

Form 990
Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047
2018
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2018, and ending 06-30-2019

B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending.
C Name of organization: COMMUNITY FOUNDATION OF TAMPA BAY INC
D Employer identification number: 59-3001853
E Telephone number: (813) 282-1975
F Name and address of principal officer: MARLENE M SPALTEN, 4300 W CYPRESS ST NO 700, TAMPA, FL 33607
G Gross receipts \$ 46,528,030
H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
I Tax-exempt status: 501(c)(3)
J Website: WWW.CFTAMPABAY.ORG
K Form of organization: Corporation
L Year of formation: 1989
M State of legal domicile: FL

Part I Summary

Table with 4 columns: Description, Prior Year, Current Year, End of Year. Rows include: 1. Mission statement; 2-7. Activities & Governance; 8-12. Revenue; 13-19. Expenses; 20-22. Net Assets or Fund Balances.

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 (KORY BURKLEY CFO), Date (2020-02-18)

Paid Preparer Use Only: Preparer's name (RIVERO GORDIMER & COMPANY PA), Date, Firm's EIN (59-3040705), Firm's address (TAMPA, FL 33672)

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

TO BUILD A BETTER COMMUNITY THROUGH CREATIVE PHILANTHROPY, VISION AND LEADERSHIP IN PARTNERSHIP AND COLLABORATION WITH DONORS, NONPROFITS, COMMUNITY AND BUSINESS LEADERS, PROFESSIONAL ADVISORS, VOLUNTEERS AND THE RESIDENTS OF OUR FIVE-COUNTY REGION

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

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

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

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses \$ 78,909 including grants of \$ 0) (Revenue \$ 0)
See Additional Data

4b (Code) (Expenses \$ 76,505 including grants of \$ 0) (Revenue \$ 4,455)
See Additional Data

4c (Code) (Expenses \$ 157,367 including grants of \$ 30,000) (Revenue \$ 0)
See Additional Data

(Code) (Expenses \$ 20,756,728 including grants of \$ 20,121,869) (Revenue \$ 50,423)

4d Other program services (Describe in Schedule O)
(Expenses \$ 20,756,728 including grants of \$ 20,121,869) (Revenue \$ 50,423)

4e Total program service expenses ▶ 21,069,509

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 22 regarding organizational requirements, such as political activities, lobbying, and financial reporting.

Part IV Checklist of Required Schedules (continued)

		Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
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? <i>If "Yes," complete Schedule L, Part IV</i>		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		No
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	Yes	

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		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	

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	21		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Yes	
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		Yes	
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			No
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			No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			No
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			No
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		Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			No
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			No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			No
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			No
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			No
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?					
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N	15			No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O	16			No

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



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (23); 1b Enter the number of voting members included in line 1a, above, who are independent (23); 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? (No); 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? (No); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (No); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (No); 6 Did the organization have members or stockholders? (No); 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? (No); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (No); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? (Yes); 8b Each committee with authority to act on behalf of the governing body? (Yes); 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 (No).

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (Yes); 10b 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? (Yes); 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (Yes); 11b 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 (Yes); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (Yes); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (Yes); 13 Did the organization have a written whistleblower policy? (Yes); 14 Did the organization have a written document retention and destruction policy? (Yes); 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? 15a The organization's CEO, Executive Director, or top management official (Yes); 15b Other officers or key employees of the organization (Yes); 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? (No); 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 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 Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply: Own website, Another's website, Upon request (checked), 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 (KORY BURKLEY 4300 W CYPRESS ST SUITE 700 TAMPA, FL 33607 (813) 282-1975).

Part VIII Statement of Revenue

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

Table with 5 columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 1a-1f (Contributions, Gifts, Grants, and Other Similar Amounts) and 1g (Noncash contributions included).

Table for Program Service Revenue with 5 columns: Business Code, (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 2a-2f.

Main revenue table with 5 columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 3-12 covering Investment income, Other Revenue, and Miscellaneous Revenue.

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	19,460,423	19,460,423		
2 Grants and other assistance to domestic individuals See Part IV, line 22	691,446	691,446		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	524,666	160,967	242,921	120,778
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	848,823	260,419	393,005	195,399
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits	229,613	70,446	106,311	52,856
10 Payroll taxes	99,034	30,384	45,853	22,797
11 Fees for services (non-employees)				
a Management				
b Legal	8,863		8,863	
c Accounting	35,377		35,377	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	550,053		550,053	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	135,427	124,641	7,050	3,736
12 Advertising and promotion	168,868	34,082	126,484	8,302
13 Office expenses	37,090	13,517	14,633	8,940
14 Information technology	111,313	43,007	48,809	19,497
15 Royalties				
16 Occupancy	172,826	59,159	78,359	35,308
17 Travel	11,366	3,360	3,627	4,379
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	129,807	73,834	25,582	30,391
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	62,616	21,433	28,389	12,794
23 Insurance	22,067	1,150	20,054	863
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 TRADE ASSN DUES	49,249	16,119	32,701	429
b MISCELLANEOUS	24,462	938	11,490	12,034
c EMPLOYEE SEARCH	20,921	4,184	12,553	4,184
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	23,394,310	21,069,509	1,792,114	532,687
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	141	1	0
	2 Savings and temporary cash investments	2,640,854	2	2,971,933
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	4,708,830	4	2,422,200
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	83,485	9	72,414
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 348,248		
	b Less accumulated depreciation	10b 228,773	167,895	10c 119,475
	11 Investments—publicly traded securities	206,278,044	11	232,094,460
	12 Investments—other securities See Part IV, line 11	30,807,116	12	31,067,186
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	8,330,817	15	9,301,121
16 Total assets. Add lines 1 through 15 (must equal line 34)	253,017,182	16	278,048,789	
Liabilities	17 Accounts payable and accrued expenses	291,101	17	355,796
	18 Grants payable	950,709	18	898,330
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D	39,212,741	25	42,953,562
	26 Total liabilities. Add lines 17 through 25	40,454,551	26	44,207,688
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	206,894,979	27	227,068,030
	28 Temporarily restricted net assets	5,667,652	28	6,773,071
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	212,562,631	33	233,841,101	
34 Total liabilities and net assets/fund balances	253,017,182	34	278,048,789	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	46,528,030
2	Total expenses (must equal Part IX, column (A), line 25)	2	23,394,310
3	Revenue less expenses Subtract line 2 from line 1	3	23,133,720
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	212,562,631
5	Net unrealized gains (losses) on investments	5	2,108,295
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-3,963,545
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	233,841,101

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990 Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Software ID:

Software Version:

EIN: 59-3001853

Name: COMMUNITY FOUNDATION OF TAMPA BAY INC

Form 990 (2018)

Form 990, Part III, Line 4a:

WIMAUMA COMMUNITY EDUCATION PARTNERSHIPLOOKING AHEAD TO ITS FOURTH SUMMER, THE WIMAUMA COMMUNITY EDUCATION PARTNERSHIP CONTINUES TO SUPPORT EARLY LEARNING INTERVENTIONS OFFERED AT WIMAUMA AND REDDICK ELEMENTARY SCHOOLS IN SOUTH HILLSBOROUGH COUNTY FOR DISADVANTAGED STUDENTS EACH YEAR, A LEVEL OF SUPPORT HAS BEEN ADDED STARTING WITH SUPPORT FOR VOLUNTEER PRE-KINDERGARTEN (VPK) AND ENRICHMENT ACTIVITIES, THEN ADDING A "JUMP START" FOR RISING FIRST, RISING SECOND AND, NEW THIS COMING YEAR, RISING THIRD GRADERS THESE "PATHWAYS" FOR STUDENTS FROM PRE-KINDERGARTEN TO THIRD GRADE IN THE WIMAUMA AREA PARTNERS INCLUDE HILLSBOROUGH COUNTY PUBLIC SCHOOLS, COMMUNITY HEALTH CENTERS, LOCAL READING PROGRAMS, AND OTHER COMMUNITY PARTNERS WHO PROVIDE ENRICHMENTS AROUND THE PROGRAM ONE HUNDRED AND FOURTEEN STUDENTS PARTICIPATED LAST SUMMER IN VPK, A KINDERGARTEN-TO-FIRST GRADE SUMMER BRIDGE, A FIRST GRADE-TO-SECOND GRADE SUMMER BRIDGE, AND THIRD GRADE TUTORING PLANNING FOR NEXT SUMMER'S EARLY LEARNING PROGRAMMING WILL BEGIN JUST AFTER THE FIRST OF THE YEAR, BUT AS FORMAL DATA FOR LAST SCHOOL YEAR IS GATHERED BY THE DISTRICT, THE PRINCIPAL AT WIMAUMA ELEMENTARY REPORTS THAT HIS STUDENTS ARE SEEING GAINS WHICH IN SOME CASES IS BRINGING THE SCHOOL UP TO THE DISTRICT-WIDE AVERAGE PERFORMANCE LEVEL

Form 990, Part III, Line 4b:

NONPROFIT CEO LEADERSHIP DEVELOPMENT PROGRAM THE COMMUNITY FOUNDATION OF TAMPA BAY IS DEDICATED TO BUILDING NONPROFIT CAPACITY THROUGH LEADERSHIP DEVELOPMENT FOR CEOS AND TRUSTEES CFTB'S CEO LEADERSHIP PROGRAM, , ANNUALLY PROVIDES 21 NONPROFIT EXECUTIVES WITH AN INTENSIVE, YEAR-LONG PROGRAM TO BETTER UNDERSTAND THEIR LEADERSHIP STYLES, STRENGTHS AND AREAS FOR DEVELOPMENT THE PROGRAM BRINGS TOGETHER THE CEOS FOR PEER GROUP SESSIONS ONE DAY A MONTH WITH AN ADDITIONAL MONTHLY ONE-ON-ONE COACHING SESSION THAT FOCUSES ON SPECIFIC ISSUES RELATED TO LEADING A NONPROFIT ORGANIZATION THE SESSIONS ARE DESIGNED TO CREATE A CONFIDENTIAL, SUPPORTIVE AND SAFE ENVIRONMENT TO DISCUSS CHALLENGE SUCH AS ISOLATION, FUNDRAISING, AND BOARD DEVELOPMENT PRACTICAL SOLUTIONS OFTEN ARISE THAT CAN BE APPLIED BACK AT THE OFFICE

Form 990, Part III, Line 4c:

LEAP TAMPA BAY, LOCAL COLLEGE ACCESS NETWORK THE COMMUNITY FOUNDATION OF TAMPA BAY IS ONE OF 17 PUBLIC AND PRIVATE COMMUNITY STAKEHOLDERS COLLABORATING ON THE LEAP TAMPA BAY COLLEGE ACCESS NETWORK LEAP IS A CROSS-SECTOR NETWORK OF PARTNERS, CONVENED TO PROMOTE THEIR COMMUNITY-WIDE COMMITMENT TO COLLEGE ACCESS AND ATTAINMENT IN HILLSBOROUGH AND PINELLAS COUNTIES USING A COLLECTIVE IMPACT MODEL OF COLLABORATION, LEAP TAMPA BAY LEADERSHIP GUIDES COORDINATED STRATEGIES BY PARTNERS TO INCREASE THE NUMBER OF PEOPLE WITH HIGH-QUALITY COLLEGE DEGREES AND CREDENTIALS - HELPING MEET THE NEEDS OF LOCAL EMPLOYERS AND BRING MORE FINANCIAL STABILITY TO FAMILIES LEAP'S GOAL IS TO REACH 60% OF WORKING AGE ADULTS (AGE 25-64) IN TAMPA BAY HOLDING DEGREES AND CREDENTIALS BY 2025 LEAP WAS AN EARLY EXAMPLE OF A LOCAL COLLEGE ACCESS NETWORK, OPERATING UNDER THE GUIDANCE OF THE FLORIDA COLLEGE ACCESS NETWORK THERE ARE NOW 17 SUCH NETWORKS REPRESENTING 82% OF FLORIDA'S POPULATION CFTB ACTS AS THE BACKBONE AGENCY OF THE COLLABORATIVE, WHICH RALLIES CIVIC AND BUSINESS LEADERS ALONGSIDE EDUCATORS ON PROJECTS SUCH AS THE FUSE SCHOLARSHIP, WHICH HAS AWARDED 255 SCHOLARSHIPS (\$5,500 EACH) OVER TWO YEARS TO STATE COLLEGE STUDENTS WORKING TOWARD A BACHELOR'S DEGREE THROUGH A GUARANTEED TRANSFER PROGRAM TO THE UNIVERSITY OF SOUTH FLORIDA LEAP AND THE COMMUNITY FOUNDATION ARE AT THE CENTER OF THIS SCHOLARSHIP FUND'S DEVELOPMENT AND IMPLEMENTATION LEAP IS ALSO SEEKING TO SUPPORT ADULTS RETURNING TO FINISH THEIR COLLEGE CREDENTIALS

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Insttutchnal Trustee	Officer	Key employee	Highest compensated employee	Former			
BETTY CASTOR CHAIR	10 00	X		X				0	0	0
ROBERT H MOHR CHAIR ELECT	2 00	X		X				0	0	0
BILL FRIES TREASURER	1 00	X		X				0	0	0
SUSANNA FENHAGEN SECRETARY	1 00	X		X				0	0	0
DONNA L LONGHOUSE PAST CHAIR	1 00	X		X				0	0	0
MILES S CAPRON TRUSTEE	1 00	X						0	0	0
PHILLIP E CASEY TRUSTEE	1 00	X						0	0	0
RICHARD J DOBKIN TRUSTEE	1 00	X						0	0	0
PATRICIA L DOUGLAS TRUSTEE	1 00	X						0	0	0
LAURENCE R FASAN TRUSTEE	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DAMON C GLISSON TRUSTEE	1 00	X						0	0	0
LINDA C HANNA TRUSTEE	1 00	X						0	0	0
SETON T HENGESBACH TRUSTEE	1 00	X						0	0	0
OSCAR HORTON TRUSTEE	1 00	X						0	0	0
EDWARD F KOREN TRUSTEE	1 00	X						0	0	0
LYDA T LINDELL TRUSTEE	1 00	X						0	0	0
RICHARD J RIOS TRUSTEE	1 00	X						0	0	0
MARK SENA TRUSTEE	1 00	X						0	0	0
JOEL H SHANE TRUSTEE	1 00	X						0	0	0
JUEL SMITH TRUSTEE	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JAMES R STANGER TRUSTEE	1 00	X						0	0	0
MIKE STARKEY TRUSTEE	1 00	X						0	0	0
SUE S WILLIAMS TRUSTEE	1 00	X						0	0	0
MARLENE M SPALTEN PRESIDENT/CEO	60 00			X				255,271	0	20,882
KORY BURKLEY CFO	50 00			X				126,736	0	534
BEVERLEY J MCLAIN VP - PHILANTHROPY	50 00					X		112,865	0	8,377

SCHEDULE A
(Form 990 or 990-EZ)

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 the latest information.

