each) = $125.00

Household #: 4447
Reservation #: 9033

CITY OF KISSIMMEE 1883

Organization: Team Kareem Memorial Foundation **Event** Walk for Team Kareem **Date:** June 27, 2020

Facility Fee:				
Kissimmee Civic Center				
Arena, covered floor	$2130.00 daily		$2130.00 x 1 day	$ 2,130.00
Ballroom	$39.00 per hour		$39.00 per hour x 6 hours	$ 234.00
Rental Items:				
Tax:			7.5%	EXEMPT
Staff:				
Event Coordinator	$25.00 per hour		1 Coordinator x 7 hours x $25.00 per hour	$ 50.00
Event Staff	$15.00 per hour		3 Event Staff x 7 hours x $15.00 per hour	$ 315.00
KFD Inspector	$25.00 per hour			
EMS	$30.00 per hour			
KPD	$47.00 per hour			
Total Estimate				**$ 2,729.00**
Reservation Deposit (Amount Paid on Balance to Hold Date - Non Refundable)				**$ (600.00)**
Total Balance due before Damage Deposit				**$ 2,129.00**
Damage Deposit (Refundable)				**$ 472.80**
Fee Waiver				
Total Due 30 days prior to Event				**$ 2,601.80**

FEE WAIVER GRANT RANKING FORM

Organization Name: OUTREACH MINISTRIES **Event Name: KEEP KIDS OFF THE STREET**

Event Date: 8/29/2020 **Year of fee waiver award: 1**

Organization Structure (Mandatory Questions – No Point Value)	
How long has the sponsoring organization been incorporated?	
How long has the sponsoring organization physically been in operation?	
Please provide an organization chart of the Local Organizing Committee and describe how the sponsoring organization recruit volunteers to facilitate the event?	
Organization & Experience (50 Available Points)	**Value**
Has the sponsoring organization previously produced an event in Kissimmee? a. If so, please identify the event(s).	20
Has this specific event been previously produced? a. If so, when and where was the event held.	10
What is the uniqueness of the proposed event?	10
How does the proposed event support the organization's mission and benefit residents?	10
Event Revenue & Economic Impact (25 Available Points)	**Value**
Will the proposed event impact local businesses? a. If so, please describe the impact.	15
Evaluation of Itemized Budget (submitted by sponsoring organization)	10
Marketing (15 Available Points)	**Value**
How does the proposed event benefit the image or reputation of the City?	5
Identify all forms of advertisement to be used and provide a timeline for all promotion and advertising.	5
How much money will the sponsoring organization commit towards advertising?	5
Collaboration (10 Available Points)	**Value**
Is the sponsoring organization collaborating with any other non-profit group? a. If so, please state the commitment of all other groups.	5
Has the sponsoring organization solicited local vendors to support the event? a. If so, please identify all vendors that have committed to the event.	5
After Action Report (Previous Award Recipients Only)	**Value**
If an organization has previously received grant funding from the Event Fee Waiver Program, did the City After Action Report indicate the organization adhered to the requirements within this policy, event policies & guidelines, or any contracts/agreements.	No: -10

	Percentage of Maximum of Award			
PARAB Score (Points)	**Year 1**	**Year 2**	**Year 3**	**Year 4**
90-100	100	80	60	40
80-89	90	70	50	30
70-79	80	60	40	20
60-69	70	50	30	10
50-59	60	40	20	
40-49	50	30	10	
30-39	40	20		
20-29	30	10		
10-19	20			
0-9	10			

FEE WAIVER GRANT RANKED BY: ______________________________

Fee Waiver Amount Requested: $3000 **Previous Year's Fee Waiver Award:** $2517

KAIA GREENE

From: noreply@kissimmee.org
Sent: Thursday, December 19, 2019 12:13 PM
To: JAMIE PAUL; KAIA GREENE
Subject: City of Kissimmee Fee Grant Application

EXTERNAL EMAIL: This email originated from outside of the organization. DO NOT REPLY, CLICK LINKS, or OPEN ATTACHMENTS unless you recognize the sender and know the content is safe

A new entry to a form/survey has been submitted.

Form Name:	Fee Grant Application
Date & Time:	12/19/2019 12:13 PM
Response #:	73
Submitter ID:	10837
IP address:	174.221.6.56
Time to complete:	46 min. , 31 sec.

Survey Details

Page 1

City of Kissimmee Fee Grant Application (4 pages)

Event Information

Choose Eligibility Status

In order to be eligible to apply for a fee waiver grant the organization must meet at least 1 (one) of the following criteria:

Non-profit organization with a current 501(C) certificate

Government agency

An agency in which the City is a member

(○) Non Profit Organization

If non profit, attach a copy of the 501c certificate	501c3 Status Confirmation Letter - OCOJ Kissimmee 1-pager.pdf

New Standard Question

Requesting Organization:	Outreach Church of Jesus, Inc.	**Zip Code:**	34744
Address:	2231 Fortune Road	**Organization Phone:**	407-810-3999
City:	Kissimmee	**Email:**	bwmuhich@gmail.com
State:	Florida		

New Standard Question

Event Name:	10th Annual Keep Kids off the Streets Walkathon	**Event Type:**	Walkathon
Potential Event Date	08/29/2020	**Event Contact:**	Brian Muhich
Event Location:	Beltway w/ Otter & Panther Pavillions @ Kissimmee Lake Front Park	**Event Contact Cell Number:**	407-693-2711
Event Set Up Time:	6:30am - 8:00am	**Grant Amount Requesting ($3,000 maximum):**	3000.00
Actual Event Times:	8:00am - 2:00pm	**Organization's Chief Officer:**	Aubrey Kipp
Event Break Down Time:	2:00pm - 3:00pm	**Signature of Chief Officer:**	Aubrey Kipp
Anticipated Attendance:	500	**Brief Description of Event:**	

10th Annual Walkathon to help raise awareness of the youth/young adult programs provided tothe local community by OCOJ and other youth focused non-profits in the area, and to raise money to support our youth programs.

Page 2

Event Information (All Events)

Will your event require outdoor staging?

(○) No

Size: Not answered

Will your event require the rental of the modular stage (Veterans Lawn)?

(○) No

Size: Not answered

Will your event require tents? If yes, how many?

(○) No

How many: Not answered

Will your event require vehicles to access the park?

(○) Yes

Will your event require any road closures?

(○) No

If yes, please provide details of your requested road closures:

Not answered

Will your event require portable restrooms? If yes, how many?

(○) No

How many: Not answered

Will your event require utilities?

[×] None

Will your event hire Production Companies (lighting, sound, decorating, television, radio, etc.)?

(○) No

Name of Company: Not answered
Point of Contact: Not answered
Contact Phone Number: Not answered

Will your event require the use of additional space?

[×] None

Fishing Tournaments

Will your event require the use of the boat ramp?

(○) No

How many Boats: Not answered

Will your event require space for a tournament draw?

(○) No

Will your event require space for a weigh in?

(○) No

Tournament Draw: Not answered

Entertainment (All Events)

Will your event require alcoholic beverages to be dispensed, provided and/or sold? (The sale of alcohol at an event may require the use of the City's contracted and licensed concessionaire.)

(○) No

Will your event require a DJ?

(○) Yes

Does your entertainer have special requirements and/or a technical rider?

(○) No

Will your event have performers? Please specify whether they are international, national or local artists.

Not answered

Audio Visual (Indoor Events Only)

Will your event require rental of Civic Center audio equipment? (The City cannot provide AV equipment for outdoor events. That is the sole responsibility of the outdoor event licensee.)

(○) No

Will your event require additional AV Equipment?

[×] None

Promotions (All Events)

Will your event require banners to be hung?

(○) Yes

If yes, please provide size and location for the banners.

We have 2 4' x 8' Walkathon Banners we hang on the Pavillions. OCOJ Volunteer staff have traditionally hung these banners in past events.

At what level will your event be promoted?

(○) Local

Will media outlets be invited to the event?

(○) Yes

If yes, what type of media will be invited?

Radio, TV, Web (Facebook, Eventbrite, GoFundMe, z88.3), Schools

Page 3

Organization Structure (Mandatory Questions - no point value)

How long has the sponsoring organization been incorporated?

since 1993

How long has the sponsoring organization physically been in operation?

since 1983

Please provide an organizational chart of the Local Organizing Committee and describe how the sponsoring organization recruits volunteers to facilitate the event?

See attached.
Organizational Chart - OCOJ Walk.pdf

Organization and Experience (50 Available Points)

Has the sponsoring organization previously produced an event in Kissimmee? If so, please identify the events. (20 pts)

Yes. Our last 2 Walks were hosted by the City.

8th Annual Walk on 9/1/18 at Kissimmee Lake Front Park.
9th Annual Walk originally scheduled for 8/31/19 at Lake Front Park, rescheduled due to Hurricane Dorian for 11/23/19 at Kissimmee Civic Center.

Our previous 7 Walks were hosted at Orlando's Lake Eola Park.

Has this specific event been produced previously? If so, when and where was the event held? (10 pts)

Yes. Our last 2 Walks were hosted by the City.

8th Annual Walk on 9/1/18 at Kissimmee Lake Front Park.
9th Annual Walk originally scheduled for 8/31/19 at Lake Front Park, rescheduled due to Hurricane Dorian for 11/23/19 at Kissimmee Civic Center.

Our previous 7 Walks were hosted at Orlando's Lake Eola Park. Each of our 1st 7 Walks took place the Saturday before Labor Day.

What is the uniqueness of the proposed event? (10 pts)

This event brings awareness and support to local non profits whose missions is to help keep kids off the streets through the programs they offer.

It's a completely free event in which we were able to raffle off over $10,000 of free giveaways from local businesses, restaurants and entertainment venues who support our community youth.

This past walk included a bounce house and photo booth, both free to all who came, and all the food and drink at the event was donated and given away at no cost.

Children focused - 100% free and open to everyone in the community. Amazing family friendly event which we hope to grow each year through new partnerships with other local non profits who have the same heart and mind as OCOJ to help foster a safe environment for our children to learn, grow and have fun.

How does the proposed event support the organization's mission and benefit Kissimmee residents? (10 pts)

As stated previously, this event brings awareness and support to local non profits whose missions is to help keep kids off the streets through the programs they offer.

It's a completely free event in which we were able to raffle off over $10,000 of free giveaways from local businesses, restaurants and entertainment venues who support our community youth.

This past walk included a bounce house and photo booth, both free to all who came, and all the food and drink at the event was donated and given away at no cost.

We also were able to give away $2,000 in college scholarships to two of the community's youth during our 9th annual walk. Hoping to continue and grow these scholarships each year.

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<u>Event Revenue and Economic Impact (25 Available Points)</u>

Will the proposed event impact local businesses? If so, please describe the impact. (15 pts)

Yes. We had over 100 unique businesses donate this past year to our free raffle we do throughout the event. This brings new traffic into their stores and their donations build a sense of community and sincere care for the people of Kissimmee and central Florida.

Advertising is also achieved through the donations as the businesses are mentioned by name and their generous donations over the speaker system before they are raffled off.

We also invite vendors at no cost who are given a few minutes to address the community over the speak system to promote their businesses.

Evaluation of Itemized Budget (Please attach the sponsoring organization's event budget). (10 pts)

File Name: BUDGET - OCOJ Annual Walkathon 10th.pdf

Page 5

<u>Marketing (15 Available Points)</u>

How does the proposed event benefit the image or the reputation of the City? (5 pts)

Very positively. It shows the people of Kissimmee that the City cares about the future of the community by investing in our youth and programs that strengthen our children.

Identify all forms of advertisement to be used and provide a timeline for all promotion and advertising. (5 pts)

Postcards/flyers - produced and ready for distribution by 3/1/20.
Web promotion - by 3/1/20.
Posters - by 7/1/20.
TV/Radio promotion - August 2020.
T-shirt advertising - by 8/1/20.

How much money will the sponsoring organization commit towards advertising? (5 pts)

2000

Page 6

Collaboration (10 Available Points)

Is the sponsoring organization collaborating with any other non-profit group? If so, please state the commitments of all other groups. (5 pts)

Yes. For the past 2 years, OCOJ has had the local YMCA as a Vendor. This past Walk, we saw an increase in total vendors from 2 in 2018 to nearly a dozen. Embrace Families and Kidney Awareness Society were two other non profits to join the Vendors in 2019.

We are hoping to be able to open this event to fundraising for these other local non profits who share the same heart and mind of providing programs to help the community youth.

We have already begun discussions with one of the non profits over the practicality of this.

Has the sponsoring organization solicited local vendors to support the event? If so, please identify all vendors/merchants that have committed to the event. (5 pts)

Yes. In 2019, we had Embrace Families, GC Tax, K1 Speed, KFD, Kidney Awareness Society, KPD, Osceola County Sheriff, Staywell and YMCA. We had several other Vendors who had committed to our original Walk date of 8/31/19 but were unable to attend the make up date, including Children's Home of Central FL, Cracker Barrel Kissimmee, Dare 2 Escape and MakerFX.

We also had Central Christian Academy (CCA) out in our 8th Walk, and hope to have them back in 2020. Schedule conflicts made it not feasible for them to be at our last walk.

Most of these vendors have expressed desire to come back in 2020. We also hope to have Boys & Girls Club and Big Brothers Big Sisters of Central Florida at our 2020 event, if they desire.

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After Action Report (Previous Award Recipients Only)

If an organization has previously received grant funding from the Event Fee Waiver Program, did the City's After Action Report indicate that the organization adhered to the requirements within the fee waiver policy, event policies & guidelines, or any contracts/agreements. (If no, -10 pts)

[×] **Yes**
[ ] **No**

The overall percentage of the requested amount of expenses to be waived by the City shall be determined by the total points earned during the scoring process. The breakdown of the percentage that shall be waived is as follows:

	Percentage of Maximum of Award			
PARAB Score (Points)	**Year 1**	**Year 2**	**Year 3**	**Year 4**
90-100	100	80	60	40
80-89	90	70	50	30
70-79	80	60	40	20
60-69	70	50	30	10
50-59	60	40	20	
40-49	50	30	10	
30-39	40	20		
20-29	30	10		
10-19	20			
0-9	10			

Insurance

Do you currently have or have you applied for insurance? (All insurance must follow specific guidelines as outlined in the Special Event Insurance guidelines)

(○) Yes

Please type your name to serve as a signature in the fields below acknowledging the information you have provided is correct.

Signature: Brian Muhich
Date: 12/19/2019

Thank you,
City of Kissimmee, FL

INTERNAL REVENUE SERVICE
DISTRICT DIRECTOR
C - 1130
ATLANTA, GA 30301

DEPARTMENT OF THE TREASURY

Date: AUG 11 1993

OUTREACH CHURCH OF JESUS
INCORPORATED
218 W BASS ST
KISSISSIMMEE, FL 34741

Employer Identification Number:
59-3161637
Case Number:
583209578
Contact Person:
JAMES ST. JULIEN
Contact Telephone Number:
(404) 331-0171
Accounting Period Ending:
12/31
Form 990 Required:
No
Addendum Applies:
Yes

Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from Federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

We have further determined that you are not a private foundation within the meaning of section 509(a) of the Code, because you are an organization described in sections 509(a)(1) and 170(b)(1)(A)(i).

If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status and foundation status. In the case of an amendment to your organizational document or bylaws, please send us a copy of the amended document or bylaws. Also, you should inform us of all changes in your name or address.

As of January 1, 1984, you are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of $100 or more you pay to each of your employees during a calendar year. This does not apply, however, if you make or have made a timely election under section 3121(w) of the Code to be exempt from such tax. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Since you are not a private foundation, you are not subject to the excise taxes under Chapter 42 of the Code. However, you are not automatically exempt from other Federal excise taxes. If you have any questions about excise, employment, or other Federal taxes, please let us know.

Grantors and contributors may rely on this determination unless the Internal Revenue Service publishes notice to the contrary. However, if you lose your section 509(a)(1) status, a grantor or contributor may not rely on this determination if he or she was in part responsible for, or was aware of, the act or failure to act, or the substantial or material change on the part of the organization that resulted in your loss of such status, or if he or she acquired knowledge that the Internal Revenue Service had given notice that you would no longer be classified as a section 509(a)(1) organization.

OCOJ Organizational Chart
10th Annual Help Keep Kids Walk

Aubrey Kipp, Pastor

Brian Muhich, Event Director | Kevin Strawter, Assistant Director

YG! Walk Planning Committee:

Jeremiah Irving, Elder | Joseph Kipp, Elder | Jamiya Irving | Adriania Lewis | Destiny Kipp

Adult Walk Planning Committee:

Kevin Strawter, Deacon | Pamela Strawter | Ricky Jones | Hera Lynn Jones | Deedee Muhich

Additional Walk Volunteers:

~ 30 Other Members of Outreach Church of Jesus

Proposed BUDGET:
10th Annual HKK's Walkathon

Last updated:
12/19/2019

Budget Item	Cost
Advertising & Promotion (including event T-shirts)	$1,800
Entertainment	$500
Food & Drink	$400
Gifts (Scholarships/Outstanding youth of the year)	$2,500
Licensing & Registration Fees	$300
Supplies	$500
Venue	$3,000
TOTAL Cost	**$9,000**

ANTICIPATED EVENT DONATIONS

Donated Item Description	Donation Amt
Cash donations	$20,000
Food	$1,000
Raffle/giveaways (e.g. local business gift certificates, entertainment free passes)	$10,000
Staff - OCOJ (20 volunteers - 9 hrs each @ $12/hr)	$2,160
Staff - City of Kissimmee (if Fee Waiver Granted)	$3,000 *
TOTAL Anticipated Event Dontations	**$36,160**

**If fee waiver applicant grant is approved by City of Kissimmee for amount requested.*

PROJECTED USE OF CASH DONATIONS

Programs funded by Walk Donations	Funding Amt	
Summer Vacation Bible Camps	$5,000	25%
College Tuition Assistance	$5,000	25%
Future Programs (TBD)	$2,000	10%
Mission Trips	$6,000	30%
Music Scholarships (including lessons assistance)	$2,000	10%
TOTAL Program Funding	**$20,000**	**100%**

OUTREACH CHURCH OF Jesus
www.ocoj.org

ANNUAL WALKATHON

November 23, 2019

10am - 4pm

Kissimmee Civic Center

201 E. Dakin Avenue

Kissimmee, FL 34741

9TH ANNUAL WALKATHON

HELP KEEP KIDS OFF THE STREETS!

"SAVING OUR KIDS ONE STEP AT A TIME"

www.facebook.com/ocojwalk

SPONSORED BY:

CITY OF KISSIMMEE 1883

WALK WITH US

Hosted By: OUTREACH CHURCH OF Jesus

FREE TO WALK

FREE FOOD & DRINK

FREE RAFFLE GIVEAWAYS

Over $10,000 worth!

FOR MORE INFO, CONTACT US:

(407) 693-2711

ocojwalk@gmail.com

100% OF MONIES RAISED WILL BE USED TO HELP KEEP BAHAMIAN KIDS OFF THE STREETS THROUGH HURRICANE DORIAN BAHAMA RELIEF EFFORTS

PRE-REGISTER TODAY!

https://ocojwalk2019.eventbrite.com

9TH ANNUAL WALKATHON

HELP KEEP KIDS OFF THE STREETS!

Saturday, November 23, 2019
10am - 4pm
Kissimmee Civic Center & Arena
201 E. Dakin Avenue
Kissimmee, FL 34741

SPONSORED BY:

CITY OF KISSIMMEE 1883

100% OF MONIES RAISED WILL BE USED TO HELP KEEP BAHAMIAN KIDS OFF THE STREETS THROUGH HURRICANE DORIAN BAHAMA RELIEF EFFORTS

YOUTH GRAND PRIZE RAFFLE PACKAGE:

- **Black Fire Brazilian Steakhouse:** Dinner for 4 ($200 value)
- **First Watch:** $80 Gift Cards
- **Five Guys:** $75 Gift Card
- **Holiday Inn Express:** 2 night stay (up to $500 value)
- **Holy Land:** 5 Free Tickets ($250 value)
- **Main Event Entertainment:** Fun Pack for up to 6 ($250 value)
- **Park Pizza:** $250 Gift Card
- **The Escape Effect:** 1 Game of Encore for up to 6 + 1 free t-shirt ($240 value)

FREE TO WALK

(Donations Accepted)

FREE FOOD & DRINK

FREE RAFFLE GIVEAWAYS

Over $10,000 in FREE giveaways including these grand prize packages and 2 Bowling & Pizza Party packages for up to 30 people from AMF Kissimmee Lanes & Pizza Hut.

ADULT GRAND PRIZE RAFFLE PACKAGE:

- **Andretti Indoor Karting:** Family 4 Pack ($175 Value)
- **Bonefish Grill:** Excursion Gift Basket w/ Dinner for up to 8 ($750 Value!)
- **Escapology:** 1 Game up to 6 players ($180 value)
- **First Watch:** $80 Gift Cards
- **Five Guys:** $75 Gift Card
- **Holiday Inn Express:** 2 night stay (up to $500 value)
- **Kings Dining & Entertainment:** Bowling Party for 6 w/ Pizza ($100 value)
- **Miller's Ale House:** $200 in Gift Cards

PRE-REGISTER TODAY!

https://ocojwalk2019.eventbrite.com

www.facebook.com/ocojwalk

OUTREACH CHURCH OF Jesus

9TH ANNUAL WALKATHON 2019

HELP KEEP KIDS OFF THE STREETS

AUGUST 31

8AM - 2PM

“SAVING OUR KIDS ONE STEP AT A TIME”

SPONSORED BY

CITY OF KISSIMMEE 1883

www.facebook.com/ocojwalk

WALK WITH US

Location:

Kissimmee Lake Front Park

**201 Lakeview Dr,
Kissimmee, FL 34741**

FREE TO WALK

FREE FOOD & DRINK

FREE RAFFLE GIVEAWAYS

FOR MORE INFO, CONTACT US:

(407) 693-2711

ocojwalk@gmail.com

Children truly are a gift, a heritage from God, and what we invest in them now as their community, as their parents, their teachers, mentors, and guides is what our children use to help keep them off the streets, and so much more.

PRE-REGISTER TODAY!

https://ocojwalk2019.eventbrite.com

HELP KEEP KIDS OFF THE STREETS!

9TH ANNUAL WALKATHON

SPONSORED BY:

CITY OF KISSIMMEE 1883

August 31, 2019 - 8AM to 2PM

Kissimmee Lake Front Park

201 Lakeview Dr, Kissimmee, FL 34741

For the first 1,000 miles walked by the community, $10 per mile will be raised to fund new and existing programs that will help keep kids off the streets.

- Over $8,000 of free giveaways from Local Restaurants and Attractions.
- Great Grand Prize drawings for adults & youth.
- Bowling & Pizza party packages for 30 from AMF Kissimmee Lanes & Pizza Hut.

FREE TO WALK
FREE FOOD AND DRINKS
FREE RAFFLE GIVEAWAYS

PRE-REGISTER TODAY!

https://ocojwalk2019.eventbrite.com

www.facebook.com/ocojwalk

9th Annual Help Keep Kids off the Street Walkathon: 11/23/19

Additional (Non-Print) Marketing Methods used to promote Walkathon:

- **Eventbrite:** https://ocojwalk2019.eventbrite.com/
- **Facebook:** www.facebook.com/ocojwalk
- **GoFundMe:** www.gofundme.com/ocojwalk2019
- **The Ted Show:** https://www.facebook.com/WelcomeToTheTedShow/
- **Z88.3 Radio**: Web Calendar

Venue & Other

SPONSORS

CITY OF KISSIMMEE 1883

HOME DEPOT

CAPTAIN D's EST. 1969 SEAFOOD KITCHEN

Franchise Opportunity

THE KIDNEY AWARENESS SOCIETY

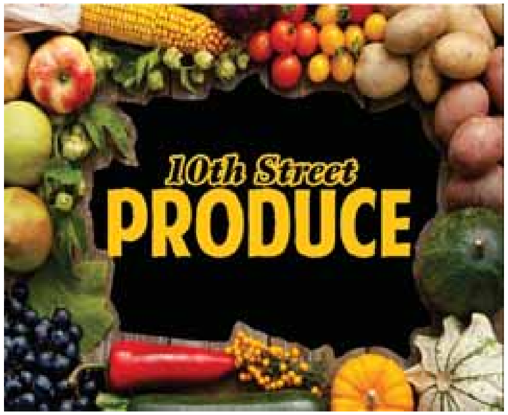
TAYLOR RENTAL

Moonwalker party services LLC

9th ANNUAL WALKATHON HELP KEEP KIDS OFF THE STREETS

Food & Drink

SPONSORS



cicis™

THE FRESH MARKET

LOWE'S®

Sam's CLUB®

SUBWAY®

TARGET

Publix®

9TH ANNUAL WALKATHON
HELP KEEP KIDS OFF THE STREETS

RAFFLE

SPONSORS

atouchofbasil.com

AMF

ANDRETTI INDOOR KARTING & GAMES

Bahama Breeze ISLAND GRILLE

Bar Louie

BJ's RESTAURANT BREWHOUSE

AR

ABUELO'S MEXICAN RESTAURANT

AIR FLORIDA HELICOPTER CHARTERS, INC.

ANGEL NAIL SPA

Cheddar's SCRATCH KITCHEN

Chuy's

BLACK FIRE BRAZILIAN STEAKHOUSE

BONEFISH GRILL

CHURRASCARIA CAFE MINEIRO BRAZILIAN STEAKHOUSE

CARRABBA'S ITALIAN GRILL

Diane's Creations & Tea Room

DAVE & BUSTER'S

DINOSAUR WORLD

CONGO RIVER GOLF

EPIC THEATRES

Cracker Barrel Old Country Store

Crayola Experience Orlando, FL

DARE 2 ESCAPE THE GAME

FOGO DE CHÃO BRAZILIAN STEAKHOUSE

THE ESCAPE EFFECT EXPLORE • SOLVE • CONQUER

ESCAPOLOGY Time is of the essence

FIRST WATCH THE DAYTIME CAFE

FIVE GUYS BURGERS and FRIES

Holy Land Experience Trinity Broadcasting Network

FOREVER FLORIDA ADVENTURES IN THE WILD EST. 1990

THE FRESH MARKET

FUN SPOT AMERICA THEME PARKS

GATOR'S DOCKSIDE FLORIDA

GATORLAND ALLIGATOR CAPITAL OF THE WORLD

golden corral

HAND & STONE MASSAGE AND FACIAL SPA

Holiday Inn Express & Suites

9TH ANNUAL WALKATHON HELP KEEP KIDS OFF THE STREETS

RAFFLE

SPONSORS

Jimmy Bear's BBQ Pork·Beef·Chicken·Ribs

K1 Speed

KINGS Dining & Entertainment

Kissimmee Go karts

Kings Point Ice Cream & Burger

LongHorn Steakhouse

Miller's Ale House

Lost Caverns Adventure Golf

Magical Midway Thrill Park

NYPD Pizza

Main Event Eat. Bowl. Play.

Marsh Landing Adventures

Mellow Mushroom

Medieval Times Dinner & Tournament

Marco's Pizza

Mighty Jungle Golf

NASCAR I-Drive Indoor Kart Racing

Moe's Southwest Grill

Slingshot – The Sky's No Limit!! – Vomatron

Papa John's Pizza

Orange Bowl Lanes

Orlando Star Flyer

Outback Steakhouse

Panda Express Chinese Kitchen

Panera Bread

Park Pizza & Brewing Co.

Pei Wei Asian Kitchen

Pizza Hut

Putting Edge

Rack Room Shoes

Red Lobster

Rock & Brews Restaurant

pizza@

Ruth's Chris Steak House

Red Robin Gourmet Burgers and Brews

Romano's Macaroni Grill

Skate Reflections

Sugar Factory

VR Territory

Uno Pizzeria & Grill Est. 1943

Wild Florida

WonderWorks – Let your imagination run wild!

Sizzler

Studio Movie Grill Eat·Drink·Movies

Twistee Treat

Uncle Julio's Mexican from Scratch

WildSide Bar & Grille

Wyndham

9th Annual Walkathon – Help Keep Kids Off the Streets

SPONSORS

RAFFLE

Youth GRAND PRIZE

YOUTH GRAND PRIZE PACKAGES 1 & 2 INCLUDE:

Kissimmee Lanes

2 Hour Bowling Party Package for 20 from AMF

+

$50 in Gift Cards and 5 Large, 1 Topping Pizzas from Pizza Hut

YOUTH GRAND PRIZE 3 PACKAGE INCLUDES:

- **Black Fire Brazilian Steakhouse:** Dinner for 4 ($200 value)
- **First Watch:** $80 Gift Cards
- **Five Guys:** $75 Gift Card
- **Holiday Inn Express:** 2 night stay (up to $500 value)
- **Holy Land:** 5 Free Tickets ($250 value)
- **Main Event Entertainment:** Fun Pack for 6 ($250 value)
- **Park Pizza:** $250 Gift Card
- **The Escape Effect:** 1 Game of Encore for up to 6 players + 1 free t-shirt ($240 value)

9th ANNUAL WALKATHON
HELP KEEP KIDS OFF THE STREETS

RAFFLE

SPONSORS

Adult GRAND PRIZE

BONEFISH GRILL

ESCAPOLOGY
Time is of the essence

ANDRETTI
INDOOR KARTING & GAMES

FIVE GUYS
BURGERS and FRIES

ADULT GRAND PRIZE 2 PACKAGE INCLUDES:

- **Andretti Indoor Karting:** Family 4 Pack ($175 Value)
- **Bonefish Grill:** Excursion Gift Basket w/ Dinner for up to 8 ($750 Value!)
- **Escapology:** 1 Game up to 6 players ($180 value)
- **First Watch:** $80 Gift Cards
- **Five Guys:** $75 Gift Card
- **Holiday Inn Express:** 2 night stay (up to $500 value)
- **Kings Dining & Entertainment:** Bowling Party for 6 w/ Pizza ($100 value)
- **Miller's Ale House:** $200 in Gift Cards

ADULT GRAND PRIZE 1 PACKAGE INCLUDES:

FIRST WATCH
THE DAYTIME CAFE

Holiday Inn Express & Suites

AMF
Kissimmee Lanes

2 Hour Bowling Party Package for 20 from AMF

+

$75 in Gift Cards from Uno Pizzeria & Grill

EST. 1943
UNO
PIZZERIA & GRILL

KINGS
DINING & ENTERTAINMENT

MILLER'S ALE HOUSE

9th ANNUAL WALKATHON
HELP KEEP KIDS OFF THE STREETS

OUTREACH CHURCH OF Jesus

PROFIT & LOSS STATEMENT & REVENUE REPORT

9th Annual Help Keep Kids off the Street Walkathon: 11/23/19

INCOME		
Gift Card Donations	$250	
Grants: City of Kissimmee	$2,517	
Solicited Donations: Corporate	$11,240	
TOTAL INCOME		**$14,007**

EXPENSES		
ADVERTISING & PROMOTION	$1,842	
ENTERTAINMENT	$480	
FOOD & DRINK	$127	
GIVEAWAYS	$2,706	
LICENSING & REGISTRATION FEES	$250	
SUPPLIES	$749	
VENUE	$2,657	
TOTAL EXPENSES		**$8,812**

NET INCOME	**$5,195**

Last Updated:

12/1/2019

OUTREACH CHURCH OF Jesus

FINAL EXPENSE REPORT

Last Updated: *12/1/2019*

9th Annual Help Keep Kids off the Street Walkathon: 11/23/19

Expense Description		Total Cost
ADVERTISING & PROMOTION		**$1,842**
5 x 7 Walkathon Postcards w/ Map & Program	$121	
Main Event Flyer (5 x 7): 6,000 total	$434	
Main Event Poster (17 x 11): 150 total	$241	
Program (2' x 3'), 11x17 Table Top Displays & Scholardship Plaques	$39	
T-shirts for OCOJ members: 113 + 6 separate	$1,002	
Ted Show	$6	
ENTERTAINMENT		**$480**
Bounce House	$180	
Photo Booth	$300	
FOOD & DRINK		**$127**
Chips	$58	
Pizza - Cici's	$70	
Subs - Subway	Donated	
Breakfast Bars	Gift Card	
Fruit	Donated	
Bottled Water	Donated	
Juice/Capri Suns	Gift Card	
Gift Card Credit: $200 from Target		-$200
Gift Card Credit: $100 from Publix		-$100
Gift Card Credit: $100 Sam's Club		-$100
GIVEAWAYS		**$2,706**
College Scholarships	$2,000	
Grand Prize Giveaways (discounted Holiday Inn Express vouchers)	$280	
Outstanding Youth Award Gifts	$246	
Wristbands for all walkers (purchased 150 Adult & 250 youth)	$180	
LICENSING & REGISTRATION FEES		**$250**
Liability Insurance for Walkathon	$250	
SUPPLIES		**$749**
250 Removeable Route Arrows	$86	
Raffle/Ballot Boxes (10 pack) + 2 packs of Entry Forms (3,000 total)	$77	
2 12 packs of white table covers	$27	
Tape Gun w/ 2 tape rolls	$19	
2 acrylic raffle ticket drum spinners	$123	
20 17x11 Acrylic Top Loading Double Sided Table Top Sign Holders	$260	
Floor Standing Sign Holder (2' x 3')	$97	
Mason Line yellow string w/ holder	$11	
Dry Erase Markers & 100 envelopes (for walkathon gifts)	$30	
2 2' x 3' white boards	$13	
4 100 pack counts of 3oz cups	$14	
returned 2 100 pack counts of 3oz cups	-$7	
VENUE		**$2,657**
Administrative Fees	$100	
Beltway Lawn, otter & Panther Pavillions 1-day Rental (non-profit)	$700	
Coordinator Fees	$225	
Event Staff	$270	
KFD Inspector	$100	
EMS	$180	
KPD	$432	
City Services: Utility Fees	$50	
Rental Items	$460	
Damage Deposit (refundable)	$140	
COK Grant		-$2,517
TOTAL Cost	**$8,812**	**$5,895**
(a) Total Cost	**(a)**	**(b)**

(b) Total Cost less grants, refunds, gift cards and donations

OUTREACH CHURCH OF Jesus

VENDOR LISTING

9th Annual Help Keep Kids off the Street Walkathon: 11/23/19

Embrace Families
Esma Dennis
111 E Monument Ave
Kissimmee, FL 34741
407-721-3892
Esma.Dennis@embracefamilies.org

General Connection Taxes
Valerie Rivera
3 S John Young Pkwy
Kissimmee, FL 34741
407-301-6673
Hr.gctax@gmail.com

Kidney Awareness Society
Edwine McAdams
616 Deauville Ct
Kissimmee, FL 34758
561-255-0988
EdwineMcAdams@gmail.com

K1 Speed
Dan Radatz
9550 Parksouth Ct, Suite 400
Orlando, FL 32837
407-434-7500
dan.radatz@k1speed.com

Kissimmee Fire Department (KFD)
Joan Robinson
101 Church Street, Suite 200
Kissimmee, FL 34741
407-518-2222

Kissimmee Police Department (KPD)
Jeinly Ortiz
8 N Stewart Ave
Kissimmee, FL 34741
321-443-5752
Jeortiz@Kissimmee.org

Osceola County Sherrif's Office
Jocelyn Hawkins
2601 E Irlo Bronson Memorial Hwy
Kissimmee, FL 34744
321-697-4542
Jocelyn.Hawkins@osceola.org

Staywell, A Wellcare Company
Melissa Ruiz
1060 N John Young Parkway
Kissimmee, FL 34741
407-861-4880
Melissa.Ruiz@Wellcare.com

YMCA
Jovan Sanabria
2117 W Mabbette Street
Kissimmee, FL 34741
407-847-7413
jsanabria@cfymca.org

Keep Kids Off the Streets
Event Coordinator: Christina Schipani /Julio Rivera
Event Organizer: Brian Muhich
Event Type: Walkathon
Date: November 23, 2019
Location: Arena and Lobby
Move in Time: 8:00 a.m.
Event Time: 10:00 a.m. – 4:00 p.m.
Move Out Time: 4:00 p.m.
Number of Attendees: 150 - 200
Vendors: 11
Repeat Event/Client: Yes

This event was originally scheduled for August 31, 2019 on the Lighthouse Lawn but was postponed due to Tropical Storm Dorian.

Summary:
- Vendors and client set-up on time
- Event started on time
- Raffles included bottles of wine, gift cards from Outback Steakhouse, Cheddars, 3 – 5 night 4 day stays in Mexico and a few other great prizes
- Rondu Artis from Kissimmee Police Department walked 221 laps, equivalent to11.2 miles
- 2:00 p.m. event ended on time and strike begin
- 4:30 p.m. facility strike complete

Deposit Refund Information
Deposit Amount Paid: $140.00
Refund Granted: **Pending**
Household #: 8116
Reservation #: 4448

CITY OF KISSIMMEE 1883

Organization: Outreach Church of Jesus, Inc. **Event** Keep Kids off the Streets **Date:** August 29, 2020

Administration Fee	$100.00			$ 100.00
Facility Fee:				
Lighthouse Lawn	$700 daily		$700.00 x 1 day	$ 700.00
Otter Pavilion	included			
Panther Pavilion	included			
Rental Items:				
Picnic tables	$15.00 per		4 picnic tables x $15.00 per	$ 60.00
Barricades	$10.00 per		10 Barricades x $10.00 per	$ 100.00
Portalets	Market Rate		2 Regular, 1 ADA, 1 sink	$ 400.00
Taxes:			7.5%	EXEMPT
Utilities:				
Water	$25.00			$ 25.00
Electricity	$25.00			$ 25.00
Staff:				
Event Coordinator	$25.00 per hour		1 Coordinator x 8 hours x $25.00 per hour	$ 200.00
Event Staff	$15.00 per hour		2 Event Staff x 8 hours x $15.00 per hour	$ 240.00
KFD Inspector	$25.00 per hour			
EMS	$30.00 per hour		1 EMS x 6 hours x $30.00 per hour	$ 180.00
KPD	$47.00 per hour			
Total Estimate				**$ 2,030.00**
Reservation Deposit (Amount Paid on Balance to Hold Date - Non Refundable)				**$ (250.00)**
Total Balance Due Before Damage Deposit				**$ 1,780.00**
Damage Deposit (Refundable)				**$ 140.00**
Fee Waiver Amount				
Total Due 30 days prior to Event				**$ 1,920.00**

FEE WAIVER GRANT RANKING FORM

Organization Name: CENTRO CULTURAL PR **Event Name: PR FESTIVAL & PARADE**

Event Date: 9/12/2020 **Year of fee waiver award: 1**

Organization Structure (Mandatory Questions – No Point Value)	
How long has the sponsoring organization been incorporated?	
How long has the sponsoring organization physically been in operation?	
Please provide an organization chart of the Local Organizing Committee and describe how the sponsoring organization recruit volunteers to facilitate the event?	
Organization & Experience (50 Available Points)	**Value**
Has the sponsoring organization previously produced an event in Kissimmee? a. If so, please identify the event(s).	20
Has this specific event been previously produced? a. If so, when and where was the event held.	10
What is the uniqueness of the proposed event?	10
How does the proposed event support the organization's mission and benefit residents?	10
Event Revenue & Economic Impact (25 Available Points)	**Value**
Will the proposed event impact local businesses? a. If so, please describe the impact.	15
Evaluation of Itemized Budget (submitted by sponsoring organization)	10
Marketing (15 Available Points)	**Value**
How does the proposed event benefit the image or reputation of the City?	5
Identify all forms of advertisement to be used and provide a timeline for all promotion and advertising.	5
How much money will the sponsoring organization commit towards advertising?	5
Collaboration (10 Available Points)	**Value**
Is the sponsoring organization collaborating with any other non-profit group? a. If so, please state the commitment of all other groups.	5
Has the sponsoring organization solicited local vendors to support the event? a. If so, please identify all vendors that have committed to the event.	5
After Action Report (Previous Award Recipients Only)	**Value**
If an organization has previously received grant funding from the Event Fee Waiver Program, did the City After Action Report indicate the organization adhered to the requirements within this policy, event policies & guidelines, or any contracts/agreements.	No: -10

	Percentage of Maximum of Award			
PARAB Score (Points)	**Year 1**	**Year 2**	**Year 3**	**Year 4**
90-100	100	80	60	40
80-89	90	70	50	30
70-79	80	60	40	20
60-69	70	50	30	10
50-59	60	40	20	
40-49	50	30	10	
30-39	40	20		
20-29	30	10		
10-19	20			
0-9	10			

FEE WAIVER GRANT RANKED BY: ______________________________

Fee Waiver Amount Requested: $3000 **Previous Year's Fee Waiver Award:** $3000

CITY OF KISSIMMEE 1883

SPECIAL EVENT FEE WAIVER GRANT APPLICATION

Requesting Organization Information	
Organization Name: Centro Cultural Puertorriqueño	Telephone Number: 407-201-6465
Address: 485 Peppermill Circle	
City: Kissimmee State: FL	Zip: 34758
Name of Chief Officer: Rogelio Figueroa	
Eligibility/Type: ■ Non-Profit ☐ Government ☐ Agency with City Membership	
If non-profit, attach a copy of your organization's 501(c) certificate.	