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

COMMUNITY FOUNDATION OF TAMPA BAY INC

Employer identification number

59-3001853

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 **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?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	14,612,462	14,460,764	33,199,680	26,439,967	36,216,519	124,929,392
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	14,612,462	14,460,764	33,199,680	26,439,967	36,216,519	124,929,392
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)						10,153,732
6 Public support. Subtract line 5 from line 4						114,775,660

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	14,612,462	14,460,764	33,199,680	26,439,967	36,216,519	124,929,392
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	7,219,152	8,508,752	4,320,306	3,849,570	4,508,949	28,406,729
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	157,322	100,539	59,257	4,727,535	25,944	5,070,597
11 Total support. Add lines 7 through 10						158,406,718
12 Gross receipts from related activities, etc (see instructions)						12

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	72.460 %
15 Public support percentage for 2017 Schedule A, Part II, line 14	15	69.060 %

16a 33 1/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization

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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2018 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2017 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

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

19a 33 1/3% support tests—2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ►

b 33 1/3% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ►

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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 line 10b below.		
	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		
	10b		

Part IV Supporting Organizations (continued)

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

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? <i>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.</i>		
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? <i>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.</i>		

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)? <i>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).</i>		

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>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.</i>	Yes	No
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? <i>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.</i>		
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? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

- 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)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

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

Additional Data

Software ID:

Software Version:

EIN: 59-3001853

Name: COMMUNITY FOUNDATION OF TAMPA BAY INC

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)

Facts And Circumstances Test

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 the latest information.

OMB No 1545-0047
2018
Open to Public Inspection

Name of the organization
COMMUNITY FOUNDATION OF TAMPA BAY INC

Employer identification number
59-3001853

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	366	
2 Aggregate value of contributions to (during year)	21,954,914	
3 Aggregate value of grants from (during year)	14,754,163	
4 Aggregate value at end of year	109,507,223	

- 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) Preservation of an historically important land area
- Protection of natural habitat Preservation of a certified historic structure
- Preservation of open space

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

	Held at the End of the 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 | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 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 in 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	126,760,427	112,998,247	100,079,687	107,657,675	111,090,252
b Contributions	11,682,486	10,549,793	5,371,634	2,723,199	2,705,679
c Net investment earnings, gains, and losses	6,175,467	8,740,964	12,566,287	-2,131,138	-687,570
d Grants or scholarships	4,754,484	4,326,509	4,020,956	4,158,168	4,487,610
e Other expenditures for facilities and programs				3,084,481	
f Administrative expenses	1,339,635	1,202,068	998,405	927,400	963,076
g End of year balance	138,524,261	126,760,427	112,998,247	100,079,687	107,657,675

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶ 100 000 %
 - 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
- | | | |
|--|--------------------------|-----------|
| (i) unrelated organizations | Yes | No |
| 3a(i) | <input type="checkbox"/> | No |
| (ii) related organizations | Yes | No |
| 3a(ii) | <input type="checkbox"/> | No |
- b** If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? **3b**
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		12,544	3,775	8,769
d Equipment		158,329	102,770	55,559
e Other		177,375	122,228	55,147
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				119,475

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) COMMONFUND PRIVATE EQUITY FUNDS	9,706,933	F
(B) THE BURTON PARTNERSHIP (QP)	1,492,941	F
(C) UNDEVELOPED LAND - SUNSET ISLE, LTD	30,259	C
(D) GREAT BAY PARTNERSHIP	140,600	C
(E) ABS OFFSHORE SPC GLOBAL PORTFOLIO	9,976,818	F
(F) INFINITY PREMIER (QP) CAYMAN LP - HEDGE FUND	9,719,635	F
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	31,067,186	

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.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
LIABILITY FOR CHARITABLE GIFT ANNUITIES	2,282,472
LIABILITY UNDER CHARITABLE REMAINDER TRUSTS	2,364,538
LIABILITY FOR AGENCY FUNDS	38,306,552
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	42,953,562

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	42,681,790
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	2,108,295
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	2,108,295
3	Subtract line 2e from line 1	3	40,573,495
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	550,053
b	Other (Describe in Part XIII)	4b	5,404,482
c	Add lines 4a and 4b	4c	5,954,535
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	46,528,030

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	21,403,320
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	0
3	Subtract line 2e from line 1	3	21,403,320
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	550,053
b	Other (Describe in Part XIII)	4b	1,440,937
c	Add lines 4a and 4b	4c	1,990,990
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	23,394,310

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.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 59-3001853

Name: COMMUNITY FOUNDATION OF TAMPA BAY INC

Supplemental Information

Return Reference	Explanation
PART V, LINE 4	AGENCY FUNDS PAY GRANTS TO AGENCIES THAT ESTABLISHED THE FUND DESIGNATED FUNDS PAY GRANTS TO SPECIFIC CHARITABLE AGENCIES DESIGNATED BY THE DONOR(S) TO THE FUNDS THESE FUNDS CAN ONLY BE UTILIZED FOR THE PURPOSE(S) DESIGNATED IN THE FUND AGREEMENT SCHOLARSHIP FUNDS ARE SET UP TO BENEFIT STUDENTS IN SPECIFIC FIELDS OR STUDENTS FROM SPECIFIC HIGH SCHOOLS OTHER ENDOWED FUNDS INCLUDE FIELD-OF-INTEREST FUNDS WHICH ARE ADMINISTERED BY THE FOUNDATION'S GRANTS COMMITTEE TO PROVIDED GRANTS TO GENERAL FIELDS OF A DONOR'S INTEREST, SUCH AS PERFORMING ARTS, FEEDING THE HUNGRY, ANIMAL CARE, ETC

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE FOUNDATION IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE THE FOUNDATION IS A NOT-FOR-PROFIT FLORIDA CORPORATION AND THEREFORE IS NOT SUBJECT TO STATE INCOME TAXES MANAGEMENT IS NOT AWARE OF ANY ACTIVITIES THAT WOULD JEOPARDIZE THE FOUNDATION'S TAX EXEMPT STATUS THE FOUNDATION IS NOT AWARE OF ANY TAX POSITIONS IT HAS TAKEN THAT ARE SUBJECT TO A SIGNIFICANT DEGREE OF UNCERTAINTY TAX YEARS AFTER JUNE 30, 2015 REMAIN SUBJECT TO EXAMINATION BY TAXING AUTHORITIES

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	CONTRIBUTIONS TO AGENCY FUNDS 4,089,867 ADMINISTRATIVE FEES - AGENCY FUNDS -276,087 INVESTMENT INCOME OF AGENCY FUNDS 1,590,702

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	GRANTS PAID FROM AGENCY FUNDS 1,440,937

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**Schedule I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments and Individuals in the United States**

OMB No 1545-0047

2018

**Open to Public
Inspection**

Department of the
Treasury
Internal Revenue Service

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

Name of the organization
COMMUNITY FOUNDATION OF TAMPA BAY INC

Employer identification number
59-3001853

Part I General Information on Grants and Assistance

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

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 326

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

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) SCHOLARSHIPS	187	691,446			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2	SCHEDULE I, PART I, LINE 2 THE FOUNDATION REVIEWS THE NONPROFIT'S 501(C)(3) STATUS BEFORE DISBURSING THE GRANT FOR GRANTS INVOLVING SELECTION BY THE GRANT'S COMMITTEE, THE FOUNDATION ADDS THE REQUIREMENT THAT THE ORGANIZATION COMPLETE A PROGRESS REPORT, INCLUDING AN ACCOUNTING FOR THE USE OF FUNDS, AND STAFF OR GRANT COMMITTEE MEMBERS MAKE A SITE VISIT TO A SAMPLE OF THE ORGANIZATIONS FOR GRANTS FROM DONOR ADVISED FUNDS, EACH GRANT RECOMMENDATION IS REVIEWED AND APPROVED BY FOUNDATION STAFF PRIOR TO PAYMENT BEING MADE THE BOARD OF TRUSTEES REVIEWS ALL GRANTS THAT WERE COMPLETED