Event Contact Information	
Name: Rogelio Figueroa	Title: President
Telephone Number: 407-201-6465	Email: gelo637@aol.com

Event Information		
Name of Event: Desfile Puertorriqueño de la Florida		
Date of Event: 09/05/2020	Start Time: 11:00 am	End Time: 8:00pm
Location of Event: Beltway Kissimmee Lakefront Park		
Event Set-Up Date: 09/05/2020	Set-Up Time: 8:00am	Strike Time: 8:00pm
Type of Event: Parade, Festival, and Business Expo		
Estimated Number of Attendees: 1,500		
Brief Description of Event: Desfile Puertorriqueño de la Florida is one day cultural celebration that includes a Parade, Health Fair, Business Expo, and Festival.		
Grant Request Amount ($3,000 Max): $3,000		

Event Information (All Events)		
Will your event require outdoor staging?	■ Yes	☐ No
Will your event require the rental of the modular stage for Veterans lawn?	■ Yes	☐ No
Will your event require tents?	■ Yes	☐ No
Will your event require vehicle access into the park?	■ Yes	☐ No
Will your event require road closures?	■ Yes	☐ No
If yes, please provide details on your requested road closures: For the Puerto Rican Parade starts at 8:30 am for staging and its starts at 11:00am. We have around 50 participants with floats, cars and motorcycles.		
Will your event require portable restrooms?	■ Yes	☐ No
Will your event require utilities?	☐ No ■ Power ■ Water	

Will your event hire production companies? (Lighting, Staging, Audio, Décor, Film, Broadcast, etc.)	☒ Yes ☐ No
If yes, please provide company name, point of contact, and phone number: Murillo Audio Visual LLC; David Murillo; 863-393-8705	
Will your event require the use of additional space? ☒ Green/Dressing Room ☐ Locker-room(s) ☐ Reception Area ☐ Autograph Area ☐ Food Prep Area ☐ Dance Floor ☐ Private Meeting Space ☐ Rehearsal Space ☐ None	

Fishing Tournaments	
Will your event require the boat ramp?	☐ Yes ☐ No
How many boats are expected to participate?	
Will your event require space for a tournament draw?	☐ Yes ☐ No
Will your event require space for a weigh-in?	☐ Yes ☐ No

Entertainment (All Events)	
Will your event require alcoholic beverages to be dispensed or sold? *The sale of alcohol at an event may require the use of the City's contracted and licensed concessionaire.*	☒ Yes ☐ No
Will your event require a DJ?	☒ Yes ☐ No
Does your entertainer have special requirements and/or a technical rider?	☐ Yes ☒ No
Will your event have performers?	☒ Yes ☐ No
If yes, please specify whether they are international, national, or local artists: Local and national artists.	

Audio Visual (Indoor Events Only)	
Will your event require the rental of audio equipment?	☐ Yes ☐ No
Will your event require any additional audio-visual equipment? ☐ Podium ☐ Easels ☐ Projector & Screen ☐ TV/VCR/DVD ☐ Microphones ☐ Extension Cords/Strips ☐ None	

Promotions (All Events)	
Will your event require banners to be hung?	☒ Yes ☐ No
At what level will your event be promoted?	☒ Local ☒ Regional ☒ National
Will any media outlets be invited to the event?	☒ Yes ☐ No
If yes, what type of media will be invited? Radio, Television, Newspaper, Website, Community Events and Magazines.	

Organization Structure (Mandatory Questions – No Point Value)
How long has the sponsoring organization been incorporated? Since 2012 our organization has been incorporated.
How long has the sponsoring organization physically been in operation? Our organization was founded in 2009. We are a non profit organization run by volunteers and a Board of Directors.
Please provide an organization chart of the Local Organizing Committee and describe how the sponsoring organization recruit volunteers to facilitate the event? We have a Board of Directors and 8 committee members as well we recruit volunteers through social media, word of mouths and community events to facilitate this event. (See attached form for organization chart).

Organization & Experience (50 Available Points)
Has the sponsoring organization previously produced an event in Kissimmee? If so, please identify the event(s): Our organization has produced the Puerto Rican Parade and Festival for Eight Years. We have been able to do a three-day event including Borinken Award Gala and two-day festival and the parade. We have been able to bring different delegations from Puerto Rico, bands and cultural groups of the different municipalities of the island, international artist and we have been able to showcase our culture.
Has this specific event been previously produced? If so, when and where was the event held: Our event previously was produced in the Osceola Heritage Park from 2011 through 2016. During the years 2018 an d 2019 has been held at Beltway Kissimmee Lake Front Park.
What is the uniqueness of the proposed event? For the past 8 years, we have brought to our county and city an event that was never done before and has attracted many tourists from all over including delegation from PR, NY and other states. This was an idea to unite, show our pride and share our culture with the community and 2nd and 3rd generations of children that live in this community are losing their cultural identity because of lack of exposure to their traditions, values, and heritage. Even though this event is tailored for the Puerto Rican Community we have attracted other cultures to support our event because of the diversity presented.
How does the proposed event support the organizations mission and impact to residents? It is our intention to celebrate an annual event that will celebrate the diversity of our community, to recognize our customs and traditions for the enjoyment of our future generations. Also to promote the integration of Hispanic into activities of our community.

Event Revenue & Economic Impact (25 Available Points) – *An itemized budget is required to be submitted with this application.*
Will the proposed event impact local businesses? If so, please describe the impact: Visitors from Puerto Rico, New York and other areas from the state will have the opportunity to visit the city and county. There will be spending money in hotels, parks, stores, and shopping. Our records indicate that they had extended their visits from 3 days to a week to enjoy what the county and city offer.

Marketing (15 Available Points)
How does the proposed event benefit the image or reputation of the City? An aggressive advertisement campaign will begin in February with presenting material and all kinds of social media including, radio, internet, ads from Puerto Rico and other areas that will showcase and promote the City of Kissimmee.
Identify all forms of advertisement to be used and provide a timeline for all promotion and advertising: We will have newspaper ads, social media, TV, flyers, billboards, networking events starting from February and ongoing until the event.

How much money will the sponsoring organization commit towards advertising? $16,000

Collaboration (10 Available Points)
Is the sponsoring organization collaborating with any other non-profit group? If so, please state the commitment of all other groups: The Puerto Rican Parade of Florida has developed strong partnerships with different organizations such as Asociacion de Puertorriqueño Viviendo en la Florida. The Initiative, Preservacion de Cultura, Hispanic Federation, PRAFA, City of Kissimmee, Osceola County and many other organizations have supported us since the beginning.
Has the sponsoring organization solicited local vendors to support the event? If so, please identify all vendors that have committed to the event: We are currently working on getting our supporters. We have commitments with Melao Bakery that have been our sponsor since 2011, La Prensa and other local businesses that are interested in been part of our event.

FLORIDA

Consumer's Certificate of Exemption

DR-14
R. 10/15

Issued Pursuant to Chapter 212, Florida Statutes

85-8015963709C-5	07/18/2017	07/31/2022	501(C)(3) ORGANIZATION
Certificate Number	Effective Date	Expiration Date	Exemption Category

This certifies that

CENTRO CULTURAL PUERTORRIQUENO INC
1633 E VINE ST STE 207
KISSIMMEE FL 34744-3736

is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.

FLORIDA

Important Information for Exempt Organizations

DR-14
R. 10/15

1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. See Rule 12A-1.038, Florida Administrative Code (F.A.C.).

2. Your *Consumer's Certificate of Exemption* is to be used solely by your organization for your organization's customary nonprofit activities.

3. Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.

4. This exemption applies only to purchases your organization makes. The sale or lease to others of tangible personal property, sleeping accommodations, or other real property is taxable. Your organization must register, and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, F.A.C.).

5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third-degree felony. Any violation will require the revocation of this certificate.

6. If you have questions regarding your exemption certificate, please contact the Exemption Unit of Account Management at 800-352-3671. From the available options, select "Registration of Taxes," then "Registration Information," and finally "Exemption Certificates and Nonprofit Entities." The mailing address is PO Box 6480, Tallahassee, FL 32314-6480.

Centro Cultural Puertorriqueno Inc.
/ Desfile Puertorriqueno
Projected Budget 2019

Revenue

Sponsorship	$5,000.00
In-Kind Revenue	$26,000.00
Booth Space Rental	$20,000.00
Kissimmee Grant	$4,500.00
Total	**$55,500.00**

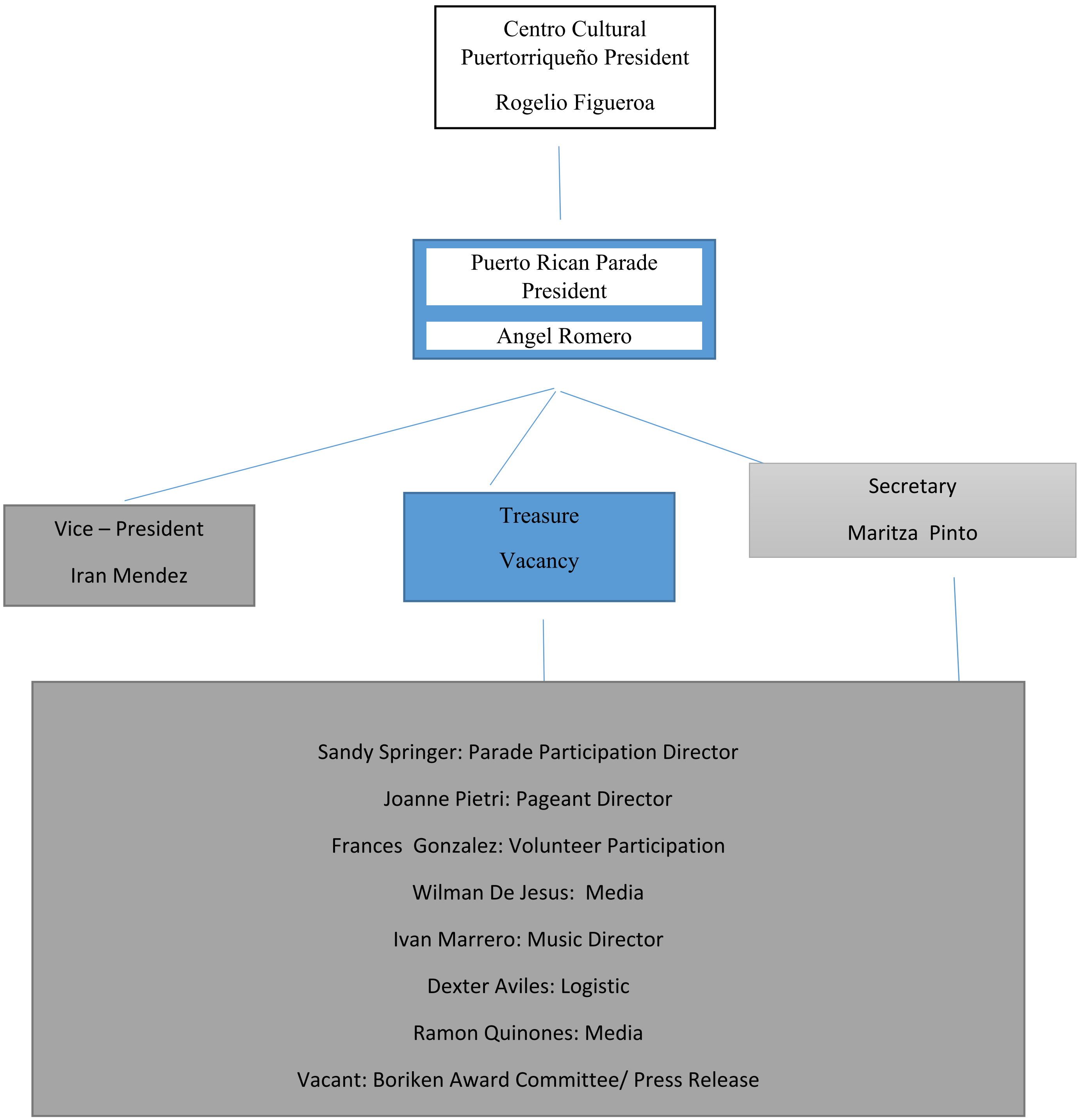
Expenses

Advertising (In-Kind)	$16,000.00
Awards	$1,000.00
Equipment Rental	$5,500.00
Insurance	$1,000.00
Printing	$1,500.00
Performing Artist	$15,000.00
Professional Fees (In Kind)	$1,000.00
Audio/Visual	$8,000.00
Food for Staff (In Kind)	$4,000.00
Total	**$53,000.00**
Net Revenue	**$2,500.00**

Organizational Chart of the Organizing Committee

The member of the committee are volunteers that are actively involved in recruiting and have been part of our event.

We have several vacancies that we expected to fill in the next couple of months.



Company Name	Contact Person	Telephone	Email
Sabor Boricua	Eddie Colon	954-243-9705	saborboricua@comcast.net
Borinquen	Zulina Velez	407-924-8646	zulinavelez1950@yahoo.com
Pa' que tu lo Sepas	Milton Gerena	407-954-3778	miltongerena27@gmail.com
Victor Gonzalez	Victor Gonzalez	321-895-0325	victor.gonzalez9@hotmail.com
Toque Caribeño	Mirta Farinacci	646-730-4122	cgreen987@gmail.com
Emilio Ciodaro	Emilio Ciodaro	407-449-3552	mattyandfico@yahoo.com
Addition Financial	Joel Martinez	407-896-9411 ext. 2561	jmartinez@additionfi.com
Staywell, A Wellcare Company	Melissa Ruiz	407 -861-4880	melissa.ruiz@wellcare.com
Osceola Mental Health/Park Place	Kirsten Furde	407-846-0023	kirstenf@ppbh.org
Mike Fisher for Sheriff	Mike Fisher	407- 709-3597	mike@fisher4sheriff.com
Hispanic Federation	yanidsi Velez	321-946-5357	yvelez@hispanicfederation.org
	Melissa Quiles	321-337-0500	melissa.quiles@grifols.com
Ovosk Med Spa	Leslie Fletcher	407-344-4878	info@ovoskmedspa.com or info@painfreeorlando.com
Armando Ramirez	Jessica Echevarria	407-744-4631	jessica.echevarria@osceolaclerk.org
CareerSource Central Florida	Yarelis Colon	407-222-6804	ycolon@careersourcecf.com
Ingrid Tejada	Ingrid Tejeda		atiles43@aol.com
Funeraria Porta Coeli	Vanessa Roman	407-892-2155	vanessa.roman@osceolamemgds.com
Access Community	Ana Villa	407-931-4825	outreach.coor@accinsure.com
SunchineFamily Medical & Wellness	Aida Hechevarria	407-360-9160 or 786942-1727	sunshineinjurywellness@gmail.com
care Plus Health Plus	Juan Ortiz	407-453-1598	jortiz22@humana.com
De todo un poco TV	Mario Guerrero		mby4communications@gmail.com

Florida Technical College	Martin Levert, Yesenia Beltran	407-483-5700	ybeltran@ftccollege.edu
La Kalle 93.7 FM	Ivan Tapia	786-414-0371	eltapiaproduction@gmail.com
Corner Stone	dianette rodriguez		drodriguez@cshospice.org
Wellcare	Maria Diaz		maria.diaz@wellcare.com
Patient Medical Group	kristie Acevedo	407-288-8242	Kacevedo@mcfhealth.com
HR Block	Hector Abraham	407-947-6282	hector.abraham@hrblock.com
T- Mobile	Wanda Hernandez	407-375-7985	wanda.hernandez20@t-mobile.com
CR Insurance	suaynet serbia	786-533-0150	jserbia@crinsurancegroupllc.com
Florida Blue/ Medical Plan - Healthy Care	Johnathan Caballero	786-774-1277	jonathan.caballero@bcbsfl.com
Edgardo Villegas	Florida Claims Advisor		marketing@laser-restoration.com
	Michael Gibson		yesenia@gibsonjustice.com
Garita Creations	Angel Torres Cancel	787-238-9733	creacioneslagarita1965@gmail.com
Asociacion Artessanos y Artistas Plasticos Fl	David Rohena	787-666-0400	drohena2002@yahoo.com
Artista Plastico	Luz Selenia Santiago	407-393-8654	
Dania y Carmen		787-410-4009	PR100x35@yahoo.com
Jose Becerril		787-646-4771	arterril@gmail.com
Andres Rivera		407-408-8894	doriver60@gmail.com
Ivelisse Cruz		203-491-7740	ivelisse@deftheads.com

INVOICE

Orlando Custom Printing LLC
2172 Brandywine Falls Way
Orlando, Florida 32824
United States

4079288847
www.orlandocustomprinting.com

BILL TO
Desfile PR FL
Rogelio Figueroa

407-334-6450
gelo637@aol.com

Invoice Number:	1212
Invoice Date:	September 4, 2019
Payment Due:	September 4, 2019
Amount Due (USD):	**$0.00**

Items	Quantity	Price	Amount
8oz Mesh 2' x 15' - 8oz Mesh Stage Banner - En memoria de Ingrid Figueroa	2	$150.00	$300.00
3' X 6' Banner Full Color 13oz Scrim Banner - En memoria de Ingrid Figueroa - Carroza	1	$54.00	$54.00
11x17 Posters on 100LB Gloss Book 11x17 Posters on 100LB Gloss Book 4:0 (1 Side) Desfile Puertorriqueño 2019 Promo	10	$4.00	$40.00
Graphic Design Desfile 2019 Promo / Graphic & Web Design. Total Hours: 51 Hrs - OCP Donation (Value: 51 hrs x $40 = $2,040)	51	$0.00	$0.00

Subtotal:	$394.00
Tax Exempt 0%:	$0.00
Total:	$394.00
Payment on September 4, 2019 using a check:	$394.00
Amount Due (USD):	**$0.00**

Make all checks payable to Orlando Custom Printing

Centro Cultural Puertorriqueño/ Desfile Puertorriqueño
Profit and Loss
January to September 30, 2019

Revenue

Sponsorship	$14,150
In-Kind Revenue	$6,730
Booth Space Rental	$17,350
Event Sales	$3,402
Kissimmee Grant	$3,000
Total	**$44,632**

Expenses

Advertising (Grant)	$3,000
Audio/Visual	$3,700
City Facility Rental Fees	$10,934
Gala Event	$3,950
Event Food (In-Kind)	$3,230
Event Sales Product Cost	$1,718
Event Subcontractors	$315
Insurance	$525
Parade Rentals	$1,300
Printing	$961
Performing Artist	$7,200
Professional Fees (In Kind)	$3,500
Stage Set-up	$2,250
Travel and Lodging	$3,581
Total	**$46,164**
Net Revenue	**-$1,532**

Page 1


KISSIMMEE LAKEFRONT PARK
Desfile
PUERTORRIQUEÑO
de la Florida
SAVE THE
Date
september 7, 2019

<u>PUERTO RICAN PARADE RECAP</u>
Event Coordinator: David DeMartino
Event Organizer: Roy Figueroa and Sandy Springer
Event Type: Parade
Date: September 7, 2019
Location: Downtown Kissimmee
Move in Time: 8:30 a.m.
Event Time: 11:00 a.m. – 12:00 p.m.
Move Out Time: 12:30 p.m.
Number of Attendees: 51 entries, 100 – 175 spectators
Vendors: None
Repeat Event/Organizer: Yes, 2nd year

Summary:

- 6:10 a.m. Staff departed to set no parking signs on Broadway
- 7:00 a.m. No Parking signs were set up. Staff returned to Civic to set up barricades for disembarking.
- 8:00 a.m. Parade organizer arrived at check-in to assist
- 8:00 a.m. Staff completed staging setup
- 8:30 a.m. Check-in opened at the corner of Ruby & Bryan
- 9:00 a.m. KPD briefing concluded and officers headed out to their positions for closures
- 9:00 a.m. Parade route staff were in place
- 10:30 a.m. Parade attendees began arriving. Small crowd compared to last year's event
- 11:00 a.m. Parade started
- 11:20 a.m. Floats clear of Patrick
- 11:30 a.m. Floats clear of the staging area
- 11:40 a.m. Staff was notified that the 10:45 a.m. train never came through and was delayed, but coming through the Kissimmee station soon
- 11:45 a.m. Amtrak arrived at the Kissimmee station
- 12:00 p.m. Amtrak left the station and the parade resumed. Only 15 floats/vehicles remained on the route

Issues:

- One parade entry was carrying a lit torch during the parade.
- Organizer emailed their updated parade lineup at 8pm Friday night after everyone had left. This didn't allow COK Staff to update lists until the morning of the event
- Organizer failed to include any details on a majority of the entries. This caused a few issues in staging with groups showing up with more vehicles than expected
- Sheriff's office brought horses and COK Staff were not informed about that. The horses didn't enter the parade but walked around the staging area
- One entry brought a full sized RV and took up two spaces.
- Spoke with Organizer at the check-in table and asked if the Mayor had a vehicle to ride in. She informed me that he didn't. I asked if she had invited him and informed him that he would be walking in that case. She confirmed she had invited him but didn't inform him of anything else. She called in a favor for a friend's Corvette so the Mayor could ride in a vehicle. Ultimately, Sandy said the Mayor would be walking and Vice Mayor Fisher would be in the Corvette.

- Not all Commissioners were invited to the parade. Vice Mayor Fisher, Commissioner Gonzalez, and Commissioner Eady showed up and voiced their concerns. Shared with them it was the organizer's responsibility to invite them and inform them of transportation options.
- Organizer didn't relay the fire extinguisher info to all participants, so we had a few issues with people not bringing them and then complaining to KFD about it
- Organizer didn't consider the attached picture a float even though it had a trailer with a roof and electricity. They were told anything more than a single vehicle would require an extinguisher
- Organizer had 5 volunteers at check in who all talked over each other and didn't know where entries were going. Multiple times they were giving out two different float numbers and it slowed the check-in process. COK Staff had a difficult time trying to hand out numbers and check the entries when no one was completely in charge
- Entries were being added to the lineup as people showed up. Entries were saying they were told they were accepted into the parade but they weren't on the lineup
- Kissimmee Main Street showed up to deliver the audio system to Matador. COK Staff were informed there would be some sort of announcement setup but never had anything confirmed from the organizer.
- POST EVENT RECAP MEETING, OCTOBER 2, 2019 –
    - the Organizer shared that they had received a threat against their event. From the conversation, the exact nature of the threat was unclear. COK Staff was never informed of this threat. KPD was never informed of this threat. Organizer claimed that they shared the threat with the Sheriff's office.
    - Organizer said hosting the parade on Saturday rather than Sunday hurt their numbers
    - Meeting ended abruptly with the President announcing that the event wouldn't return next year and storming out

Suggestions:
- Continue marking the parade number sign locations the day before. That was a huge help for setup and expedited the setup process
- Block both ends of the KCC parking bays the morning of the event.
- Barricade a turn lane for library parking bays to redirect traffic once parking fills and exit them to Toho Ave and use parking garage.
- Relocate the 2nd school bus from Dakin Ave at the library to Emmett/Main Street. Use barricades at Library driveway instead.
- Provide a tent for parade check-in and an assistant for the COK Staff check-in lead.

Follow ups:
- Address lineup issues with entry numbers, entry details, adding extra entries during check-in, and not sending the lineup the night before the event
- Discuss issues with cars exiting from the City Center garage

Deposit Refund Information:
Deposit Amount Paid: $750.00
Refund Granted: Yes, for the parade
Household #: 6944
Reservation #: 8772

<u>Puerto Rican Festival Recap</u>
Event Coordinator: Christina Schipani
Event Organizer: Roy Figueroa, Centro Cultural Puertorriqueno
Event Type: Festival
Date: September 7, 2019
Location: Lighthouse Lawn
Move in Time: 7:00 a.m.
Festival Time: 12:00 p.m. - 8:00 p.m.
Move Out Time: 8:00 p.m.
Festival Attendees: Approximately 1500
Festival Vendors: 45 of 50
Repeat Event: Yes, 2nd year

Summary:

- 6:00 a.m. COK Event Staff arrived on-site
- 7:00 a.m. Vendor Inspection Began
- 10:30 a.m. Food Truck Vendors move into place
- 10:50 a.m. Vendor Inspection Ended
- 11:00 a.m. Event Coordinator and Fire Inspection did a final walk through to inspect vendor spaces
- 12:00 p.m. Festival Start
- 12:32 p.m. Event stage live (amplified sound), Welcome followed by entertainment such as, Hermanos Cepeda, Viti Ruiz, Zumba presentation and Manolo Lezcano. Organizer provided free meal to vendors and special guest sponsored by Melao Bakery at Panther Pavilion
- Medalla Beer Sales at Otter Pavilion
- 3:00 p.m. some vendors started to pack up and leave
- 6:45 p.m. all Food Trucks exited
- 7:00 p.m. Final call for alcohol sales
- 7:00 p.m. All stage productions concluded. Last act was a no show?
- 10:00 p.m. All vendors off the lawn
- 10:15 p.m. Strike complete

Other Event Information:

- 13 tent weights were rented, total revenue $430 to COK
- 2 fire extinguisher packages were sold and 4 packages rented by local fire extinguisher vendor. Very helpful to have an onsite vendor to assist those without extinguishers or expired tags.
- Parking garages were not utilized
- New load in process implemented at Lighthouse Lawn was a success. KPD's assistance with traffic control at vendor load-in was very helpful. Ordering the sequence of vendor load-in, prioritizing food vendors to arrive first since they need more time, worked well

Issues:

- Save the Date flyer was not shared with COK team and not approved. No marketing flyer received. No social media or event flyers promoting the event were seen by staff.
- Two days prior to the event, at the Vendor/Captains meeting, the layout had 48 vendor spots. One day before the event, organizer missed final meeting and later showed up at the festival

site after the event coordinator had left for the day. Supervisor approved two additional booth locations. The morning of the festival, the organizer continued to ask for more booth spaces however their requests could not be accommodated due to crowd management limits.

- Booth assignments were not given to COK staff until the morning of the event.
- Organizer did not direct their vendors about the proper orientation of their tents. The first row had a mix of tents facing north and south.
- Organizer was not enforcing the time limits in the unloading area
- Food vendors were not placed in the original agreed upon locations, at the end of rows. Original placement allowed extra space for cooking and buffer from heat/tanks. Final placement had food vendors directly across from food trucks which presented challenges with lines and placed cooking devices in the pedestrian lane.
- The organizer did not abide by the production schedule that they submitted to COK resulting in them exceeding the 5 hour maximum of amplified sound
- Melao Bakery had a 10X20 tent without a permit. Another vendor attempted to raise a 10x20 and COK staff explained that a permit was required. She acquiesced and raised two 10x10 but didn't weight either properly.
- The organizer didn't communicate to the production company about the location required for their generator or their audio tent.
- ATM vendor arrived at the festival site to install a machine but it hadn't been communicated to COK staff previously.
- Two days prior to the festival, the organizer mentioned that were supposed to be a dozen volunteer deputies from Osceola County arriving to assist with the event. COK staff asked if the organizer had communicated/coordinated this with KPD and the answer was no. Uncertain how this was resolved but several Osceola County deputies arrived at the vendor check-in site on horseback expecting to assist with parking.
- Organizer limited water sales to a single source. Allowed vendors to bring water for their personal use but threatened to kick out any vendor selling water. Festival weather was 93 and sunny.

Suggestions:

- Food vendors should arrive an hour before other vendors to begin their unloading process
- Vendor spot assignments should be submitted more than 24 hours before the event.
- Add to the organizer's event application/vendor information packet that frying/cooking cannot be done under a tent and must be uncovered and coned or taped off from the public
- 5 hour maximum sound policy should be edited, clarifying that the 5 hours is continuous from when the stage goes live. Eliminate the interpretation that the 5 hours is cumulative.
- Penalize organizers for non compliance of safety issues e.g. non permitted tents, generator safety, access to hydration

Deposit Refund Information
Deposit Amount Paid: $368.00
Refund Granted: Yes
Household #: 6944
Reservation #: 8772

CITY OF KISSIMMEE 1883

Organization: Centro Cultural Puertorriqueno **Event:** Festival and Business Expo **Event Date:** September 12, 2020

Administrative Fee:	$100.00			$100.00
Facility Fee				
Lighthouse Lawn	$700 daily		$700.00 per day	$700.00
Otter & Panther Pavillion	included			$0.00
Rental Items:				
Parade:				
Traffic Barricades	Market Rate			$200.00
Portalets (Civic Center)	Market Rate		2 Portalets	$210.00
Festival:				
Picnic Tables	$15.00 per		TBD	
Bleachers	$50.00 per		TBD	
Light Tower	$100.00 per		2 Light Tower x $100.00 per	$200.00
Portalets	Market Rate		6 Portas, 2 ADA, 2 Handwash	$1,000.00
EZ System	$80.00 per		2 Trash & 2 Recycling X $80.00 per	$320.00
Crowd Control Barricades	$10.00 per		40 @ Parking, 20 @ stage x $10.00 per	$600.00
Tent Permits	$56.00 per		TBD	
Cord Covers	$25.00 per		TBD	
Taxes:			7.5%	EXEMPT
Staff				
Parade:				
Staging Coordinator (6:00AM - 12:00PM)	$25.00/hr		1 coordinator x 6 hours x $25.00 per hour	$150.00
Route Coordinator (8:00AM - 12:00PM)	$25.00/hr		1 coordinator x 4 hours x $25.00 per hour	$100.00
Logistic Technicians (6:00AM - 12:00PM)	$15.00/hr		2 coordinators x 8 hours x $15.00 per hour	$240.00
Staging & Disembarkment Staff	$15.00/hr		10 event staff x 4 hours x $15.00 per hour	$600.00
Route Staff	$15.00/hr		8 event staff x 4 hours x $15.00 per hour	$480.00
KPD	$47.00/hr		8 KPD officers x 4 hours x $47.00 per hour	$1,504.00
KPD Supervisor	$51.00/hr		1 KPD Supervisor x 4 hours x $51.00 per hour	$204.00
Street Sweeper	$15.00.hr		1 Sweeper x 1 hour x $15.00 per hour	$15.00
Festival:				
Event Coordinator (7:00AM - 10PM)	$25.00 per hour		1 Coordinator x 14.5hr x $25.00 per hour	$ 362.50
Event Staff (7:00AM - 3:30PM)	$15.00 per hour		4 Event Staff x 8 hours x $15.00 per hour	$ 480.00
Event Staff (3:00PM - 10PM)	$15.00 per hour		4 Staff x 6.5 hours x $15.00 per hour	$ 390.00
KPD (7AM-8PM)	$47.00 per hour		2 KPD Officers x 13 hours x $47.00 per hour	$ 1,222.00
KPD (10:30AM - 9PM)	$47.00 per hour		4 KPD Officers x 10.5hr x $47.00 per hour	$ 1,974.00
KPD Supervisor (10:30AM - 9PM)	$51.00 per hour		1 KPD Supervisor x 10.5hr x $51.00 per hour	$ 535.50
KFD Inspector	$25.00 per hour		2 Inspectors x 4hr x $25.00 per hour	$ 200.00
EMT	$30.00 per hour		2 EMT Staff x 9hr x $30.00 per hour	$ 540.00
Total Estimate				**$ 12,327.00**
Reservation Deposit (Amount Paid on Balance to Hold Date - Non Refundable)				**$ (250.00)**
Total Due Before Damage Deposit				**$ 12,077.00**
Damage Deposit (Refundable)				**$798.60**
Fee Waiver				
Total Due 30 Days prior to Event				**$ 12,875.60**

2019/2020 Fee Grant Request

Period III, Events occurring June 1, 2020- September 30, 2020

	Requested Date	18-19 Amount	Requested Amount	Est. City Expenses	AWARDED	Scored	Richard	Christine	Mark	Chris	Roy	Al	Ed	Guillerm	Total
Veterans' Health Expo	6/6/2020	N/A	$3,000	$3,543		0									0
Freedom Fund Banquet	6/27/2020	$2,943	$3,000	$3,216		0									0
Team Kareem	6/27/2020	$1,420	$3,000	$2,729		0									0
Keep Kids off the Street	8/29/2020	$2,517	$3,000	$2,030		0									0
Puerto Rican Festival	9/12/2020	$3,000	$3,000	$12,327		0									0
			$15,000	**$23,845**	**$0**										

Total amount awarded for October 2019-January 2020	$20,506
Total amount awarded for February 2020 -May 2020	$11,717
Total amount awarded for June 2020-September 2020	$0

ITEM 5.B
COMMUNITY BENEFIT FUND APPLICATION

Item Details
Boys and Girls Club of Central Florida (Osceola County)

Attachment(s):
1. BGCCF_FY_2017-18_Audit
2. BGCCF_501c3_IRS_Determination_Letter_12-20-2017
3. BGCCF_Agency_Budget_2019-20
4. BGCCF_990_17-18
5. CommunityBenefitFundsApplication

Boys & Girls Clubs of Central Florida, Inc.

Financial Statements

Years Ended June 30, 2018 and 2017

Boys & Girls Clubs of Central Florida, Inc.

Financial Statements

Years Ended June 30, 2018 and 2017

Contents

Tel: 407-841-6930
Fax: 407-841-6347
www.bdo.com

201 South Orange Ave., Suite 800
Orlando, FL 32801

Independent Auditor's Report

Board of Directors
Boys & Girls Clubs of Central Florida, Inc.
Orlando, Florida

Report on the Financial Statements

We have audited the accompanying financial statements of Boys & Girls Clubs of Central Florida, Inc. (the "Organization"), which comprise the statements of financial position as of June 30, 2018 and 2017, and the related statements of activities, cash flows and functional expenses for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free from material misstatement.

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

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

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Organization as of June 30, 2018 and 2017, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

BDO USA, LLP

BDO USA, LLP
Certified Public Accountants
December 13, 2018

Financial Statements

Boys & Girls Clubs of Central Florida, Inc.

Statements of Financial Position

June 30,	**2018**	2017
Assets		
Current:		
Cash and cash equivalents	**$ 3,328,806**	$ 2,631,980
Grants receivable	**1,352,654**	934,385
Contributions receivable, current portion, net (Note 4)	**3,220,618**	2,241,367
Prepaid expenses	**234,899**	273,437
Land held for sale	**220,100**	190,000
Total current assets	**8,357,077**	6,271,169
Property and equipment, net (Note 5)	**17,771,343**	14,547,014
Other assets:		
Assets limited as to use (Note 3)	**16,882,361**	3,565,406
Investments (Note 3)	**6,148,129**	5,911,179
Contributions receivable, long term, net (Note 4)	**4,252,242**	1,979,054
Other	**70,999**	52,110
Total other assets	**27,353,731**	11,507,749
	$ 53,482,151	$ 32,325,932
Liabilities and Net Assets		
Current liabilities:		
Accounts payable	**$ 397,550**	$ 206,117
Accrued expenses	**322,636**	303,515
Deferred revenues	**178,727**	280,478
Total current liabilities	**898,913**	790,110
Commitments and contingencies (Notes 6, 8 and 13)		
Net assets (Note 7):		
Unrestricted	**37,688,374**	19,883,526
Temporarily restricted	**13,704,127**	10,442,610
Permanently restricted	**1,190,737**	1,209,686
Total net assets	**52,583,238**	31,535,822
	$ 53,482,151	$ 32,325,932

See accompanying notes to financial statements.

Boys & Girls Clubs of Central Florida, Inc.

Statements of Activities

	2018				2017			
Year Ended June 30,	**Unrestricted**	**Temporarily Restricted**	**Permanently Restricted**	**Total**	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
Operating revenues and support:								
Government revenues	**$ 5,196,558**	**$ —**	**$ —**	**$ 5,196,558**	$ 5,196,358	$ —	$ —	$ 5,196,358
Contributions	**3,318,952**	**1,345,796**		**4,664,748**	2,043,741	1,537,728	384,795	3,966,264
In-kind contributions (Note 2)	**2,619,765**	**—**	**—**	**2,619,765**	2,579,594	—	—	2,579,594
United Way	**558,309**	**201,615**	**—**	**759,924**	488,837	90,553	—	579,390
Special events	**895,456**	**—**	**—**	**895,456**	1,162,913	—	—	1,162,913
Dues and program services	**890,640**	**—**	**—**	**890,640**	661,998	—	—	661,998
Other revenues	**673,229**	**—**	**—**	**673,229**	512,480	—	—	512,480
Impairment loss on land held for sale (Note 2)	**—**	**—**	**—**	**—**	(60,000)	—	—	(60,000)
Net assets released from restrictions (Note 7)	**5,503,885**	**(5,503,885)**	**—**	**—**	1,326,266	(1,326,266)	—	—
Total operating revenues and support	**19,656,794**	**(3,956,474)**	**—**	**15,700,320**	13,912,187	302,015	384,795	14,598,997
Operating expenses:								
Program services	**12,747,899**	**—**	**—**	**12,747,899**	11,529,364	—	—	11,529,364
Supporting services:								
Management and general	**2,515,225**	**—**	**—**	**2,515,225**	1,801,938	—	—	1,801,938
Fundraising	**1,901,840**	**—**	**—**	**1,901,840**	1,533,100	—	—	1,533,100
Total operating expenses	**17,164,964**	**—**	**—**	**17,164,964**	14,864,402	—	—	14,864,402
Operating revenues and support in excess of operating expenses	**2,491,830**	**(3,956,474)**	**—**	**(1,464,644)**	(952,215)	302,015	384,795	(265,405)
Non-operating revenues and support:								
Bequest – board designated endowment (Note 7)	**14,116,771**	**—**	**—**	**14,116,771**	—	2,190,455	—	2,190,455
Contributions restricted for capital projects	**—**	**6,820,717**	**—**	**6,820,717**	—	—	—	—
Investment return (Note 3)	**413,145**	**82,913**	**—**	**496,058**	550,927	108,982	—	659,909
Net assets contributed (Note 12)	**783,102**	**295,412**	**—**	**1,078,514**	—	—	—	—
Total non-operating revenues and support	**15,313,018**	**7,199,042**	**—**	**22,512,060**	550,927	2,299,437	—	2,850,364
Transfer of permanently restricted net assets	**—**	**18,949**	**(18,949)**	**—**	—	—	—	—
Change in net assets	**17,804,848**	**3,261,517**	**(18,949)**	**21,047,416**	(401,288)	2,601,452	384,795	2,584,959
Net assets, beginning of year	**19,883,526**	**10,442,610**	**1,209,686**	**31,535,822**	20,284,814	7,841,158	824,891	28,950,863
Net assets, end of year	**$ 37,688,374**	**$ 13,704,127**	**$ 1,190,737**	**$ 52,583,238**	$ 19,883,526	$ 10,442,610	$ 1,209,686	$ 31,535,822

See accompanying notes to financial statements.

Boys & Girls Clubs of Central Florida, Inc.

Statements of Cash Flows

Year Ended June 30,	**2018**	2017
Cash flows from operating activities:		
Change in net assets	**$ 21,047,416**	$ 2,584,959
Adjustments to reconcile change in net assets to net cash provided by (used for) operating activities:		
Contributions restricted for capital projects	**(6,820,717)**	(2,190,455)
Depreciation	**671,763**	584,250
Amortization of pledge discount	**80,924**	50,375
Provision for uncollectible contributions	**260,462**	79,892
Donated property and equipment	**(260,868)**	(1,600)
Donated stock	**(158,686)**	(138,366)
Impairment loss on land held for sale	**—**	60,000
Net realized and unrealized gain on investments	**(281,750)**	(486,465)
Cash provided by (used for):		
Grants receivable	**(418,269)**	(240,528)
Contributions receivable	**(3,593,825)**	(1,969,847)
Prepaid expenses	**38,538**	(40,361)
Other assets	**(18,889)**	—
Accounts payable and accrued expenses	**210,554**	(333,536)
Deferred revenue	**(101,751)**	12,873
Net cash provided by (used for) operating activities	**10,654,902**	(2,028,809)
Cash flows from investing activities:		
Purchase of property and equipment	**(3,665,324)**	(87,773)
Transfer of investments to cash	**60,000**	3,000,013
Purchase of investments	**(1,795,033)**	(1,885,365)
Proceeds from sale of investments	**1,938,519**	1,137,007
Net cash provided by (used for) investing activities	**(3,461,838)**	2,163,882
Cash flows from financing activities:		
Contributions restricted for capital projects	**6,820,717**	2,190,455
Net increase in cash and cash equivalents	**14,013,781**	2,325,528
Cash and cash equivalents, beginning of year	**6,197,386**	3,871,858
Cash and cash equivalents, end of year	**$ 20,211,167**	$ 6,197,386

Cash and cash equivalents is included in the following captions on the statement of financial position:

Year Ended June 30,	**2018**	2017
Cash and cash equivalents	**$ 3,328,806**	$ 2,631,980
Assets limited as to use	**16,882,361**	3,565,406
	$ 20,211,167	$ 6,197,386

See accompanying notes to financial statements.