Additional Data

Software ID:
Software Version:
EIN: 59-3001853
Name: COMMUNITY FOUNDATION OF TAMPA BAY INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ABE BROWN MINISTRIES 2921 29TH STREET TAMPA, FL 33605	59-2410601	501(C)(3)	16,878				SUPPORT OF MISSION
ACADEMY PREP CENTER OF TAMPA 1407 E COLUMBUS DR TAMPA, FL 33605	59-3622978	501(C)(3)	226,024				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALPHA HOUSE OF TAMPA PO BOX 310525 TAMPA, FL 33680	59-1991525	501(C)(3)	70,091				SUPPORT OF MISSION
AMERICAN STAGE INC PO BOX 1560 ST PETERSBURG, FL 33731	59-1777189	501(C)(3)	524,660				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BAY AREA LEGAL SERVICES 1302 N 19TH ST STE 400 TAMPA, FL 33605	59-1171886	501(C)(3)	19,296				SUPPORT OF MISSION
BERKELEY PREPARATORY SCHOOL 4811 KELLY RD TAMPA, FL 33615	59-1292802	501(C)(3)	310,265				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIG CAT RESCUE 12802 EASY ST TAMPA, FL 33625	59-3330495	501(C)(3)	38,847				SUPPORT OF MISSION
DALLAS THEOLOGICAL SEMINARY 3909 SWISS AVE DALLAS, TX 75204	75-0827421	501(C)(3)	25,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DAVID A STRAZ JR CENTER FOR THE PERFORMING ARTS 1010 NORTH WC MACINNES PLACE TAMPA, FL 33602	59-2037085	501(C)(3)	172,701				SUPPORT OF MISSION
DIOCESE OF ST PETERSBURG PO BOX 40200 ST PETERSBURG, FL 33743	59-1213195	501(C)(3)	71,268				PROJECT SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ECKERD COLLEGE 4200 54TH AVE S ST PETERSBURG, FL 33711	59-0859121	501(C)(3)	13,500				SUPPORT OF MISSION
CHURCH OF THE ASCENSION 701 ORANGE AVE CLEARWATER, FL 33756	59-0721414	501(C)(3)	10,500				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FEEDING TAMPA BAY 4702 TRANSPORATION DR BLDG 6 TAMPA, FL 33605	59-2116576	501(C)(3)	274,538				SUPPORT OF MISSION
FLORIDA HOLOCAUST MUSEUM 55 5TH ST S ST PETERSBURG, FL 33701	59-2981494	501(C)(3)	28,584				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FLORIDA SHERIFFS YOUTH RANCHES INC PO BOX 2000 BOYS RANCH, FL 32064	23-7303117	501(C)(3)	6,908				SUPPORT OF MISSION
FREEDOM PLAZA SCHOLARSHIP FUND 1010 AMERICAN EAGLE BLVD BOX 752 SUN CITY CENTER, FL 33573	59-3214388	501(C)(3)	14,195				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ALL SPORTS COMMUNITY SERVICE INC PO BOX 271506 TAMPA, FL 33688	59-3184150	501(C)(3)	11,824				SUPPORT OF MISSION
GOOD SAMARITAN FUND OF GREATER SUN CITY INC 1207 N PEBBLE BEACH BLVD SUN CITY CENTER, FL 33573	59-2615679	501(C)(3)	28,548				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GOOD SAMARITAN HEALTH CLINIC OF PASCO COUNTY 5334 ASPEN ST NEW PORT RICHEY, FL 34652	59-3072334	501(C)(3)	26,453				SUPPORT OF MISSION
JEWISH FEDERATION OF PINELLAS COUNTY AND PASCO COUNTY INC 13191 STARKEY RD STE 8 LARGO, FL 33773	59-0697685	501(C)(3)	14,950				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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JUDEO CHRISTIAN HEALTH CLINIC INC 4118 N MCDILL AVE TAMPA, FL 33607	59-1605647	501(C)(3)	35,988				SUPPORT OF MISSION
CEDAR KEY LIONS CLUB PO BOX 68 CEDAR KEY, FL 32625	23-7047751	501(C)(4)	36,980				SUPPORT OF CHARITABLE GRANTS OF THE CLUB

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MEALS ON WHEELS OF TAMPA 550 W HILLSBOROUGH AVE TAMPA, FL 33603	59-1679915	501(C)(3)	50,283				SUPPORT OF MISSION
METROPOLITAN MINISTRIES 2002 N FLORIDA AVE TAMPA, FL 33602	59-1477007	501(C)(3)	108,892				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MUSEUM OF SCIENCE AND INDUSTRY 4801 E FOWLER AVE TAMPA, FL 33617	59-2657399	501(C)(3)	5,683				SUPPORT OF MISSION
NORTHWESTERN UNIVERSITY 1201 DAVIS STREET EVANSTON, IL 60208	36-2167817	501(C)(3)	70,403				SCHOLARSHIP FUND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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AMERICAN CANCER SOCIETY 3709 W JETTON AVENUE TAMPA, FL 33629	13-1788491	501(C)(3)	9,936				SUPPORT OF MISSION
PACT INC 1111 N MCMULLEN BOOTH RD CLEARWATER, FL 33759	59-1803628	501(C)(3)	20,058				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PALMA CEIA PRESBYTERIAN CHURCH 3501 SAN JOSE ST TAMPA, FL 33629	59-0767700	501(C)(3)	46,257				SUPPORT OF MISSION
READY FOR LIFE 2300 TALL PINES DR STE 100 LARGO, FL 33771	26-4032979	501(C)(3)	27,500				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REDEEMER PRESBYTERIAN CHURCH 12404 BOYETTE RD RIVERVIEW, FL 33569	75-3220668	501(C)(3)	12,000				SUPPORT OF MISSION
REDLANDS CHRISTIAN MIGRANT ASSOCIATION INC 402 W MAIN STREET IMMOKALEE, FL 34142	59-1221966	501(C)(3)	47,896				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY INC 35 DAVIS BLVD TAMPA, FL 33606	59-1835985	501(C)(3)	12,218				SUPPORT OF MISSION
RUTH ECKERD HALL INC 1111 N MCMULLEN BOOTH RD CLEARWATER, FL 33759	59-1803628	501(C)(3)	94,909				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHRINERS HOSPITAL FOR CHILDREN 2900 N ROCKY POINT DR TAMPA, FL 33607	36-2193608	501(C)(3)	73,846				SUPPORT OF MISSION
SOUTHEASTERN GUIDE DOGS INC 4210 77TH ST EAST PALMETTO, FL 34221	59-2252352	501(C)(3)	45,939				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ST PETERSBURG FREE CLINIC INC 863 THIRD AVENUE NORTH ST PETERSBURG, FL 33701	23-7208280	501(C)(3)	591,869				SUPPORT OF MISSION
SUN CITY CENTER EMERGENCY SQUAD 720 RAY WATSON DR SUN CITY CENTER, FL 33573	59-1147811	501(C)(3)	28,737				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SUN CITY CENTER LIBRARY 1009 N PEBBLE BEACH BOULEVARD SUN CITY CENTER, FL 33573	59-2746620	501(C)(3)	13,548				SUPPORT OF MISSION
TAMPA BAY HISTORY CENTER 801 OLD WATER ST TAMPA, FL 33602	59-3058652	501(C)(3)	133,688				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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TAMPA BAY PERFORMING ARTS CENTER FOUNDATION INC 1010 NORTH WC MACINNES PLACE TAMPA, FL 33602	59-3524613	501(C)(3)	199,264				SUPPORT OF MISSION
TAMPA GENERAL HOSPITAL FOUNDATION PO BOX 1289 ROOM G-141 TAMPA, FL 33601	23-7354477	501(C)(3)	153,230				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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TAMPA METROPOLITAN AREA YMCA 110 E OAK AVE TAMPA, FL 33602	59-1742909	501(C)(3)	18,098				PROJECT SUPPORT
TFTSP YOUTH GOLF COUNCIL ST PETERSBURG FL INC 3790 22ND AVE SOUTH ST PETERSBURG, FL 33711	27-0855397	501(C)(3)	24,300				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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THE FLORIDA ORCHESTRA INC 244 2ND AVE N STE 420 ST PETERSBURG, FL 33701	59-1223691	501(C)(3)	222,803				SUPPORT OF MISSION
SALVATION ARMY PO BOX 2839 TAMPA, FL 33601	58-0660607	501(C)(3)	13,745				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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THE SPRING OF TAMPA BAY PO BOX 5147 TAMPA, FL 33675	59-1777135	501(C)(3)	20,192				SUPPORT OF MISSION
TRINITY COLLEGE OF FLORIDA 2430 WELBILT BLVD TRINITY, FL 34655	59-6155069	501(C)(3)	145,000				PROJECT SUPPORT