Boys & Girls Clubs of Central Florida, Inc.

Statements of Functional Expenses

	2018				2017			
		Supporting Services				Supporting Services		
Year Ended June 30,	**Program Services**	**Management and General**	**Fundraising**	**Total**	Program Services	Management and General	Fundraising	Total
Personnel:								
Salaries	**$ 4,823,580**	**$ 1,182,521**	**$ 843,534**	**$ 6,849,635**	$ 4,262,550	$ 956,004	$ 539,916	$ 5,758,470
Employee benefits	**445,589**	**153,423**	**156,789**	**755,801**	461,163	158,629	94,382	714,174
Payroll taxes	**402,223**	**113,416**	**66,311**	**581,950**	321,908	68,058	36,507	426,473
	5,671,392	**1,449,360**	**1,066,634**	**8,187,386**	5,045,621	1,182,691	670,805	6,899,117
Other:								
Occupancy	**426,907**	**64,463**	**4,180**	**495,550**	395,335	33,032	7,254	435,621
Building repairs and maintenance	**357,558**	**43,297**	**—**	**400,855**	312,901	4,867	10,238	328,006
Equipment expenses	**244,499**	**56,148**	**20,114**	**320,761**	226,931	25,868	18,941	271,740
Transportation	**393,326**	**41,484**	**9,490**	**444,300**	345,526	35,991	17,337	398,854
Program materials	**2,170,308**	**29,473**	**197,665**	**2,397,446**	1,845,404	26,693	164,526	2,036,623
In-kind expenses	**2,093,641**	**184,898**	**353,655**	**2,632,194**	2,096,623	76,097	405,275	2,577,995
Professional fees	**334**	**63,262**	**—**	**63,596**	14,479	43,436	—	57,915
Pre-employment fees	**37,104**	**20,025**	**2,426**	**59,555**	37,759	8,119	61	45,939
Contract services	**256,135**	**123,775**	**17,027**	**396,937**	318,025	138,966	24,213	481,204
Insurance	**239,127**	**21,880**	**—**	**261,007**	220,513	14,724	—	235,237
Postage, supplies and printing	**48,770**	**35,882**	**8,653**	**93,305**	39,514	23,723	16,569	79,806
Training	**40,974**	**10,770**	**7,062**	**58,806**	13,809	11,691	1,422	26,922
Dues and subscriptions	**89,373**	**28,185**	**—**	**117,558**	34,175	18,132	5,430	57,737
Service charges	**18,760**	**28,060**	**23,255**	**70,075**	14,418	28,067	14,871	57,356
Miscellaneous	**8,461**	**293,730**	**2,814**	**305,005**	8,377	106,277	4,293	118,947
Capital campaign expenses	**—**	**—**	**188,865**	**188,865**	—	—	171,133	171,133
Total other expenses	**6,425,277**	**1,045,332**	**835,206**	**8,305,815**	5,923,789	595,683	861,563	7,381,035
Total expenses before depreciation	**12,096,669**	**2,494,692**	**1,901,840**	**16,493,201**	10,969,410	1,778,374	1,532,368	14,280,152
Depreciation	**651,230**	**20,533**	**—**	**671,763**	559,954	23,564	732	584,250
Total expenses	**$ 12,747,899**	**$ 2,515,225**	**$ 1,901,840**	**$ 17,164,964**	$ 11,529,364	$ 1,801,938	$ 1,533,100	$ 14,864,402

See accompanying notes to financial statements.

1. Nature of Organization

Boys & Girls Clubs of Central Florida, Inc. (the "Organization") is a nonprofit organization that was established to provide behavioral prudence and to promote the health and the social, educational, vocational and character development of boys and girls in the Central Florida area.

2. Summary of Significant Accounting Policies

Basis of Presentation

The accompanying financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America. Net assets and revenues, expenses, gains and losses are classified based on the existence or absence of donor-imposed restrictions. Accordingly, net assets of the Organization and changes therein are classified and reported as follows:

Unrestricted Net Assets - Net assets that are not subject to donor-imposed stipulations.

Temporarily Restricted Net Assets - Net assets subject to donor-imposed stipulations that may or will be met by actions of the Organization and/or the passage of time. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statements of activities as net assets released from restrictions.

Permanently Restricted Net Assets - Net assets subject to donor-imposed stipulations that the net assets be held and invested in perpetuity.

Operating and Non-Operating Revenues and Support

Operating revenues and support were received to support current mission related activities of the Organization, while non-operating revenues and support are from contributions and bequests and related investment returns that are not available for current mission related activities.

Cash and Cash Equivalents

For purposes of the statements of cash flows, the Organization considers all highly liquid investments with an original maturity of three months or less to be cash equivalents.

Assets Limited as to Use

Assets limited as to use include cash and cash equivalents which are held for a board designated endowment established from a bequest received during fiscal 2018 (see Note 7) and capital contributions restricted for capital projects.

Investments

Investments are stated at fair value. Realized and unrealized gains and losses are combined with investment income earned during the period and presented as investment return on the accompanying statements of activities.

Grants Receivable

Grants receivable represent amounts owed to the Organization from federal, state and local governments for services rendered under contractual obligations and grants from Boys & Girls Club of America, corporations and foundations. All outstanding grants receivable are expected to be collected within one year and are considered collectible and an allowance for uncollectible amounts was not recorded.

Contributions Receivable

Contributions receivable consist of unconditional promises to give and are recorded when the promises to contribute are made. Contributions receivable which are expected to be collected in more than one year are stated at the present value of estimated future receipts. The Organization provides an allowance for uncollectible contributions based on historical collection experience.

Property and Equipment

Property and equipment are recorded at cost when purchased or at fair value on the date received if donated. Buildings and equipment are depreciated using the straight-line method over the estimated life of the assets.

Contributed services are recognized as contributions and recorded at fair value if the services create or enhance nonfinancial assets, require specialized skills and are performed by people with those skills and would otherwise be purchased by the Organization. During the years ended June 30, 2018 and 2017, the Organization received approximately $191,000 and $178,000, respectively, of contributed services consisting mainly of transportation, technology, legal fees and construction services which is reflected in the accompanying statements of activities. The Organization has numerous volunteers providing assistance to the Organization’s program services and fundraising campaigns which are not recognized in the accompanying financial statements.

Impairment of Long-Lived Assets and Land Held for Sale

The Organization reviews its long-lived assets for impairment whenever events or changes in circumstances indicate that the carrying amount of an asset may not be recoverable. Recoverability of assets to be held and used is measured by a comparison of the carrying amount of an asset to future undiscounted cash flows expected to be generated by the asset. If such assets are considered to be impaired, the impairment to be recognized is measured by the amount by which the carrying amounts of the assets exceed the fair value of the assets. Assets to be disposed of are reported at the lower of the carrying amount or fair value less costs to sell. During fiscal 2018, there was no impairment of assets. During fiscal 2017, the Organization recorded an impairment on idle land held for sale of $60,000. Fair value for this property was based on a sales offer for the property. As of the date of these financial statements, the Organization has not sold this property.

Revenues

A significant portion of the Organization's government contracts and certain United Way grants are exchange transactions in which each party receives and sacrifices commensurate value. Funds from these exchange transactions are not considered contributions and, as such, are deemed to be earned and reported as revenue when such funds have been expended towards the designated purpose. Funds received in advance under contractual obligations for which services have yet to be performed are recognized as deferred revenue.

Special event revenue is recognized when the event takes place.

Dues and program services are recognized as revenue as services are provided.

Contributions and Donor-Imposed Restrictions

Contributions are considered to be available for unrestricted use unless specifically restricted by the donor. Amounts received that are designated for future periods or are restricted by the donor for specific purposes are reported as temporarily or permanently restricted support that increases those net asset classes.

When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and are reported in the statements of activities as net assets released from restriction. If a temporary restriction is fulfilled in the same time period in which the contribution is received, the Organization reports the support as unrestricted.

In-Kind Contributions

Donated goods and services are recorded at fair value on the date donated and presented as in-kind contributions in the accompanying statements of activities. Donated facilities represents the excess of the fair rental value of building leases over below market rent payments due under lease agreements. The Organization received the following in-kind contributions, which are included in the statements of activities as in-kind contributions and net assets contributed:

Year Ended June 30,	**2018**	2017
Facilities rent	**$ 1,857,824**	$ 1,410,399
Property and equipment	**260,868**	1,600
Professional services	**178,533**	—
Program materials and supplies	**85,296**	78,301
Advertising	**73,630**	178,099
Auction items	**155,802**	193,315
Theme park tickets	**83,098**	385,038
Other	**120,690**	332,842
Total	**$ 2,815,741**	$ 2,579,594

Functional Expenses

The costs of providing the various programs and other activities have been summarized on a functional basis. Accordingly, certain expenses have been allocated among the program and supporting services directly benefited. Other expenses are allocated based on management's estimate of the benefit derived by each activity.

Fair Value of Financial Instruments

The Organization reports its financial assets and liabilities using a three-tier hierarchy, which prioritizes the inputs used in measuring fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements).

The three levels of the fair value hierarchy are described below:

Level 1 – Valuation based on unadjusted quoted prices in active markets for identical assets or liabilities.

Level 2 – Valuation based on observable quoted prices for similar assets and liabilities in active markets.

Level 3 – Valuation based on inputs that are unobservable and are supported by little or no market activity, therefore requiring management's best estimate of what market participants would use as fair value.

A financial instrument's level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement.

Fair value estimates discussed herein are based upon certain market assumptions and pertinent information available to management. The respective carrying value of certain on-balance-sheet financial instruments approximates their fair values due to the short-term nature of these instruments. These financial instruments include cash and cash equivalents, contributions and grants receivable due in one year or less, and accounts payable and accrued compensation. Contributions due beyond one year are recorded at their net present value using a risk-free interest rate available on U.S. Treasury issues at the date the pledge was made with an equivalent term approximately equal to the number of years the contribution will be paid, which approximates fair value.

The Organization's Level 1 financial assets consist of investments identified in Note 2 and are valued on a daily basis in an active market. There were no Level 2 or 3 financial assets or liabilities.

Income Taxes

The Organization is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code and from state income taxes under similar provisions in the Florida Income Tax Code.

The Organization identifies and evaluates uncertain tax positions, if any, and recognizes the impact of uncertain tax positions for which there is a less than more-likely-than-not probability of the position being upheld when reviewed by the relevant taxing authority. Such positions are deemed to be unrecognized tax benefits and a corresponding liability is established on the statement of financial position. The Organization has not recognized a liability for uncertain tax positions. If there were an unrecognized tax benefit, the Organization would recognize interest accrued related to unrecognized tax benefits in interest expense and penalties in operating expenses. The Organization's tax years currently subject to examination by the Internal Revenue Service generally remain open for three years from the date of filing.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Accounting Pronouncements Issued but Not Yet Adopted

Financial Statement Presentation of Not-for-Profit Entities

In August 2016, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) 2016-14, *Not-for-Profit Entities (Topic 958) and Health Care Entities (Topic 954) – Presentation of Financial Statements of Not-for-Profit Entities*. The ASU amends the current reporting model for nonprofit organizations and enhances their required disclosures. The major changes include: (a) requiring the presentation of only two classes of net assets now entitled "net assets without donor restrictions" and "net assets with donor restrictions", (b) modifying the presentation of underwater endowment funds and related disclosures, (c) requiring the use of the placed in service approach to recognize the expirations of restrictions on gifts used to acquire or construct long-lived assets absent explicit donor stipulations otherwise, (d) requiring that all nonprofits present an analysis of expenses by function and nature in either the statements of activities, a separate statement, or in the notes and disclose a summary of the allocation methods used to allocate costs, (e) requiring the disclosure of quantitative and qualitative information regarding liquidity and availability of resources, (f) presenting investment return net of external and direct expenses, and (g) modifying other financial statement reporting requirements and disclosures intended to increase the usefulness of nonprofit financial statements. The ASU is effective for fiscal years beginning after December 15, 2017. Early adoption is permitted. The provisions of the ASU must be applied on a retrospective basis for all years presented although certain optional practical expedients are available for periods prior to adoption. Management is currently evaluating the impact of this ASU on its financial statements.

Revenue Recognition

In May 2014, the FASB issued ASU No. 2014-09, *Revenue from Contracts with Customers* (ASU 2014-09), which supersedes nearly all existing revenue recognition guidance under U.S. GAAP. The core principle of ASU 2014-09 is to recognize revenues when promised goods or services are transferred to customers in an amount that reflects the consideration to which an entity expects to be entitled for those goods or services. ASU 2014-09 defines a five step process to achieve this core principle and, in doing so, more judgment and estimates may be required within the revenue recognition process than are required under existing U.S. GAAP.

The standard is effective for annual periods beginning after December 15, 2018, using either of the following transition methods: (i) a full retrospective approach reflecting the application of the standard in each prior reporting period with the option to elect certain practical expedients, or (ii) a retrospective approach with the cumulative effect of initially adopting ASU 2014-09 recognized at the date of adoption (which includes additional footnote disclosures). The new standard allows for early adoption for annual periods beginning after December 15, 2016. The Organization is currently evaluating the impact of its pending adoption of ASU 2014-09 on its financial statements and has not yet determined the method by which it will adopt the standard.

Contributions Received and Contributions Made

In June 2018 the FASB issued ASU No. 2018-08, Not-for-Profit Entities (Topic 958), *Clarifying the Scope and the Accounting Guidance for Contributions Received and Contributions Made*. The new standard clarifies and improves guidance about whether a transfer of assets is a contribution or an exchange transaction, as well as clarifying how an entity determines whether a resource provider is participating in an exchange transaction by evaluating whether the resource provider is receiving commensurate value In return for the resources transferred.

The new standard is effective for fiscal periods beginning after December 15, 2018, using either of the following transition methods: (i) a modified prospective in the first set of financial statements following the effective date to agreements that are either not completed as of the effective date or entered into after the effective date, or (ii) a full retrospective approach reflecting the application of the standard in each prior reporting period in the financial statements. Early adoption is permitted. The Organization is currently evaluating the impact of its pending adoption of the new standard on its financial statements.

Leases

In February 2016, the FASB issued ASU No. 2016-02, *Leases*. The new standard establishes a right-of-use (ROU) model that requires a lessee to record a ROU asset and a lease liability on the balance sheet for all leases with terms longer than 12 months. Leases will be classified as either finance or operating, with classification affecting the pattern of expense recognition in the income statement.

The new standard is effective for fiscal years beginning after December 15, 2019. A modified retrospective transition approach is required for lessees for capital and operating leases existing at, or entered into after, the beginning of the earliest comparative period presented in the financial statements, with certain practical expedients available. Management is currently evaluating the impact of its pending adoption of the new standard on its financial statements.

Reclassifications

Certain items have been reclassified in the 2017 financial statements to conform to the 2018 presentation.

3. Investments and Assets Limited as to Use

The Organization's investments consist of the following:

June 30,	**2018**	2017
Level 1:		
Small cap equities	**$ 670,402**	$ 634,490
Mid cap equities	**477,805**	487,299
Large cap equities	**1,800,213**	1,664,300
International equities	**506,849**	600,005
Fixed income mutual funds	**2,692,860**	2,525,085
	$ 6,148,129	$ 5,911,179

Investment income consists of the following:

Year Ended June 30,	**2018**	2017
Net realized and unrealized gain on investments	**$ 281,750**	$ 486,465
Dividends and interest	**214,308**	173,444
	$ 496,058	$ 659,909

Assets limited as to use consist of the following cash and cash equivalents:

June 30,	**2018**	2017
Board designated endowment (Note 7)	**$ 14,463,253**	$ —
Capital contributions	**2,419,108**	3,565,406
	$ 16,882,361	$ 3,565,406

4. Contributions Receivable

Contributions receivable are due as follows:

June 30,	**2018**	2017
Less than one year	**$ 3,504,481**	$ 2,334,082
One to five years	**4,050,355**	2,132,582
More than five years	**274,967**	11,496
	7,829,803	4,478,160
Less: allowance for uncollectible contributions	**(203,713)**	(185,433)
Less: present value discount ranging from 0.72% to 3.34%	**(153,230)**	(72,306)
	$ 7,472,860	$ 4,220,421
Contributions receivable current portion, net	**$ 3,220,618**	$ 2,241,367
Contributions receivable, long term, net	**4,252,242**	1,979,054
	$ 7,472,860	$ 4,220,421

5. Property and Equipment

Property and equipment is summarized as follows:

June 30,	Useful Life	**2018**	2017
Land	—	**$ 419,650**	$ 449,750
Buildings and improvements	5-40 years	**21,404,477**	17,338,189
Furniture and equipment	5-10 years	**1,797,575**	1,592,869
Automotive equipment	5 years	**519,037**	357,741
Building in progress	—	**8,010**	514,108
		24,148,749	20,252,657
Less: accumulated depreciation		**(6,377,406)**	(5,705,643)
		$ 17,771,343	$ 14,547,014

6. Profit-Sharing Plan

The Organization established a 401(k) profit sharing plan (the "Plan") effective January 1, 2005. Employees must be 21 years of age and must have completed one year of full-time employment before they become eligible to participate. The Plan provides a graded vesting schedule from two to six years of service. The Organization will contribute the equivalent of 7% of the employee's salary as a profit sharing contribution and provides for a safe harbor match whereby the Organization will contribute, on a matching basis, a dollar for dollar match on the first 3% of employee contribution and a 50% match on the next 2%. The Organization's policy is to fund the Plan's cost. Contributions to the Plan for the years ended June 30, 2018 and 2017, were $340,104 and $311,119, respectively, and are included in employee benefits in the accompanying statements of functional expenses.

7. Net Assets

Unrestricted

Unrestricted net assets consist of the following:

June 30,	**2018**	2017
Board-designated for property and equipment	**$ 17,771,343**	$ 14,547,014
Board-designated endowment	**14,463,253**	—
Board-designated for capital replacement reserve	**2,016,607**	1,749,624
Undesignated net assets	**3,437,171**	3,586,888
	$ 37,688,374	$ 19,883,526

Temporarily Restricted

Temporarily restricted net assets are available for the following purposes:

June 30,	**2018**	2017
Capital expenditures	**$ 10,310,466**	$ 7,433,060
United Way time restricted grants	**254,597**	140,835
Time restricted contributions	**1,452,544**	1,278,841
Program operations	**1,686,520**	1,589,874
	$ 13,704,127	$ 10,442,610

The intent of the Organization's capital fundraising campaign, as determined by the Board, is that upon satisfaction of donors' restrictions for capital expenditures, any remaining contributions not spent will be designated by the Board and become a board-designated capital replacement reserve for operating the related capital projects, at which time the remaining funds will be released to unrestricted net assets.

Net assets were released from donor restrictions as follows:

Year Ended June 30,	**2018**	2017
Capital expenditures	**$ 4,238,723**	$ 171,133
United Way time restricted grants	**87,851**	333,628
Time restricted contributions	**609,806**	429,827
Program operations	**567,505**	391,678
	$ 5,503,885	$ 1,326,266

Permanently Restricted and Board Designated Endowments

The Organization records its donor restricted endowment funds as permanently restricted net assets. These assets consist of investments held in perpetuity with investment income used to support general operations, the Youth of the Year program and the Eatonville Club operations. Permanently restricted net assets include the principal of donor restricted endowments that must be maintained permanently and not used up, expended or otherwise exhausted. The Organization's return objective for the donor restricted endowment funds are low yield based on risk parameters that are also very low to protect the endowment corpus. The amount of funds available for distributions is determined on the basis of a total-return principal and will not be dependent upon income generated through interest or dividends. The funds available for distribution during any one year will be limited to five percent of the market value of the corpus, effective December 31 of the given year. Distributions may also be made upon written request of the President, with Board approval.