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UNITED WAY OF SUNCOAST 5201 W KENNEDY BLVD STE 600 TAMPA, FL 33609	59-3725701	501(C)(3)	88,000				SUPPORT OF MISSION
UNIVERSITY OF FLORIDA FOUNDATION PO BOX 14425 GAINESVILLE, FL 32604	59-0974739	501(C)(3)	13,286				PROJECT SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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UNIVERSITY OF TAMPA 401 W KENNEDY BLVD TAMPA, FL 33606	59-0624459	501(C)(3)	724,614				SUPPORT OF MISSION
ARCHDIOCESE OF MIAMI 9401 BISCAYNE BOULEVARD MIAMI SHORES, FL 33138	65-0909504	501(C)(3)	60,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WORD OF LIFE FELLOWSHIP INC PO BOX 600 SCHROON LAKE, NY 12870	13-5648615	501(C)(3)	25,000				SUPPORT OF MISSION
WUSF PUBLIC MEDIA 4202 E FOWLER AVE TAMPA, FL 33620	59-0879015	501(C)(3)	14,131				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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YBOR CITY ROTARY FOUNDATION INC PO BOX 5931 TAMPA, FL 33675	59-2998020	501(C)(3)	6,424				SUPPORT OF MISSION
AT STILL UNIVERSITY OF HEALTH SCIENCES 800 WEST JEFFERSON ST KIRKSVILLE, MO 63501	43-0356250	501(C)(3)	10,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ACADEMY PREP CENTER OF ST PETERSBURG INC 2301 22ND AVE S ST PETERSBURG, FL 33712	59-3623000	501(C)(3)	121,500				SUPPORT OF MISSION
CONGREGATION B'NAI ISRAEL 300 58TH STREET N ST PETERSBURG, FL 33710	41-1664904	501(C)(3)	26,200				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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AMIKIDS YES 4337 SAFFOLD RD WIMANMA, FL 33598	59-3217810	501(C)(3)	25,000				SUPPORT OF MISSION
NONPROFIT LEADERSHIP CENTER OF TAMPA BAY INC 1408 N WESTSHORE BLVD STE 140 TAMPA, FL 33607	59-3671047	501(C)(3)	28,800				PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FRIENDS OF THE FESTIVAL PO BOX 17816 TAMPA, FL 33682	59-3617240	501(C)(3)	8,578				SUPPORT OF MISSION
MUSEUM OF FINE ARTS 255 BEACH DRIVE NE ST PETERSBURG, FL 33701	59-0949278	501(C)(3)	75,266				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BOLEY FOUNDATION INC 445 31ST NORTH ST PETERSBURG, FL 33713	59-2230228	501(C)(3)	10,410				SUPPORT OF MISSION
CHAMPIONS FOR CHILDREN 3108 W AZEELE ST TAMPA, FL 33609	59-1807551	501(C)(3)	20,609				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MORTON PLANT MEASE HEALTH CARE FOUNDATION INC 1200 DRUID RD S CLEARWATER, FL 33756	59-1751535	501(C)(3)	8,000				SUPPORT OF MISSION
UNITED COMMUNITY CHURCH OF SUN CITY CENTER 1501 LA JOLLA AVE SUN CITY CENTER, FL 33573	59-1161580	501(C)(3)	90,211				PROJECT SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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71 17 MINISTRIES INC PO BOX 2493 LAKELAND, FL 33806	45-4529842	501(C)(3)	5,250				SUPPORT OF MISSION
CONGREGATION SCHAARAI ZEDEK 3303 W SWANN AVE TAMPA, FL 33609	59-1394424	501(C)(3)	10,453				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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IDLEWILD BAPTIST CHURCH 18333 EXCITING IDLEWILD BLVD LUTZ, FL 33548	59-0774190	501(C)(3)	7,000				SUPPORT OF MISSION
PALMA CEIA UNITED METHODIST CHURCH 3723 W BAY TO BAY BLVD TAMPA, FL 33629	59-0996450	501(C)(3)	22,212				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FRAMEWORKS OF TAMPA BAY INC 402 EAST OAK AVE TAMPA, FL 33602	20-8776228	501(C)(3)	36,900				SUPPORT OF MISSION
HUMANE SOCIETY OF TAMPA BAY 3607 N ARMENIA AVE TAMPA, FL 33607	59-0799907	501(C)(3)	96,359				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LOWRY PARK ZOOLOGICAL SOCIETY OF TAMPA INC 1101 W SLIGH AVE TAMPA, FL 33604	59-2328289	501(C)(3)	46,000				SUPPORT OF MISSION
FLORIDA WEST COAST PUBLIC BROADCASTING INC 1300 N BLVD TAMPA, FL 33607	59-0840626	501(C)(3)	87,373				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CRISTO REY MARY HELP OF CHRISTIAN SCHOOL FOUNDATION 6400 EAST CHELSEA STREET TAMPA, FL 33610	47-3494960	501(C)(3)	40,500				SUPPORT OF MISSION
VIRGINIA ATHLETICS FOUNDATION PO BOX 400833 CHARLOTTESVILLE, VA 22904	54-0517188	501(C)(3)	25,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CARES 12417 CLOCK TOWER PARKWAY HUDSON, FL 34667	23-7348090	501(C)(3)	6,377				SUPPORT OF MISSION
MARY AND MARTHA HOUSE PO BOX 1251 RUSKIN, FL 33575	59-2788323	501(C)(3)	60,293				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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R'CLUB CHILD CARE INC 4140 49TH STREET N ST PETERSBURG, FL 33709	59-3652538	501(C)(3)	10,000				SUPPORT OF MISSION
GFWC SUN CITY CENTER WOMEN'S CLUB INC PO BOX 5434 SUN CITY CENTER, FL 33571	59-6159390	501(C)(3)	6,319				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ALPHA HOUSE OF PINELLAS COUNTY 701 5TH AVE N ST PETERSBURG, FL 33701	59-1991525	501(C)(3)	20,000				SUPPORT OF MISSION
ALZHEIMER'S DISEASE AND RELATED DISORRDERS 225 N MICHIGAN AVE FLOOR 17 CHICAGO, IL 60601	13-3039601	501(C)(3)	35,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LETS GO BOYS & GIRLS 19 HARNESS CREEK VIEW CT ANNAPOLIS, MD 21403	61-1612453	501(C)(3)	11,000				SUPPORT OF MISSION
ROTARY'S CAMP FLORIDA INC PO BOX 1027 BRANDON, FL 33509	59-3096120	501(C)(3)	17,319				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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YOUTH AND FAMILY ALTERNATIVES INC 7524 PLATHE ROAD NEW PORT RICHEY, FL 34653	59-1545990	501(C)(3)	9,352				SUPPORT OF MISSION
CASA PO BOX 414 ST PETERSBURG, FL 33731	59-2114359	501(C)(3)	8,500				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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AMBASSADOR BAPTIST COLLEGE PO BOX 158 LATTIMORE, NC 28089	56-1648007	501(C)(3)	6,500				SUPPORT OF MISSION
TAMPA MUSEUM OF ART 120 W GASPARILLA PLAZA TAMPA, FL 33602	59-1934721	501(C)(3)	124,485				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC FOUNDATION DIOCESE OF ST PETERSBURG PO BOX 40200 ST PETERSBURG, FL 33743	59-3519543	501(C)(3)	14,968				SUPPORT OF MISSION
AMERICAN CRAFTSMAN MUSEUM INC 4190 CORPORATE CT PALM HARBOR, FL 34683	90-0883474	501(C)(3)	35,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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STAGEWORKS INC 1120 EAST KENNEDY BOULEVARD WEST BUILDING 151 TAMPA, FL 33602	59-2465234	501(C)(3)	24,625				SUPPORT OF MISSION
FLORIDA COUNCIL ON ECONOMIC EDUCATION 501 S DAKOTA AVE STE 1 TAMPA, FL 33606	59-1643458	501(C)(3)	8,250				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JUNIOR ACHIEVEMENT OF TAMPA BAY INC 13707 N 22ND STREET TAMPA, FL 33613	84-1267604	501(C)(3)	9,000				SUPPORT OF MISSION
CHILDREN'S HOME NETWORK 10909 MEMORIAL HIGHWAY TAMPA, FL 33615	59-0696284	501(C)(3)	19,016				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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AMERICAN FRIENDS OF BEIT RUTH INC 2 JERICHO PLAZA STE 111 WING A JERICHO, NY 11753	45-5626260	501(C)(3)	1,000,000				SUPPORT OF MISSION