In April 2018, the Board of Directors approved the establishment of a board-designated endowment fund in the amount of $14,116,771, which was a bequest received in March 2018. The purpose of this fund is to fund future operating costs of the Organization. Subsequent to June 30, 2018, the Board of Directors approved the formation of Boys & Girls Clubs of Central Florida Foundation, Inc. (the "Foundation") and transferred the board-designated endowment to the Foundation as further discussed in Note 13. The return objectives related to this board-designated endowment fund are consistent with the donor restricted endowment funds. No more than five percent of the market value of the corpus of the board-designated endowment fund can be distributed on an annual basis.

Endowment net asset composition by type of fund as of June 30, 2018 is as follows:

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
Board-designated endowment fund	**$14,463,253**	**$ —**	**$ —**	**$14,463,253**
Donor restricted endowment funds	**14,476**	**492,214**	**1,190,737**	**1,697,427**
	$14,477,729	**$ 492,214**	**$ 1,190,737**	**$16,160,680**

Changes in the Organization's endowment's net assets for the years ended June 30, 2018 and 2017, are as follows:

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
Endowment net assets at June 30, 2016	$ 6,844	$ 286,788	$ 824,891	$ 1,118,523
Contributed support	—	—	384,795	384,795
Interest and dividends	447	28,516	—	28,963
Net realized and unrealized gain on investments	4,585	91,094	—	95,679
Investment fees	(341)	(10,629)	—	(10,970)
Distributions	—	(594)	—	(594)
Endowment net assets at June 30, 2017	11,535	395,175	1,209,686	1,616,396
Contributed support	**14,116,771**	**—**	**—**	**14,116,771**
Interest and dividends	**162,646**	**31,477**	**—**	**194,123**
Net realized and unrealized gain on investments	**223,869**	**60,318**	**—**	**284,187**
Investment fees	**(37,092)**	**(8,880)**	**—**	**(45,972)**
Distributions	**—**	**(4,825)**	**—**	**(4,825)**
Transfers	**—**	**18,949**	**(18,949)**	**—**
Endowment net assets at June 30, 2018	**$14,477,729**	**$ 492,214**	**$ 1,190,737**	**$16,160,680**

The Board of Directors of the Organization has interpreted the Florida Uniform Prudent Management of Institutional Funds Act ("FUPMIFA") as requiring the preservation of the fair value of the original gift as of the gift date of the donor-restricted endowment funds, absent explicit donor stipulations to the contrary. As a result of this interpretation, the Organization classifies as permanently restricted net assets: (a) the original value of the gift donated to the permanent endowment, (b) the original value of subsequent gifts to the permanent endowment, and (c) accumulations to the permanent endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund. The remaining portion of the donor-restricted endowment fund that is not classified in permanently restricted net assets is classified as temporarily restricted net assets until those amounts are appropriated for expenditure by the Organization in a manner consistent with the standard of prudence prescribed by FUPMIFA or as unrestricted net assets. In accordance with FUPMIFA, the Organization considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds:

(1) The duration and preservation of the fund;
(2) The purposes of the Organization and the donor-restricted endowment fund;
(3) General economic conditions;
(4) The possible effect of inflation and deflation;
(5) The expected total return from income and the appreciation of investments;
(6) Other resources of the Organization;
(7) The investment policies of the Organization.

8. Commitments and Contingencies

Operating Leases

The Organization has entered into non-cancelable leases for office and program space under agreements with maturity dates of one year or less. Rental expense for the years ended June 30, 2018 and 2017, was $143,590 and $96,936, respectively, and is included in occupancy on the statements of functional expenses. Since many of the Organization's leases are month-to-month, the minimum contractual future rental payments are nominal.

Levy Hughes Club

On December 15, 2015, as amended on September 20, 2017, the Organization entered into a Lease and Development Agreement (the "Agreement") with the School Board of Orange County (School Board) for the construction and lease of a downtown club in the Parramore area (Levy Hughes Club). The School Board built a school where they have designated certain areas available for the exclusive use of the Organization for its programs. In connection with this Agreement, the Organization agreed to make a capital contribution of $4,000,000 to the School Board for the costs of construction of the facility which was fully funded during the year end June 30, 2018 and recorded as buildings and improvements within property and equipment on the accompanying statement of financial position. The School Board agreed to lease the facility to the Organization for 99 years at $1 per year. The lease commenced July 18, 2017 when the building was completed.

Nassau Club

Effective July, 1, 2017, the Organization entered into a Support Agreement and Lease Agreement with The Boys & Girls Club of Nassau County Foundation, Inc. (Nassau Foundation) which provides for the transfer of certain assets of The Boys & Girls Club of Nassau County, LLC (the sole member of which is Nassau Foundation) related to two clubs it was currently operating (together with future clubs in Nassau County, together, the "Nassau Clubs") and the hiring of certain of its employees and leasing of its facilities. The Organization recorded a contribution of $53,440 representing the fair value of the furniture, equipment and vehicles transferred by the Nassau Foundation.

The Nassau Clubs will be managed and operated by the Organization and Nassau Foundation will fund the operations. In addition, the Nassau Foundation will pay to the Organization an administrative fee of 8% of the annual direct operational expenses of the Nassau Clubs which was $59,460 during the year ended June 30, 2018 and recorded as other revenues on the accompanying statement of activities. The Support Agreement can be terminated by either party upon six months' notice in writing. The Lease Agreement provides for annual payments of $10 through June 30, 2018 with automatic annual extensions unless terminated by either party in writing 30 days prior to the end of the term.

Legal

The Organization is subject to claims and legal proceedings which arise in the ordinary course of business. Management believes that losses resulting from these matters, if any, would not have a material adverse effect on the financial position or results of activities of the Organization.

9. Concentration of Credit Risk

The Organization's financial instruments that are exposed to concentrations of credit risk consist of cash and cash equivalents and investments. Cash and cash equivalents include checking and money market accounts placed with federally insured financial institutions and investments. Cash and cash equivalents may at times exceed federally insured limits. The Organization has not experienced any losses on such accounts. Investments consist primarily of fixed income mutual and exchange traded funds and equities. Although the market value of investments is subject to fluctuations on a day-to-day basis, management believes the current investment strategy is prudent for the long-term welfare of the Organization.

10. Economic Dependency

The Organization earned revenues from Orange County, Florida, which represents 9% and 13% of the Organization's total operating revenue and support for the years ended June 30, 2018 and 2017, respectively. In addition, during 2018 and 2017, the Organization earned revenues from the federal government which represented approximately 11% and 14%, respectively, of the Organization's total operating revenue and support. As such, the Organization is dependent upon the continued support of Orange County, Florida and the federal government to provide funding for the Organization's programs and operations.

11. Related Party Transactions

In the ordinary course of business, the Organization enters into transactions with other organizations that have individuals who serve on the Organization's Board of Directors. These transactions are made at arm's length. The Organization obtains its general liability and property insurance through a company whose owner is also a member of the Board of Directors. Amounts paid to this company were $373,041 and $316,659 for the years ended June 30, 2018 and 2017, respectively. During 2018, the Organization paid a vendor $12,575 for legal fees associated with the building of the Levy Hughes Club who is also a member of the Board of Directors. Details of all related party transactions which meet applicable reporting requirements can be found in Internal Revenue Service Form 990 which the Organization files annually.

12. Net Assets Contributed

On September 22, 2017, the Organization entered into a Management and Asset Transfer Agreement (Management Agreement) with the Boys & Girls Club of Lake and Sumter Counties, Inc. (BGCLSC) for the transfer of all of the assets of BGCLSC related to five clubs in Lake and Sumter Counties. The transfer of the assets of BGCLSC was completed on November 1, 2017 (the "Transfer Date"), and the Organization became the surviving entity. The BGCLSC is in the process of being dissolved.

The following summarizes the net assets transferred to the Organization on the Transfer Date which was recorded as net assets contributed on the accompanying statement of activities for the year ended June 30, 2018:

	Estimated Approximate Fair Value
Cash	$ 765,471
Grants and contributions receivable	204,612
Property and equipment	195,976
Accounts payable and accrued expenses	(87,545)
Contribution of net assets	$ 1,078,514

13. Subsequent Events

The Organization has evaluated events and transactions occurring subsequent to June 30, 2018 as of December 13, 2018, which is the date the financial statements were available to be issued. Subsequent events occurring after December 13, 2018 have not been evaluated by management. No material events have occurred since June 30, 2018 that require recognition or disclosure in the financial statements, except as follows:

- On August 8, 2018, the Organization signed a contract for the construction of the Joe R. Lee Club for approximately $2,883,000. Construction is expected to begin in January 2019 with completion in November 2019.
- On August 15, 2018, the Organization formed the Boys & Girls Clubs of Central Florida Foundation, Inc. (the "Foundation") and subsequently transferred its board-designated endowment of approximately $14,463,000 (see Note 7). The Foundation was established to support the operations of the Organization. The Organization has the ability to appoint the majority of the Board of Directors of the Foundation. Therefore, the Foundation's financial statements will be consolidated with the Organization's financial statements since the Organization has control over and an economic interest in the Foundation.

IRS Department of the Treasury Internal Revenue Service

ATLANTA GA 39901-0001

In reply refer to: 0752439619
Dec. 20, 2017 LTR 4168C 0
59-0951887 000000 00
00012705
BODC: TE

BOYS & GIRLS CLUBS OF CENTRAL
FLORIDA
% GARY W CAIN PRESIDENT/CEO
101 E COLONIAL DR
ORLANDO FL 32801-1201

010841

Employer ID Number: 59-0951887
Form 990 required: Y

Dear Taxpayer:

We issued you a determination letter in April 1962, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c)(03).

Our records also indicate you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC Sections 509(a)(1) and 170(b)(1)(A)(vi).

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading of this letter, we indicated whether you must file an annual information return. If a return is required, you must file Form 990, 990-EZ, 990-N, or 990-PF by the 15th day of the fifth month after the end of your annual accounting period. IRC Section 6033(j) provides that, if you don't file a required annual information return or notice for three consecutive years, your exempt status will be automatically revoked on the filing due date of the third required return or notice.

For tax forms, instructions, and publications, visit www.irs.gov or call 1-800-TAX-FORM (1-800-829-3676).

If you have questions, call 1-877-829-5500 between 8 a.m. and 5 p.m., local time, Monday through Friday (Alaska and Hawaii follow Pacific Time).

0752439619
Dec. 20, 2017 LTR 4168C 0
59-0951887 000000 00
00012706

BOYS & GIRLS CLUBS OF CENTRAL
FLORIDA
% GARY W CAIN PRESIDENT/CEO
101 E COLONIAL DR
ORLANDO FL 32801-1201

Sincerely yours,

Teri M. Johnson
Operations Manager, AM Ops. 3

Boys & Girls Clubs of Central Florida
Agency Budget Worksheet
FY 2019-20

	Budget * FY 2019-20
Public Support and Revenue	
Public Support	
United Way	
Heart of Florida United Way	250,000
United Way of Brevard	158,500
United Way of Lake & Sumter Counties	-
United Way Designations	126,000
	534,500
Corporate, Foundation & Private Grants	
Corporate Grants	
BGCA Grants	325,752
	325,752
Foundation Grants	
BGCCF Foundation	450,000
Other Foundation Grants	1,318,747
	1,768,747
Private Grants	
Other Private Grants	160,484
	160,484
	2,254,983
Government Grants	
Federal, State & Local Grants	
Orange County Grants	3,051,365
Osceola County Grants	285,502
Seminole County Grants	47,900
Florida Alliance Grants	723,881
21st Century Grants	1,977,052
Orlando Health - Federal Grant	-
City of Orlando	50,000
BGCA Government Grants	103,293
Other Government Grants	9,500
	6,248,493

Boys & Girls Clubs of Central Florida
Agency Budget Worksheet
FY 2019-20

	Budget * FY 2019-20
State of Florida Meals Program	1,512,423
	1,512,423
Contributions	
Individuals	647,500
Corporations	625,000
Foundations	295,000
	1,567,500
Fundraising	
Celebrate the Children	950,000
Faces of the Future	1,155,000
Other Special Events	360,000
	2,465,000
Total Public Support	14,582,899
Other Revenue	
Program Service Revenue	
SEP Fees	451,620
Core Program Fees	281,680
Transportation Fees	6,600
Membership Dues	209,310
T-Shirt Sales	-
Other Program Fees	24,900
Scholarships	(218,153)
	755,957
Revenue From Expansion into New Counties	-
Miscellaneous Revenue	
Board of Directors Dues	25,600
Facilities Rental Income	111,154
Investment Income	9,000
Miscellaneous Income	-
Dueling Dragons Revenue	21,398
	167,152
	923,109
Total Public Support and Revenue	15,506,008

Boys & Girls Clubs of Central Florida
Agency Budget Worksheet
FY 2019-20

	Budget * FY 2019-20
Expenses	
Personnel	
Salaries & Wages	
Professional Staff	4,710,322
Support Staff	3,488,168
	8,198,490
Employee Benefits	
Insurance Benefits Plan	563,837
Pension Benefit	400,305
Workers Compensation	114,249
	1,078,391
Payroll Taxes	
FICA Expense	627,185
Unemployment Compensation	10,000
	637,185
	9,914,066
Other	
Professional Fees	
Professional Fees	80,000
	80,000
Pre-employment & Recruiting	
Employment Drug Screens	17,906
Employment/Volunteer Background Screens	26,311
Recruiting Costs	5,200
	49,417
Insurance	
Property Insurance	48,835
Liability Insurance	101,478
Automobile Insurance	43,922
Member Insurance	33,209
	227,444

Boys & Girls Clubs of Central Florida
Agency Budget Worksheet
FY 2019-20

	Budget * FY 2019-20
Postage, Supplies & Printing	
Office Supplies	32,569
Postage & Delivery	19,551
Outside Printing	40,323
	92,443
Program Expense	
Program Materials	260,724
Food & Dietary	57,596
Contract Services	557,158
Field Trips	54,152
Awards & Events	192,945
Other Supplies	64,865
	1,187,440
Meals Program Food Costs	1,147,114
Communications	115,229
Rent & Utilities	
Rent	67,853
Utilities	292,198
	360,051
Building Repairs & Maintenance	
Building & Grounds Maintenance	319,800
Building & Grounds Supplies	29,788
Other Occupancy Expenses	511
	350,099
Equipment Expenses	
Computer Expenses	40,861
Equipment Rental & Maintenance	82,545
Equipment Less Than $1,000	78,520
	201,926
Fundraising Expense	338,000

Boys & Girls Clubs of Central Florida
Agency Budget Worksheet
FY 2019-20

	Budget * FY 2019-20
Transportation Expense	
Mileage Payments	63,180
Vehicle Operating Costs	79,572
Other Transportation Expense	235,808
	378,560
Training Expense	54,478
Dues & Subscriptions	
Subscriptions & Reference Materials	48,304
Professional Organization Dues	4,698
National & Florida Alliance Dues	61,345
	114,347
Board Expense	12,150
Service Charges	52,275
Miscellaneous Expense	
Bad Debt Expense	175,000
Management Fees & Taxes	14,616
Miscellaneous Expense	2,200
	191,816
Total Other Operating Expenses	4,952,788
Depreciation & Administrative	
Depreciation Expense	690,293
Administrative Expense	(51,139)
	639,154
Total Expenses	15,506,008
NET SURPLUS/(DEFICIT)	0

Form **8879-EO**

Department of the Treasury
Internal Revenue Service

IRS *e-file* Signature Authorization for an Exempt Organization

For calendar year 2017, or fiscal year beginning 07/01, 2017, and ending 06/30, 20 18

▶ Do not send to the IRS. Keep for your records.

▶ Go to *www.irs.gov/Form8879EO* for the latest information.

OMB No. 1545-1878

2017

Name of exempt organization	Employer identification number
BOYS & GIRLS CLUBS OF CENTRAL FLORIDA, INC.	59-0951887

Name and title of officer

GARY CAIN, PRESIDENT/CEO

Part I **Type of Return and Return Information** (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a,** or **5a,** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b,** or **5b,** whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a	Form 990 check here ▶ [X]	**b** **Total revenue,** if any (Form 990, Part VIII, column (A), line 12) . . .	**1b**	35517942.
2a	Form 990-EZ check here ▶ [ ]	**b** **Total revenue,** if any (Form 990-EZ, line 9)	**2b**	
3a	Form 1120-POL check here ▶ [ ]	**b** **Total tax** (Form 1120-POL, line 22)	**3b**	
4a	Form 990-PF check here ▶ [ ]	**b** **Tax based on investment income** (Form 990-PF, Part VI, line 5).	**4b**	
5a	Form 8868 check here ▶ [ ]	**b** **Balance Due** (Form 8868, line 3c)	**5b**	

Part II **Declaration and Signature Authorization of Officer**

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

[X] I authorize BDO USA, LLP (ERO firm name) to enter my PIN 1 9 2 9 1 (Enter five numbers, but do not enter all zeros) as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

[ ] As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ Date ▶ 05/03/2019

Part III **Certification and Authentication**

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 5 9 1 5 0 7 1 3 5 3 8

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163,** Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature ▶ Gary W. Cain Date ▶ 4/29/19

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

For Paperwork Reduction Act Notice, see back of form. Form **8879-EO** (2017)

JSA
7E1676 1.000

Form **990** | **Return of Organization Exempt From Income Tax**

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

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

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

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047
2017
Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 07/01, 2017, and ending 06/30, 20 18

B Check if applicable: Address change; Name change; Initial return; Final return/terminated; Amended return; Application pending

C Name of organization: BOYS & GIRLS CLUBS OF CENTRAL FLORIDA, INC.

Doing business as

Number and street (or P.O. box if mail is not delivered to street address): 101 E. COLONIAL DR | Room/suite

City or town, state or province, country, and ZIP or foreign postal code: ORLANDO, FL 32801

D Employer identification number: 59-0951887

E Telephone number: (407) 841-6855

G Gross receipts $ 35,517,942.

F Name and address of principal officer: GARY CAIN
SAME AS ABOVE ORLANDO, FL 32801

H(a) Is this a group return for subordinates? Yes [ ] No [X]

H(b) Are all subordinates included? Yes [ ] No [ ]
If "No," attach a list. (see instructions)

I Tax-exempt status: [X] 501(c)(3) [ ] 501(c) ( ) ◀ (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: ▶ WWW.BGCCF.ORG

H(c) Group exemption number ▶

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ▶

L Year of formation: 1960 M State of legal domicile: FL

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: TO INSPIRE AND ENABLE ALL YOUNG PEOPLE, ESPECIALLY THOSE FROM DISADVANTAGED CIRCUMSTANCES, TO REALIZE THEIR FULL POTENTIAL AS PRODUCTIVE, RESPONSIBLE & CARING CITIZENS.

2 Check this box ▶ [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	56.
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	56.
5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	699.
6	Total number of volunteers (estimate if necessary)	6	3,193.
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	

		Prior Year	Current Year
Revenue			
8	Contributions and grants (Part VIII, line 1h)	13,067,803.	32,685,171.
9	Program service revenue (Part VIII, line 2g)	627,843.	856,801.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	679,082.	541,983.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,436,773.	1,433,987.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	15,811,501.	35,517,942.
Expenses			
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	6,899,118.	8,187,386.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,893,765.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	6,249,851.	7,303,301.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	13,148,969.	15,490,687.
19	Revenue less expenses. Subtract line 18 from line 12	2,662,532.	20,027,255.
Net Assets or Fund Balances		**Beginning of Current Year**	**End of Year**
20	Total assets (Part X, line 16)	32,325,932.	53,482,153.
21	Total liabilities (Part X, line 26)	790,110.	898,915.
22	Net assets or fund balances. Subtract line 21 from line 20	31,535,822.	52,583,238.

Part II Signature Block

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

Sign Here

▶ Signature of officer — Date: 05/03/2019

▶ GARY CAIN PRESIDENT/CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
JENNIFER SPOONER, CPA		04/29/2019		P01066774
Firm's name ▶ BDO USA, LLP			Firm's EIN ▶ 13-5381590	
Firm's address ▶ 201 S. ORANGE AVE., SUITE 800 ORLANDO, FL 32801			Phone no. 407-841-6930	

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

Part III **Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission:

TO INSPIRE AND ENABLE ALL YOUNG PEOPLE, ESPECIALLY THOSE FROM DISADVANTAGED CIRCUMSTANCES, TO REALIZE THEIR FULL POTENTIAL AS PRODUCTIVE, RESPONSIBLE, AND CARING CITIZENS.

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

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

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

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

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

4a (Code:) (Expenses $ 1,508,231. including grants of $) (Revenue $)

THE AFTER SCHOOL ZONE OFFERS INNOVATIVE SUMMER AND AFTER SCHOOL PROGRAMS TO MIDDLE SCHOOL STUDENTS IN 14 ORANGE COUNTY MIDDLE SCHOOLS. THE AFTER SCHOOL ZONE PROVIDES A FUN AND SAFE ENVIRONMENT TO HELP STUDENTS EXCEL ACADEMICALLY AND CHOOSE THE RIGHT PATH TO BECOMING PRODUCTIVE, HEALTHY CITIZENS.

4b (Code:) (Expenses $ 1,410,871. including grants of $) (Revenue $)

CONTINUED USE OF 21ST CENTURY COMMUNITY LEARNING CENTER GRANTS IN OUR WALT DISNEY WORLD CLUBHOUSE, UNIVERSAL ORLANDO FOUNDATION CLUB, JOE R. LEE CLUB AND USE OF 21ST CENTURY LEARNING CENTER GRANT AT OUR SPRING CREEK CLUB.

4c (Code:) (Expenses $ 868,791. including grants of $) (Revenue $)

USDA AFTER SCHOOL AND SUMMER MEALS PROGRAMS PROVIDING MEALS AND SNACKS IN 20 OF OUR CLUBS DAILY.

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

(Expenses $ 7,277,934. including grants of $) (Revenue $)

4e Total program service expenses ▶ 11,065,827.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *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 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 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 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, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	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	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *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* (see instructions)	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X

Part IV **Checklist of Required Schedules** *(continued)*

			Yes	No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		X
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	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, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete 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
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 to defease 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? *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-EZ? *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 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
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? *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 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		
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 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? **Note.** All Form 990 filers are required to complete Schedule O.	38	X	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

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

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	36			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0.			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	X	
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	699			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		X
b	If "Yes," enter the name of the foreign country: ▶					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter:					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state?			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 organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

Part VI Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . . . . . 1a 56. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 56			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9		X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ FL,

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

[X] Own website [X] Another's website [X] Upon request [ ] Other *(explain in Schedule O)*

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶
GARY W. CAIN, PRESIDENT/CEO 101 E. COLONIAL DRIVE ORLANDO, FL 32801 (407)841-6855

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) BRIAN BAKER VICE CHAIR	1.00 0.	X		X				0.	0.	0.
(2) JAY BRENNAN BOARD MEMBER	1.00 0.	X						0.	0.	0.
(3) CRISTINA CALVET - HARROLD BOARD MEMBER	1.00 0.	X						0.	0.	0.
(4) DENNIS DONOHUE BOARD MEMBER	1.00 0.	X						0.	0.	0.
(5) DIANE MAHONY BOARD MEMBER	1.00 0.	X						0.	0.	0.
(6) GARY KALTBAUM BOARD MEMBER	1.00 0.	X						0.	0.	0.
(7) GERALD DUNN BOARD MEMBER	1.00 0.	X						0.	0.	0.
(8) JACQUELINE BRADLEY BOARD MEMBER	1.00 0.	X						0.	0.	0.
(9) JAMES ETSCORN BOARD MEMBER	1.00 0.	X						0.	0.	0.
(10) JEFF SWEENEY BOARD MEMBER	1.00 0.	X						0.	0.	0.
(11) JENNIFER SLONE TOBIN PAST CHAIR	1.00 0.	X						0.	0.	0.
(12) JERRY DEMINGS BOARD MEMBER	1.00 0.	X						0.	0.	0.
(13) KEVIN HABICHT BOARD MEMBER	1.00 0.	X						0.	0.	0.
(14) LES EISERMAN BOARD MEMBER	1.00 0.	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(15) MICHAEL RYAN CHAIR	1.00 0.	X		X				0.	0.	0.
(16) MIKE HATCHER BOARD MEMBER	1.00 0.	X						0.	0.	0.
(17) RICHARD CIESLAK BOARD MEMBER	1.00 0.	X						0.	0.	0.
(18) RUSSELL SALERNO BOARD MEMBER	1.00 0.	X						0.	0.	0.
(19) SEAN CONNOLLY BOARD MEMBER	1.00 0.	X						0.	0.	0.
(20) STEVE APPEL BOARD MEMBER	1.00 0.	X						0.	0.	0.
(21) STEVEN RUOFF BOARD MEMBER	1.00 0.	X						0.	0.	0.
(22) TOM KOHLER BOARD MEMBER	1.00 0.	X						0.	0.	0.
(23) WARREN CHRISTIE VICE CHAIR	1.00 0.	X		X				0.	0.	0.
(24) CARLA WARLOW BOARD MEMBER	1.00 0.	X						0.	0.	0.
(25) JOHN CROSSMAN BOARD MEMBER	1.00 0.	X						0.	0.	0.
1b Sub-total ▶								0.	0.	0.
c Total from continuation sheets to Part VII, Section A ▶								555,843.	0.	84,752.
d Total (add lines 1b and 1c) ▶								555,843.	0.	84,752.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 3

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

Section B. Independent Contractors

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(26) VIVEK DESAI SECRETARY	1.00 0.	X		X				0.	0.	0.
(27) KIMBERLY DORSETT BOARD MEMBER	1.00 0.	X						0.	0.	0.
(28) DEREK JONES BOARD MEMBER	1.00 0.	X						0.	0.	0.
(29) TRACY JUNGER BOARD MEMBER	1.00 0.	X						0.	0.	0.
(30) PAUL MANOS BOARD MEMBER	1.00 0.	X						0.	0.	0.
(31) LISA MIHELICH TREASURER	1.00 0.	X		X				0.	0.	0.
(32) TAJUAN MILLS BOARD MEMBER	1.00 0.	X						0.	0.	0.
(33) BROCK NICHOLAS CHAIR ELECT	1.00 0.	X		X				0.	0.	0.
(34) KAY RAWLINS BOARD MEMBER	1.00 0.	X						0.	0.	0.
(35) JAMES STANLEY BOARD MEMBER	1.00 0.	X						0.	0.	0.
(36) JENNIFER H ASHTON BOARD MEMBER	1.00 0.	X						0.	0.	0.
1b Sub-total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶										

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 3

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

Section B. Independent Contractors

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(37) CHRISTOPHER V CARLYLE BOARD MEMBER	1.00 0.	X						0.	0.	0.
(38) LORI CHIPPS BOARD MEMBER	1.00 0.	X						0.	0.	0.
(39) HORACE G DAWSON III BOARD MEMBER	1.00 0.	X						0.	0.	0.
(40) MARK DUKES BOARD MEMBER	1.00 0.	X						0.	0.	0.
(41) ERIC ENGLISH BOARD MEMBER	1.00 0.	X						0.	0.	0.
(42) CLARA EWING BOARD MEMBER	1.00 0.	X						0.	0.	0.
(43) CHRIS FRIEDRICHS BOARD MEMBER	1.00 0.	X						0.	0.	0.
(44) DAN HELMICK BOARD MEMBER	1.00 0.	X						0.	0.	0.
(45) PATRICK HUGHES BOARD MEMBER	0. 0.	X						0.	0.	0.
(46) JALYN ISLEY BOARD MEMBER	1.00 0.	X						0.	0.	0.
(47) JOHN LAZENBY BOARD MEMBER	1.00 0.	X						0.	0.	0.
1b Sub-total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶										

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 3

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

Section B. Independent Contractors

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(48) TONY MASSEY BOARD MEMBER	1.00 0.	X						0.	0.	0.
(49) J.T. MCWALTERS BOARD MEMBER	1.00 0.	X						0.	0.	0.
(50) CLARA MILLER BOARD MEMBER	1.00 0.	X						0.	0.	0.
(51) DAN MORGAN BOARD MEMBER	1.00 0.	X						0.	0.	0.
(52) MICHAEL MORSBERGER BOARD MEMBER	1.00 0.	X						0.	0.	0.
(53) DARYL OSBAHR BOARD MEMBER	1.00 0.	X						0.	0.	0.
(54) RONALD E REITZ JR BOARD MEMBER	1.00 0.	X						0.	0.	0.
(55) DANNY RIVERA BOARD MEMBER	1.00 0.	X						0.	0.	0.
(56) LENA WILLIAMS BOARD MEMBER	1.00 0.	X						0.	0.	0.
(57) GARY CAIN PRESIDENT/CEO	40.00 0.			X				235,547.	0.	33,000.
(58) JAMES MACK REID CHIEF OPERATING OFFICER	40.00 0.			X				124,304.	0.	19,899.
1b Sub-total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶										

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 3

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

Section B. Independent Contractors

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(59) DANIEL MALLARY VP OF FINANCE	40.00 0.			X				89,436.	0.	16,633.
(60) AMIE THOMPSON VP OF DEVELOPMENT	40.00 0.					X		106,556.	0.	15,220.

1b Sub-total ▶
c Total from continuation sheets to Part VII, Section A ▶
d Total (add lines 1b and 1c) ▶

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 3

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

Section B. Independent Contractors

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

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

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

Part VIII **Statement of Revenue**

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a	759,924.				
	b Membership dues	1b	33,839.				
	c Fundraising events	1c	245,706.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	5,196,558.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	26,449,144.				
	g Noncash contributions included in lines 1a-1f: $		719,017.				
	h **Total.** Add lines 1a-1f ▶			32,685,171.			
Program Service Revenue			Business Code				
	2a SUMMER ENRICHMENT		900099	450,522.	450,522.		
	b TRANSPORTATION		900099	12,066.	12,066.		
	c VARIOUS OTHER PROGRAMS		900099	394,213.	394,213.		
	d						
	e						
	f All other program service revenue						
	g **Total.** Add lines 2a-2f ▶			856,801.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶			215,486.			215,486.
	4 Income from investment of tax-exempt bond proceeds ▶			0.			
	5 Royalties ▶			0.			
		(i) Real	(ii) Personal				
	6a Gross rents	99,420.					
	b Less: rental expenses						
	c Rental income or (loss)	99,420.					
	d Net rental income or (loss) ▶			99,420.			99,420.
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss) ▶			326,497.			326,497.
	8a Gross income from fundraising events (not including $ ____ of contributions reported on line 1c). See Part IV, line 18	a	760,756.				
	b Less: direct expenses	b					
	c Net income or (loss) from fundraising events ▶			760,756.			
	9a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities ▶			0.			
	10a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory ▶			0.			
	Miscellaneous Revenue		Business Code				
	11a MISCELLANEOUS		900099	573,811.	573,811.		
	b						
	c						
	d All other revenue						
	e **Total.** Add lines 11a-11d ▶			573,811.			
	12 **Total revenue.** See instructions ▶			35,517,942.	1,430,612.		641,403.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0.			
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0.			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0.			
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	575,158.	100,000.	194,798.	280,360.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7 Other salaries and wages	6,274,477.	4,723,580.	987,723.	563,174.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	340,104.	192,908.	72,565.	74,631.
9 Other employee benefits	415,697.	244,886.	96,728.	74,083.
10 Payroll taxes	581,950.	402,223.	113,416.	66,311.
11 Fees for services (non-employees):				
a Management	0.			
b Legal	0.			
c Accounting	63,596.	334.	63,262.	
d Lobbying	0.			
e Professional fundraising services. See Part IV, line 17	0.			
f Investment management fees	0.			
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	0.			
12 Advertising and promotion	0.			
13 Office expenses	0.			
14 Information technology	0.			
15 Royalties	0.			
16 Occupancy	495,550.	426,907.	64,463.	4,180.
17 Travel	444,300.	393,326.	41,484.	9,490.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	58,806.	40,974.	10,770.	7,062.
20 Interest	0.			
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	671,763.	651,230.	20,533.	
23 Insurance	261,007.	239,127.	21,880.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PROGRAM EXPENSES	2,397,446.	2,170,308.	29,473.	197,665.
b BLDG & EQUIPMENT	721,616.	602,057.	99,445.	20,114.
c CONTRACT SERVICES	396,937.	256,135.	123,775.	17,027.
d POSTAGE AND SHIPPING	93,305.	48,770.	35,882.	8,653.
e All other expenses ATCH 1	1,698,975.	573,062.	554,898.	571,015.
25 **Total functional expenses.** Add lines 1 through 24e	15,490,687.	11,065,827.	2,531,095.	1,893,765.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)	0.			

Part X Balance Sheet

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		0.	1	0.
	2	Savings and temporary cash investments		6,197,386.	2	20,211,167.
	3	Pledges and grants receivable, net		5,154,806.	3	8,825,514.
	4	Accounts receivable, net		0.	4	0.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		0.	5	0.
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		0.	6	0.
	7	Notes and loans receivable, net		0.	7	0.
	8	Inventories for sale or use		0.	8	0.
	9	Prepaid expenses and deferred charges		273,437.	9	234,904.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 24,368,849.			
	b	Less: accumulated depreciation	10b 6,377,406.	14,737,014.	10c	17,991,443.
	11	Investments - publicly traded securities ATCH 2		5,911,179.	11	6,148,129.
	12	Investments - other securities. See Part IV, line 11		0.	12	0.
	13	Investments - program-related. See Part IV, line 11		0.	13	0.
	14	Intangible assets		0.	14	0.
	15	Other assets. See Part IV, line 11		52,110.	15	70,996.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		32,325,932.	16	53,482,153.
Liabilities	17	Accounts payable and accrued expenses		509,632.	17	720,188.
	18	Grants payable		0.	18	0.
	19	Deferred revenue ATCH 3		280,478.	19	178,727.
	20	Tax-exempt bond liabilities		0.	20	0.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		0.	21	0.
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		0.	22	0.
	23	Secured mortgages and notes payable to unrelated third parties		0.	23	0.
	24	Unsecured notes and loans payable to unrelated third parties		0.	24	0.
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		0.	25	0.
	26	**Total liabilities.** Add lines 17 through 25		790,110.	26	898,915.
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		19,883,526.	27	37,688,374.
	28	Temporarily restricted net assets		10,442,610.	28	13,704,127.
	29	Permanently restricted net assets		1,209,686.	29	1,190,737.
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		31,535,822.	33	52,583,238.
	34	Total liabilities and net assets/fund balances		32,325,932.	34	53,482,153.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	35,517,942.
2	Total expenses (must equal Part IX, column (A), line 25)	2	15,490,687.
3	Revenue less expenses. Subtract line 2 from line 1	3	20,027,255.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	31,535,822.
5	Net unrealized gains (losses) on investments	5	-45,924.
6	Donated services and use of facilities	6	0.
7	Investment expenses	7	0.
8	Prior period adjustments	8	0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	1,066,085.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	52,583,238.

Part XII Financial Statements and Reporting

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

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

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047
2017
Open to Public Inspection

Name of the organization: BOYS & GIRLS CLUBS OF CENTRAL FLORIDA, INC.
Employer identification number: 59-0951887

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
10 ☐ An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations . . . .

g Provide the following information about the supported organization(s).

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

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)** (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	9,135,747.	9,182,597.	10,880,578.	13,067,803.	13,966,159.	56,232,884.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 **Total.** Add lines 1 through 3	9,135,747.	9,182,597.	10,880,578.	13,067,803.	13,966,159.	56,232,884.
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) ATCH 1						322,396.
6 **Public support.** Subtract line 5 from line 4						55,910,488.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4	9,135,747.	9,182,597.	10,880,578.	13,067,803.	13,966,159.	56,232,884.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	238,490.	323,463.	289,210.	268,393.	314,906.	1,434,462.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) ATCH 2	1,778.		16,893.	417,781.	573,811.	1,010,263.
11 **Total support.** Add lines 7 through 10						58,677,609.

12 Gross receipts from related activities, etc. (see instructions)	12	6,571,231.

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	95.28 %
15 Public support percentage from 2016 Schedule A, Part II, line 14	15	97.12 %

16a **33 1/3 % support test - 2017.** If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3 % support test - 2016.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test - 2017.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test - 2016.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2016 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2017** (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from **2016** Schedule A, Part III, line 17	18	%

19a **33 1/3 % support tests - 2017.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3 % support tests - 2016.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in **Part VI** when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (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).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in **Part VI.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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).*	7		
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).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in **Part VI.***	9a		
b	Did one or more disqualified persons (as defined 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.***	9b		
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.***	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in* **Part VI.**	11c		

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* **Part VI** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	1		

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* **(see instructions)**.

a ☐ The organization satisfied the Activities Test. *Complete* **line 2** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

c ☐ The organization supported a governmental entity. *Describe in* **Part VI** *how you supported a government entity (see instructions).*

			Yes	No
2	Activities Test. ***Answer (a) and (b) below.***			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* **Part VI** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	2b		
3	Parent of Supported Organizations. ***Answer (a) and (b) below.***			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* **Part VI.**	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.*	3b		

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 **Adjusted Net Income** (subtract lines 5, 6, and 7 from line 4).	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d **Total** (add lines 1a, 1b, and 1c)	1d		
e **Discount** claimed for blockage or other factors (explain in detail in **Part VI**):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 **Minimum Asset Amount** (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

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

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in **Part VI**). See instructions.	
7	**Total annual distributions.** Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions.	
9	Distributable amount for 2017 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required-explain in **Part VI**). See instructions.			
3	Excess distributions carryover, if any, to 2017			
a				
b	From 2013			
c	From 2014			
d	From 2015			
e	From 2016			
f	**Total** of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in **Part VI**. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in **Part VI**. See instructions.			
7	**Excess distributions carryover to 2018**. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2013. . . .			
b	Excess from 2014. . . .			
c	Excess from 2015. . . .			
d	Excess from 2016. . . .			
e	Excess from 2017. . . .			

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

ATTACHMENT 1

SCHEDULE A, PART II - EXCESS CONTRIBUTIONS

(NOT OPEN TO PUBLIC INSPECTION)

CONTRIBUTOR NAME	TOTAL CONTRIBUTION	LESS 2% OF LINE 11(F)	EXCESS CONTRIBUTION AMOUNT
ANONYMOUS	1,469,500.	1,173,552.	295,948.
DR PHILLIPS	1,200,000.	1,173,552.	26,448.
TOTAL	2,669,500.		322,396.

ATTACHMENT 2

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2013	2014	2015	2016	2017	TOTAL
OTHER INCOME	1,778.		16,893.	417,781.	573,811.	1,010,263.
TOTALS	1,778.		16,893.	417,781.	573,811.	1,010,263.

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2017

Name of the organization
BOYS & GIRLS CLUBS OF CENTRAL FLORIDA, INC.

Employer identification number
59-0951887

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	[X] 501(c)(3) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

[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. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year . . . . ▶ $ ____________

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

Name of organization BOYS & GIRLS CLUBS OF CENTRAL FLORIDA, INC.

Employer identification number 59-0951887

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ORANGE COUNTY CITIZENS' COMMISSION 2001 E. MICHIGAN STREET ORLANDO, FL 32806	$ 1,986,522.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2	STATE OF FLORIDA 250 MARIOTT DRIVE TALLAHASSEE, FL 32399	$ 2,349,315.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3	FLORIDA ALLIANCE OF BOYS & GIRLS CLUBS PO BOX 895220 LEESBURG, FL 34789-5220	$ 1,188,411.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
4	WALT DISNEY WORLD COMPANY PO BOX 10000, TEAM DISNEY COMMUNITY REL. LAKE BUENA VISTA, FL 32830	$ 1,311,046.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
5	ANONYMOUS PO BOX 770001 CINCINNATI, OH 45277-0001	$ 14,129,771.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
6	JACQUELINE L. BRADLEY 5336 ISLEWORTH COUNTRY CLUB DR WINDERMERE, FL 34786-8923	$ 4,020,250.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF CENTRAL FLORIDA, INC.

Employer identification number 59-0951887

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	BOYS & GIRLS CLUBS OF NASSAU COUNTY LLC PO BOX 16003 FERNANDINA BEACH, FL 32035-3117	$ 707,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF CENTRAL FLORIDA, INC.