TAMPA BAY WATCH 3000 PINELLAS BAYWAY SOUTH TIERRA VERDE, FL 33715	59-3191962	501(C)(3)	62,743				PROJECT SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ANDREW'S GIFT PO BOX 6014 HARRISBURG, PA 17112	80-0966081	501(C)(3)	6,000				SUPPORT OF MISSION
CHRIST ANGLICAN CHURCH PO BOX 2461 CASHIERS, NC 28717	45-4942511	501(C)(3)	15,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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UNIVERSITY COMMUNITY HOSPITAL FOUNDATION 3100 EAST FLETCHER AVENUE TAMPA, FL 33613	59-2554889	501(C)(3)	16,990				PROJECT SUPPORT
BIG BROTHERS & BIG SISTERS OF TAMPA BAY INC 4630 WOODLAND CORPORATE BLVD STE 160 TAMPA, FL 33614	59-2173085	501(C)(3)	44,376				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHAPTERS HEALTH SYSTEM 12470 TELECOM PARKWAY SUITE 300 W TEMPLE TERRACE, FL 33637	59-2264957	501(C)(3)	114,887				SUPPORT OF MISSION
DAYSTAR LIFE CENTER INC 1055 28TH ST SOUTH ST PETERSBURG, FL 33712	65-0523539	501(C)(3)	11,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHRIST THE KING CATHOLIC CHURCH 821 SOUTH DALE MABRY HIGHWAY TAMPA, FL 33609	59-0966385	501(C)(3)	21,000				SUPPORT OF MISSION
HOPE INTERNATIONAL MINISTRIES 11415 HOPE INTERNATIONAL DR TAMPA, FL 33625	62-0879012	501(C)(3)	14,008				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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QUANTUM LEAP FARM INC 10401 WOODSTOCK ROAD ODESSA, FL 33556	59-3469464	501(C)(3)	30,075				SUPPORT OF MISSION
STREATOR YMCA-YWCA 710 OAKLEY AVE STREATOR, IL 61364	36-2205999	501(C)(3)	5,658				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ANSWERED PRAYERS CROSS INC 400 23RD ST S ST PETERSBURG, FL 33712	26-2577873	501(C)(3)	15,000				SUPPORT OF MISSION
APPALACHIAN REGIONAL HEALTHCARE FOUNDATION PO BOX 2600 BOONE, NC 28607	20-4625618	501(C)(3)	10,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DISABLED AMERICAN VETERANS PO BOX 14301 CINCINNATI, OH 45250	31-0263158	501(C)(3)	6,402				SUPPORT OF MISSION
MILITARY FAMILY SUPPORT TRUST 1010 AMERICAN EAGLE BLVD SUN CITY CENTER, FL 33573	59-3141377	501(C)(3)	9,460				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PARALYZED VETERANS OF AMERICA OFFICE OF INDIVIDUAL GIVING DAVID FANNING 801 18TH STREET NW WASHINGTON, DC 20006	13-1946868	501(C)(3)	6,652				SUPPORT OF MISSION
A KIDS PLACE OF TAMPA BAY 1715 LITHIA PINECREST ROAD BRANDON, FL 33511	26-2757636	501(C)(3)	19,262				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ACADEMY OF THE HOLY NAMES FOUNDATION INC 3319 BAYSHORE BLVD TAMPA, FL 33629	59-0910354	501(C)(3)	105,500				SUPPORT OF MISSION
BOYS & GIRLS CLUBS OF TAMPA BAY FOUNDATION INC 1307 N MACDILL AVENUE TAMPA, FL 33607	59-3049838	501(C)(3)	129,011				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BROOKWOOD FLORIDA INC 901 7TH AVENUE SOUTH ST PETERSBURG, FL 33705	59-0624387	501(C)(3)	20,150				SUPPORT OF MISSION
CENTRAL PARK VILLAGE YOUTH SERVICE INC 1320 EAST 9TH AVENUE TAMPA, FL 33605	59-3478148	501(C)(3)	30,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILD INC DBA BAY AREA PREGNANCY CENTER 2380 DREW STREET SUITE 6 CLEARWATER, FL 33765	59-2606601	501(C)(3)	8,000				SUPPORT OF MISSION
CHILDREN'S ATHLETIC NETWORK AND DANCE OPPORTUNITIES 301 W PLATT ST STE 317 TAMPA, FL 33606	59-3193026	501(C)(3)	5,729				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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EARLY LEARNING COALITION OF HILLSBOROUGH COUNTY 6800 N DALE MABRY HWY STE 158 TAMPA, FL 33614	59-3626765	501(C)(3)	90,000				SUPPORT OF MISSION
CHILDREN'S HOME SOCIETY OF FLORIDA 482 S KELLER ROAD 3RD FLOOR ORLANDO, FL 32810	59-0192430	501(C)(3)	21,640				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CHILDREN'S MUSEUM OF TAMPA INC 110 W GASPARILLA PLAZA TAMPA, FL 33602	59-2637851	501(C)(3)	15,320				SUPPORT OF MISSION
COMMUNITY FOUNDATION OF TAMPA BAY INC 4300 W CYPRESS ST STE 700 TAMPA, FL 33607	59-3001853	501(C)(3)	80,848				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FLORIDA STATE FAIR ANTIQUE STEAM ENGINE DISPLAY PO BOX 11766 TAMPA, FL 33680	59-0651848	501(C)(3)	6,292				SUPPORT OF MISSION
FIRST PRESBYTERIAN CHURCH 701 BEACH DRIVE NE ST PETERSBURG, FL 33701	59-0640061	501(C)(3)	8,200				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FLORIDA MUSEUM OF PHOTOGRAPHIC ART 400 NORTH ASHLEY DRIVE CUBE 200 TAMPA, FL 33602	59-3737687	501(C)(3)	27,567				SUPPORT OF MISSION
FRIENDS OF THE LIBRARY OF TAMPA HILLSBOROUGH COUNTY INC PO BOX 172608 TAMPA, FL 33672	59-6174497	501(C)(3)	22,387				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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GLOBAL REFUGE COMMUNITY CHURCH PO BOX 290263 TAMPA, FL 33687	46-2902122	501(C)(3)	13,000				SUPPORT OF MISSION
GREAT EXPLORATIONS INC 1925 4TH STREET NORTH ST PETERSBURG, FL 33704	59-2763359	501(C)(3)	12,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HYDE PARK UNITED METHODIST CHURCH 500 W PLATT STREET TAMPA, FL 33606	59-0714823	501(C)(3)	45,700				SUPPORT OF MISSION
IOWA STATE UNIVERSITY OFFICE OF STUDENT FINANCIAL AID 0210 BEARDSHEAR HALL AMES, IA 50011	42-6004224	501(C)(3)	40,700				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MOODY BIBLE INSTITUTE 820 NORTH LASALLE BLVD CHICAGO, IL 60610	36-2167792	501(C)(3)	14,831				SUPPORT OF MISSION
NEW LIFE SOLUTIONS 1910 EAST BAY DRIVE LARGO, FL 33771	59-2588366	501(C)(3)	8,382				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ARTS CENTER ASSOCIATION INC 719 CENTRAL AVE ST PETERSBURG, FL 33701	59-6163303	501(C)(3)	11,468				SUPPORT OF MISSION
FREEFALL THEATRE COMPANY 6099 CENTRAL AVENUE ST PETERSBURG, FL 33710	26-4251761	501(C)(3)	525,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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TRINITY CAFE PO BOX 8067 TAMPA, FL 33674	59-3733387	501(C)(3)	5,250				SUPPORT OF MISSION
BECKMAN RESEARCH INSTITUTE OF THE CITY OF HOPE 1500 E DUARTE RD DUARTE, CA 91010	95-3432210	501(C)(3)	250,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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UNIVERSITY OF SOUTH FLORIDA FOUNDATION INC 4202 E FOWLER AVENUE ALC 100 TAMPA, FL 34620	59-0879015	501(C)(3)	397,683				SUPPORT OF MISSION
GRACEPOINT FOUNDATION 5707 N 22ND STREET TAMPA, FL 33610	59-1622729	501(C)(3)	12,998				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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GREATER TAMPA BAY AREA COUNCIL INC 13228 N CENTRAL AVE TAMPA, FL 33612	59-0637815	501(C)(3)	9,409				SUPPORT OF MISSION
HANOVER COLLEGE 517 BALL DRIVE HANOVER, IN 47243	35-0868096	501(C)(3)	10,000				SUPPORT OF MISSION

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BEULAH BAPTIST CHURCH MF CROSS FUND 5500 LEE RD 270 VALLEY, AL 36854	63-0861752	501(C)(3)	5,900				SUPPORT OF MISSION
HYDE PARK PRESBYTERIAN CHURCH 1309 W SWANN AVENUE TAMPA, FL 33606	59-0711177	501(C)(3)	23,569				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BILL EDWARDS FOUNDATION FOR THE ARTS INC 6090 CENTRAL AVE ST PETERSBURG, FL 33707	20-0198707	501(C)(3)	37,924				SUPPORT OF MISSION
BLINKNOW FOUNDATION PO BOX 453 MENDHAM, NJ 07945	26-0819262	501(C)(3)	100,000				SUPPORT OF MISSION

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CHURCH WORLD SERVICES INC PO BOX 968 ELKHART, IN 46515	13-4080201	501(C)(3)	5,664				SUPPORT OF MISSION
BOK TOWER GARDENS INC 1151 TOWER BLVD LAKE WALES, FL 33853	23-1352009	501(C)(3)	10,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MASONIC VILLAGES OF THE GRAND LODGE OF PENNSYLVANIA 1 MASONIC DRIVE ELIZABETHTOWN, PA 17022	23-0846955	501(C)(3)	8,908				SUPPORT OF MISSION
MILITARY ORDER OF THE WORLD WARS CHAPTER 226 PO BOX 6309 SUN CITY CENTER, FL 33571	53-0109990	501(C)(3)	7,000				SUPPORT OF MISSION

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BRIDGEPOINT CHURCH INC 6690 CROSSWINDS DR N ST PETERSBURG, FL 33710	20-3480454	501(C)(3)	7,700				SUPPORT OF MISSION
BRIDGING FREEDOM INC PO BOX 18984 TAMPA, FL 33679	27-5467980	501(C)(3)	200,000				SUPPORT OF MISSION

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CALVARY LUTHERAN CHURCH 5309 US HWY 41 N APOLLO BEACH, FL 33572	59-6591854	501(C)(3)	29,766				SUPPORT OF MISSION
PLANT HIGH SCHOOL ACADEMIC FOUNDATION 2415 S HIMES AVENUE TAMPA, FL 33629	59-2348164	501(C)(3)	5,200				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PROJECT HOPE OF MARION COUNTY INC PO BOX 5548 OCALA, FL 34478	20-8657795	501(C)(3)	75,000				SUPPORT OF MISSION
CHURCH OF SCIENTOLOGY RELIGIOUS TRUST 210 SOUTH FORT HARRISON AVE CLEARWATER, FL 33756	91-6254980	501(C)(3)	8,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SALESIAN YOUTH CENTER OF TAMPA BAY 315 W COLUMBUS DRIVE TAMPA, FL 33602	53-0196617	501(C)(3)	15,000				SUPPORT OF MISSION
SENIORS IN SERVICE OF TAMPA BAY INC 1306 W SLIGH AVE TAMPA, FL 33604	59-2422975	501(C)(3)	27,745				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HILLSBOROUGH COUNTY PUBLIC SCHOOLS 2807 JOHN SHERMAN WAY RUSKIN, FL 33570	59-6000660	501(C)(3)	55,809				SUPPORT OF MISSION
HILLSBOROUGH EDUCATION FOUNDATION 2306 N HOWARD AVENUE TAMPA, FL 33607	59-2883361	501(C)(3)	14,510				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SHINING LIGHT BAPTIST CHURCH 4231 TRACKROCK GAP ROAD BLAIRSVILLE, GA 30512	68-0611938	501(C)(3)	5,662				SUPPORT OF MISSION
SHORECREST PREPARATORY SCHOOL 5101 1ST ST NE ST PETERSBURG, FL 33703	23-7412158	501(C)(3)	12,000				SUPPORT OF MISSION