Employer identification number 59-0951887

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

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

(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 organization BOYS & GIRLS CLUBS OF CENTRAL FLORIDA, INC.

Employer identification number 59-0951887

Part III *Exclusively* **religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor.** Complete columns **(a)** through **(e) and** the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047
2017
Open to Public Inspection

Name of the organization: BOYS & GIRLS CLUBS OF CENTRAL FLORIDA, INC.
Employer identification number: 59-0951887

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
- ☐ Preservation of land for public use (e.g., recreation or education)
- ☐ Protection of natural habitat
- ☐ Preservation of open space
- ☐ Preservation of a historically important land area
- ☐ Preservation of a certified historic structure

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

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

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

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

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

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

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

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

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

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

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

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

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

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

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

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

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

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

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

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

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

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

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

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

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

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

		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	1,616,396.	1,118,523.	1,066,207.	1,062,544.	925,249.
b	Contributions	14,116,771.	384,795.	31,346.		33,680.
c	Net investment earnings, gains, and losses	478,310.	124,642.	26,218.	13,219.	110,935.
d	Grants or scholarships					
e	Other expenditures for facilities and programs					
f	Administrative expenses		594.	5,248.	9,556.	7,320.
g	End of year balance	16,211,477.	1,627,366.	1,118,523.	1,066,207.	1,062,544.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
a Board designated or quasi-endowment ▶ ________ %
b Permanent endowment ▶ ________ %
c Temporarily restricted endowment ▶ ________ %
The percentages on lines 2a, 2b, and 2c should equal 100%.

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

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

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

Part VI **Land, Buildings, and Equipment.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land		419,650.		419,650.
b	Buildings		21,404,477.	4,555,498.	16,848,979.
c	Leasehold improvements				
d	Equipment		2,536,712.	1,821,908.	714,804.
e	Other		8,010.		8,010.
Total.	Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				17,991,443.

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

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

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

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

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

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

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

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

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

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

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

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

Part XIII Supplemental Information.

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

SEE PAGE 5

Part XIII Supplemental Information *(continued)*

PART XI, LINE 4B - OTHER ADJUSTMENTS:

DIRECT FUNDRAISING EXPENSES INCLUDED IN EXPENSES FOR AUDIT	130,096
TOTAL TO SCHEDULE D, PART XI, LINE 4B	130,096

PART XII, LINE 2D - OTHER ADJUSTMENTS:

DIRECT FUNDRAISING EXPENSES INCLUDED IN EXPENSES FOR AUDIT	130,096
TOTAL TO SCHEDULE D, PART XI, LINE 4B	130,096

PART V, LINE 4:

THE BOARD INTENDS TO PRESERVE THE PRINCIPAL OF THE ENDOWMENT FUNDS AND TO USE ANY DISTRIBUTIONS FOR THE BENEFIT OF THE ORGANIZATION'S OPERATIONS. IN CERTAIN CIRCUMSTANCES, THE BOARD MAY USE ENDOWMENT FUNDS TO FUND THE ORGANIZATION'S CAPITAL PROJECTS ON A SHORT TERM BASIS UNTIL THE COLLECTION OF PLEDGES FOR THE CAPITAL PROJECTS.

PART X, LINE 2:

THE ORGANIZATION IDENTIFIES AND EVALUATES UNCERTAIN TAX POSITIONS, IF ANY, AND RECOGNIZES THE IMPACT OF UNCERTAIN TAX POSITIONS FOR WHICH THERE IS A LESS THAN MORE-LIKELY-THAN-NOT PROBABILITY OF THE POSITION BEING UPHELD WHEN REVIEWED BY THE RELEVANT TAXING AUTHORITY. SUCH POSITIONS ARE DEEMED TO BE UNRECOGNIZED TAX BENEFITS AND A CORRESPONDING LIABILITY IS ESTABLISHED ON THE STATEMENT OF FINANCIAL POSITION. THE ORGANIZATION HAS NOT RECOGNIZED A LIABILITY FOR UNCERTAIN TAX POSITIONS. IF THERE WERE AN UNRECOGNIZED TAX BENEFIT, THE ORGANIZATION WOULD RECOGNIZE INTEREST ACCRUED RELATED TO UNRECOGNIZED TAX BENEFITS IN INTEREST EXPENSE AND PENALTIES IN OPERATING EXPENSES. THE ORGANIZATION'S TAX YEARS CURRENTLY

Part XIII Supplemental Information *(continued)*

SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE GENERALLY REMAIN

OPEN FOR THREE YEARS FROM THE DATE OF FILING.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization: BOYS & GIRLS CLUBS OF CENTRAL FLORIDA, INC.

Employer identification number: 59-0951887

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

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

a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

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

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

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

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

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

		(a) Event #1 CELEBRATE (event type)	(b) Event #2 BLACK & WHITE (event type)	(c) Other events 3. (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	224,786.	20,920.		245,706.
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	224,786.	20,920.		245,706.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				245,706.

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

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

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

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

b If "No," explain: ____

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

b If "Yes," explain: ____

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization: BOYS & GIRLS CLUBS OF CENTRAL FLORIDA, INC.

Employer identification number: 59-0951887

Part I Questions Regarding Compensation

			Yes	No
1a	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 ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or 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 on line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☒ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☒ Compensation survey or study ☐ Form 990 of other organizations ☒ Approval by the board or compensation committee			
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:			
a	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	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:			
a	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	6a		X
b	Any related organization?	6b		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 nonfixed 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" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule J (Form 990) 2017**

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 aren't 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-MISC compensation (i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
GARY CAIN	(i)	230,806.	0.	4,741.	26,758.	6,242.	268,547.	
1 PRESIDENT/CEO	(ii)	0.	0.	0.				
	(i)							
2	(ii)							
	(i)							
3	(ii)							
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047
2017
Open To Public Inspection

Name of the organization: BOYS & GIRLS CLUBS OF CENTRAL FLORIDA, INC.

Employer identification number: 59-0951887

Part I **Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected? Yes	No
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization. . . . ▶ $

Part II **Loans to and/or From Interested Persons.**
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization? To	From	(e) Original principal amount	(f) Balance due	(g) In default? Yes	No	(h) Approved by board or committee? Yes	No	(i) Written agreement? Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total . . . ▶ $												

Part III **Grants or Assistance Benefiting Interested Persons.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Part IV **Business Transactions Involving Interested Persons.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	No
(1) MIKE HATCHER			SEE BELOW FOR DESCRIPTION		
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V **Supplemental Information**
Provide additional information for responses to questions on Schedule L (see instructions).

FORM 990, SCH L, PART IV, LINE 1:

INSURANCE AGENCY OWNED BY THE BOARD MEMBER PROVIDES INSURANCE TO THE ORGANIZATION. INSURANCE IS PLACED OUT TO BID EACH YEAR FOR COMPETITIVE PRICING.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047
2017
Open to Public Inspection

Name of the organization: BOYS & GIRLS CLUBS OF CENTRAL FLORIDA, INC.
Employer identification number: 59-0951887

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶(AUCTION ITEMS)	X	1.	155,802.	MARKET VALUE
26 Other ▶(TICKETS)	X	1.	83,098.	MARKET VALUE
27 Other ▶(OTHER)	X	1.	719,017.	MARKET VALUE
28 Other ▶( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . 29

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		X
b If "Yes," describe the arrangement in Part II.			
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		X
b If "Yes," describe in Part II.			
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization	Employer identification number
BOYS & GIRLS CLUBS OF CENTRAL FLORIDA, INC.	59-0951887

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OUR 30 CLUBS OFFER DAILY AFTER-SCHOOL AND FULL-DAY SUMMER YOUTH DEVELOPMENT PROGRAMS. YOUTH WHO ATTEND OUR CLUBS REGULARLY WON'T BE LOST TO VIOLENCE, GANGS, OR DRUGS BECAUSE WE WORK TO PROVIDE AN OUTCOME-DRIVEN, WORLD-CLASS CLUB EXPERIENCE THAT ASSURES SUCCESS IS WITHIN REACH OF EVERY YOUNG PERSON WHO WALKS THROUGH OUR DOORS, WITH ALL MEMBERS ON TRACK TO GRADUATE FROM HIGH SCHOOL WITH FUTURE PLANS, DEMONSTRATING GOOD CHARACTER AND CITIZENSHIP, AND LIVING A HEALTHY LIFESTYLE. FIVE CORE PROGRAM AREAS ARE EMPHASIZED: CHARACTER AND LEADERSHIP DEVELOPMENT; EDUCATION AND CAREER DEVELOPMENT; HEALTH AND LIFE SKILLS; THE ARTS; AND SPORTS, FITNESS, AND RECREATION. USING THIS PROGRAMMING, WE STRIVE TO REACH THE FOLLOWING GOALS: ACADEMIC SUCCESS (INCREASED ACADEMIC PERFORMANCE AND SCHOOL ATTENDANCE); GOOD CHARACTER & CITIZENSHIP (INCREASED CHARACTER AND LEADERSHIP SKILLS AND OPPORTUNITIES FOR COMMUNITY SERVICE); AND HEALTHY LIFESTYLES (REDUCED DELINQUENCY, VIOLENCE, AND INVOLVEMENT IN DRUG AND ALCOHOL ABUSE AND/OR CRIMINAL GANGS).

FORM 990, PART VI, SECTION B, LINE 12C:

THE VICE PRESIDENT OF FINANCE MONITORS ALL CONTRACTS, NEW & EXISTING, AND IS FAMILIAR WITH THE BUSINESSES OF THE BOARD OF DIRECTORS. THE VICE PRESIDENT OF FINANCE ALSO REVIEWS THE VENDOR LIST ON AN ANNUAL BASIS TO IDENTIFY POTENTIAL CONFLICTS OF INTEREST WITH BOARD MEMBERS. THE PRESIDENT MAKES THE BOARD AWARE OF TRANSACTIONS BEING CONSIDERED IN

Name of the organization	Employer identification number
BOYS & GIRLS CLUBS OF CENTRAL FLORIDA, INC.	59-0951887

ADVANCE TO MAINTAIN TRANSPARENCY.THE VICE PRESIDENT OF FINANCE REVIEWS ALL 1099 FORMS EACH YEAR AS AN EXTRA CHECK FOR POTENTIAL CONFLICTS OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15A:
THE VICE PRESIDENT OF HUMAN RESOURCES PROVIDES THE BOARD CHAIR WITH SALARY SURVEYS FROM BOYS & GIRLS CLUBS OF AMERICA ALONG WITH SALARY SURVEYS OF OTHER LOCAL NON PROFITS.THE CHAIR WORKS WITH THE EXECUTIVE COMMITTEE TO MAKE SALARY & BONUS DECISIONS FOR THE PRESIDENT.

FORM 990, PART VI, SECTION B, LINE 11A:
THE AUDIT COMMITTEE REVIEWS FORM 990, THEN THE ORGANIZATION SENDS A COMPLETE COPY TO THE ENTIRE BOARD BEFORE THE 990 IS FILED.

FORM 990, PART VI, SECTION C, LINE 19:
DOCUMENTS ARE AVAILABLE TO THE PUBLIC THROUGH CHARITY NAVIGATOR AND THE STATE OF FLORIDA.

FORM 990, PART XII, LINE 2C:
RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT: THE ORGANIZATION HAS AN AUDIT COMMITTEE THAT ASSUMES THE RESPONSIBILITY TO OVERSEE THE AUDIT AND SELECTION OF INDEPENDENT ACCOUNTANT. THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

FORM 990, PART XI, LINE 9:
DONATED CAPITALIZED ASSETS

Name of the organization: BOYS & GIRLS CLUBS OF CENTRAL FLORIDA, INC.

Employer identification number: 59-0951887

ATTACHMENT 1

FORM 990, PART IX - OTHER EXPENSES

DESCRIPTION	(A) TOTAL EXPENSES	(B) PROGRAM SERVICE EXP.	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING EXPENSES
DUES & SUBSCRIPTIONS	117,558.	89,373.	28,185.	
OTHER	623,500.	64,325.	341,815.	217,360.
DONATED GOODS USED	957,917.	419,364.	184,898.	353,655.
TOTALS	1,698,975.	573,062.	554,898.	571,015.

ATTACHMENT 2

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

DESCRIPTION	ENDING BOOK VALUE
FIXED INCOME MUTUAL FUNDS/ETF	2,692,860.
EQUITIES/EQUITY MUTUAL FUNDS	3,455,269.
TOTALS	6,148,129.

ATTACHMENT 3

FORM 990, PART X - DEFERRED REVENUE

DESCRIPTION	ENDING BOOK VALUE
DEFERRED REVENUES	178,727.
TOTALS	178,727.

Community Benefit Funds Application

City of Kissimmee, FL

Event Date *

27-Mar-2020

dd-MMM-yyyy

Event Name *

Celebrate the Children

Event Address *

Rosen Shingle Creek - 9939 Universal Blvd

Street Address

Orlando

City

FL

State/Region/Province

32819

Postal / Zip Code

Requestor's Information

Name *

Alicia

First

Hodge

Last

Phone Number *

239-826-9974

Address *

2411 Dyer Blvd.

Street Address

Kissimmee

City

FL

State/Region/Province

34741

Postal / Zip Code

Under Florida law, e-mail addresses are public records. If you do not want your e-mail address released in response to a public records request, do not send electronic mail to this entity. Instead, contact this office by phone or in writing.

Email

ahodge@bgccf.org

Community Benefit Funds Application

City of Kissimmee, FL

Eligibility *

○ Individual

◉ Organization

In addition to an application, organizations must also submit:

- A copy of the organization's 501(c) notification letter; and
- A copy of a current Form 990, if the organization is required to file such; and
- A copy of the organization's most recent completed audit; and
- A copy of the organization's most recent annual budget.

501(c) Certification/Notification

BGCCF_501c3_IRS_Determination_Letter_12-20-2017.pdf

Form 990 (If Organization is Required to File)

BGCCF_990_17-18.pdf

Last Completed Audit

BGCCF_FY_2017-18_Audit.pdf

Annual Budget

BGCCF_Agency_Budget_2019-20.xlsx

Type of Request *

○ Donation

◉ Sponsorship

Total amount to be raised/fundraising goal for your event? *

50,000.00 **USD**

Amount Requested from Community Benefit Fund *

2,500.00 **USD**

General Information

Community Benefit Funds Application

City of Kissimmee, FL

Name of School Represented

Boys & Girls Clubs of Central Florida (Osceola County)

Contact for Event Sponsor or School Representative

Alicia
First

Hodge
Last

Phone Number for Event/School Representative

239-826-9974

Event/Competition's Website

https://www.bgccf.org/ctc/

Have you participated in this event in the past? *

- (●) Yes
- ( ) No

Donation / Sponsorship Description

1. Briefly describe the nature of the event and the process to participate. If the request is for a donation, what will the funds be used towards? *

Celebrate The Children is our signature gala and Boys & Girls Clubs of Central Florida's biggest event of the year. It is a night where we celebrate our successes along with spectacular speakers, Club member performances, a fantastic dinner and one-of-a-kind silent auction. This is a great opportunity to support our organization and help us change the lives of our community's at-risk children. Through our Support a Club Member program, monies donated will offset the annual costs for a young boy or girl to actively participate in our programs critical to youth development. 100% of the monies donated will directly benefit the Tupperware Brands Branch of Boys & Girls Clubs right here in Kissimmee.

2. Are any other fundraisers planned to raise money for the event or for your participation in the event? *

Other monies to support this event will come from ticket sales, table sponsorships, general donations, and auction proceeds.

3. Have you secured funding or funding commitments from any other governmental entity? If yes, please provide the name(s) of the entity(ies). *

No, we have not.

Community Impact

Community Benefit Funds Application

City of Kissimmee, FL

Describe the impact this event will have on the quality of life and/or community pride for residents in the City of Kissimmee. *

The monies raised at this event will support the most vulnerable population of Kissimmee - our youth. The Support a Club Member project ensures funding is provided for each and every one of our Club Members for a full year including both our afterschool and summer programs. Support a Club member donations offset the cost of several at-risk youth to experience the positive youth development activities offered by their local Clubs. The activities in the project cover 5 core areas: Character & Leadership Development, Education & Career Development, Health & Life Skills, the Arts, and Sports Fitness & Recreation.

The program strategy is designed to empower youth with the skills needed to make healthy lifestyle choices that will lead to academic success, on-time promotion, and high school graduation with future plans. The Clubs' Education and Career Development programs enable youth to become proficient in basic educational disciplines, set goals, explore careers, prepare for employment, and embrace technology to achieve success in college, trade school, the military, or a career.

Has this event ever received a donation or sponsorship from the Community Benefit Fund? *

- ○ Yes
- ◉ No

Community Benefit Funds Application

City of Kissimmee, FL

Terms and Conditions *

Funding Availability
Funds for the Community Benefit program are provided on an annual basis from the City Commission Contingency Fund. Requests through this process are limited to an annual request of $2,500.00 and must go towards an awareness event, fundraising activity or school related competition.

Organizations currently funded through the Social Services or Quality of Life Competitive Funding Process, the Special Events Fee Waiver Program, the Law Enforcement Trust Fund or any entitlement programs funded through the City do not quality for Community Benefit funds.

Eligibility
Organizations:

Be a non-profit organization with Articles of Incorporation filed with the Florida Department of State, an

Be in existence and operating within the State of Florida for at least twelve (12) month prior to the date of application to the City for a donation, and

In addition to their application, submit: (1) a copy of their 501(c)3, or 501(c)4 notification letter. (Consideration will be given to tax exempt organizations raising funds dedicated to a specific 501(c)3 activity); (2) a copy of their current Form 990 (if your organization is required to file this document); (3) a copy of their last completed audit; and (4) an annual budget, and

Must provide a service, program, or event that demonstrates a local and positive impact to the City of Kissimmee and/or the residents of Kissimmee.

Individuals: When a requester is an individual, the individual shall:

Be a resident of the City of Kissimmee or Osceola County.

NOTE: All requests for financial support associated with a school-based program shall be paid directly to the sponsoring entity.

Program Restrictions
The following restrictions for funding shall apply to awards for any program, activity, person, or organization:

Funds will be available on a first come, first served basis and based on the availability of funds at the time of the application.

Requests for funds to support events hosted in any City of Kissimmee owed and/or operated facility or venue are not eligible for funding through the Community Benefit Fund. Requests must be submitted through the City of Kissimmee Fee Waiver Grant Program.

Funds cannot be used for or to promote a commercial business or private enterprise, personal gain or to promote political parties, political activities or political advocacy groups.

Funds cannot be used to promote the sale or consumption of tobacco products, illegal drugs, gambling, erotic materials or services.

Organizations that discriminate based on age, race, sex, sexual orientation, marital status, disability or national origin are not eligible for funds.

Funds cannot be used for the purposes of supporting a private foundation or charity that benefits one individual.

A nonprofit currently receiving funding through a separate grant or fund from the City of Kissimmee are ineligible for funding through the Community Benefit Fund sponsorship and donation grant process.

Final Reporting Requirements
All recipients will be required to submit a final report outlining the results of the event and the impact of the city's funds towards the event, cause or competition.

All applicants that receive funds in any amount must utilize the City seal/logo on all marketing, promotional and advertising materials including but not limited to print media, radio, television, website and social media depicting the City of Kissimmee's support.

Failure to adhere to the requirements contained within this section or set forth as a contingency for funding, shall result in disqualification the requestor from future funding through this program.

☑ I accept the Terms and Conditions.

ITEM 5.C
UPCOMING EVENTS AND DATES

Item Details

- Osceola County Fair - February 14th thru February 23rd - Osceola Heritage Park
- African American Read In - February 15th - Berlinsky Community House
- Chili Cook Off - February 22nd - Lakefront Park
- Spring Games - February 27th - March 20th - Fortune Road Athletic Complex
- Dining with the Departed - March 7th - Rosehill Cemetery
- March for Meals - March 14th - Kissimmee Lakefront Park
- Kowtown - March 21st - Kissimmee Lakefront Park
- Cattle Drive - March 30th - Downtown Kissimmee
- Kissimmee Bike Bonanza - April 3rd - Kissimmee Lakefront Park
- School of Government - April 16th
- Earth Day Clean Up - April 22nd - Experience Kissimmee
- Caribbean Fusion Festival (CAFA) - April 26th - Kissimmee Lakefront Park

Attachment(s):
None