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SPCA TAMPA BAY 9099 - 130TH AVENUE NORTH LARGO, FL 33773	59-0715928	501(C)(3)	5,191				SUPPORT OF MISSION
ST JOHN'S EPISCOPAL PARISH DAY SCHOOL INC 906 S ORLEANS AVE TAMPA, FL 33606	74-2986047	501(C)(3)	15,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LIGHTHOUSE OF PINELLAS INC 6925 112TH CIRCLE NORTH SUITE 103 LARGO, FL 33773	23-7042938	501(C)(3)	23,750				SUPPORT OF MISSION
CLEARWATER JAZZ HOLIDAY FOUNDATION INC PO BOX 7278 CLEARWATER, FL 33758	58-1910442	501(C)(3)	10,135				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ST JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105	62-0646012	501(C)(3)	16,779				SUPPORT OF MISSION
ST PAUL'S SCHOOL INC 1600 ST PAULS DRIVE CLEARWATER, FL 33764	59-1220745	501(C)(3)	6,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MAYO CLINIC 200 FIRST STREET SW ROCHESTER, MN 55905	59-0714831	501(C)(3)	69,969				SUPPORT OF MISSION
MINNEAPOLIS COMMUNITY KOLLEL 2930 INGLEWOOD AVENUE ST LOUIS PARK, MN 55416	41-1903600	501(C)(3)	20,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MORNING STAR TAMPA FOUNDATION INC 210 E LINEBAUGH AVE TAMPA, FL 33612	59-3363777	501(C)(3)	16,990				SUPPORT OF MISSION
CONGREGATION YESHIVA AVIR YAKOV 766 N MAIN ST SPRING VALLEY, NY 10977	13-3869199	501(C)(3)	9,236				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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STREATOR UNLIMITED INC 305 N STERLING STREET STREATOR, IL 61364	36-2558089	501(C)(3)	11,245				SUPPORT OF MISSION
COPARTNERS OF CAMPESINAS 901 SECOND ST ALEXANDRIA, VA 22314	56-1973794	501(C)(3)	15,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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TAMPA BAY PARTNERSHIP FOR REGIONAL RESEARCH & EDUCATION FDN 4300 W CYPRESS STREET SUITE 700 TAMPA, FL 33607	59-3414776	501(C)(3)	20,000				SUPPORT OF MISSION
TAMPA BAY WAVE INC 500 E KENNEDY BOULEVARD SUITE 300 TAMPA, FL 33602	27-4779851	501(C)(3)	28,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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TAMPA THEATRE INC 711 N FRANKLIN STREET TAMPA, FL 33602	59-3191311	501(C)(3)	74,413				SUPPORT OF MISSION
TAMPABAY-JOB-LINKS 1211 N WEST SHORE BLVD STE 300 TAMPA, FL 33607	27-4629468	501(C)(3)	68,050				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PINELLAS EDUCATION FOUNDATION 12090 STARKEY ROAD LARGO, FL 33773	59-2688253	501(C)(3)	7,558				SUPPORT OF MISSION
CREATIVE CLAY INC 1846 1ST AVE S ST PETERSBURG, FL 33712	59-3338595	501(C)(3)	6,769				SUPPORT OF MISSION

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CREATIVETS 401 N COUNTRY CLUB DR ADDISON, IL 60101	46-3617663	501(C)(3)	8,000				SUPPORT OF MISSION
SALESIAN YOUTH CENTER 659 BELMONT AVENUE NORTH HALEDON, NJ 07508	22-6043753	501(C)(3)	22,513				SUPPORT OF MISSION

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SALVATION ARMY SARASOTA COMMAND PO BOX 2792 SARASOTA, FL 34230	58-0660607	501(C)(3)	6,402				SUPPORT OF MISSION
THE FIRST TEE OF TAMPA BAY 7910 N 30TH STREET TAMPA, FL 33610	59-1742909	501(C)(3)	9,575				SUPPORT OF MISSION

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THE SALVATION ARMY 1625 N BELCHER RD CLEARWATER, FL 33765	58-0660607	501(C)(3)	9,107				SUPPORT OF MISSION
ST PAUL CATHOLIC CHURCH 12708 NORTH DALE MABRY HWY TAMPA, FL 33618	59-1213195	501(C)(3)	16,990				SUPPORT OF MISSION

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ST PAUL UNITED METHODIST CHURCH 1199 S HIGHLAND AVENUE LARGO, FL 33770	59-1031675	501(C)(3)	16,000				SUPPORT OF MISSION
DAILY CARDINAL ALUMNI ASSOCIATION INC 159 N MARION ST STE 182 OAK PARK, IL 60301	39-1947399	501(C)(3)	6,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ST PETERSBURG WAREHOUSE ARTS DISTRICT INC 515 22ND STREET SOUTH ST PETERSBURG, FL 33712	46-0826859	501(C)(3)	525,500				SUPPORT OF MISSION
SUN CITY CENTER SECURITY PATROL INC 1225 N PEBBLE BEACH BLVD SUN CITY CENTER, FL 33573	59-2169618	501(C)(3)	13,548				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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TEMPLE BETH-EL OF ST PETERSBURG INC 400 PASADENA AVENUE S ST PETERSBURG, FL 33707	59-0711184	501(C)(3)	9,167				SUPPORT OF MISSION
TEMPLE TERRACE FIRST BAPTIST CHURCH 10002 N 56TH ST TEMPLE TERRACE, FL 33617	59-6045682	501(C)(3)	19,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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VOICES FOR CHILDREN OF TAMPA BAY INC 3314 HENDERSON BLVD STE 207 TAMPA, FL 33609	59-2737702	501(C)(3)	11,197				SUPPORT OF MISSION
WESTMINSTER COLLEGE 319 SOUTH MARKET STREET OLD MAIN - ROOM 106 NEW WILMINGTON, PA 16172	25-0981156	501(C)(3)	17,814				SUPPORT OF MISSION

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YOUNG LIFE TAMPA URBAN 2121 131ST AVE E TAMPA, FL 33612	84-0385934	501(C)(3)	5,500				SUPPORT OF MISSION
DIRECTIONS FOR LIVING 1437 S BELCHER RD CLEARWATER, FL 33764	59-2092715	501(C)(3)	12,500				SUPPORT OF MISSION

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DMG SCHOOL PROJECT INC 2342 EMERSON AVE S ST PETERSBURG, FL 33712	46-0990960	501(C)(3)	35,000				SUPPORT OF MISSION
DUNEDIN FINE ARTS CENTER 1143 MICHIGAN BLVD DUNEDIN, FL 34698	59-1621318	501(C)(3)	12,991				SUPPORT OF MISSION

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ADAPTIVE GOLF ASSOCIATION INC 94 LAKESHORE CIRCLE NE MARIETTA, GA 30067	58-2617166	501(C)(3)	10,000				SUPPORT OF MISSION
ALBANY MEDICAL CENTER FOUNDATION 43 NEW SCOTLAND AVENUE ALBANY, NY 12208	75-2402759	501(C)(3)	8,973				SUPPORT OF MISSION

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ALICE LLOYD COLLEGE DEVELOPMENT DEPARTMENT 100 PURPOSE ROAD PIPPA PASSES, KY 41844	61-0492351	501(C)(3)	10,164				SUPPORT OF MISSION
FAMILY FIRST 5509 W GRAY ST STE 100 TAMPA, FL 33609	59-3043408	501(C)(3)	11,500				SUPPORT OF MISSION

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FARMWORKERS SELF-HELP INC 37240 LOCK ST DADE CITY, FL 33523	59-2382744	501(C)(3)	16,585				SUPPORT OF MISSION
FLORIDA A&M UNIVERSITY FOUNDATION 625 E TENNESSEE ST STE 100 TALLAHASSEE, FL 32308	59-6175096	501(C)(3)	5,485				SUPPORT OF MISSION

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AMERICAN HEART ASSOCIATION 11207 BLUE HERON BLVD N ST PETERSBURG, FL 33716	13-5613797	501(C)(3)	82,850				SUPPORT OF MISSION
FLORIDA CRAFTSMEN INC 501 CENTRAL AVE ST PETERSBURG, FL 33701	59-1643458	501(C)(3)	7,853				SUPPORT OF MISSION

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FLORIDA HOME PARTNERSHIP 201 14TH AVE SE STE H RUSKIN, FL 33570	59-3211393	501(C)(3)	10,000				SUPPORT OF MISSION
AMERICAN RED CROSS OF TAMPA BAY TAMPA BAY CHAPTER 3310 W MAIN ST TAMPA, FL 33607	53-0196605	501(C)(3)	8,466				SUPPORT OF MISSION

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FLORIDA WILDLIFE CORRIDOR PO BOX 1802 TAMPA, FL 33601	20-1822793	501(C)(3)	6,250				SUPPORT OF MISSION
AUDUBON FLORIDA 4500 BISCAYNE BLVD STE 350 MIAMI, FL 33137	13-1624102	501(C)(3)	15,000				SUPPORT OF MISSION

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FOUNDATION FOR NATIONAL PROGRESS 222 SUTTER ST STE 600 SAN FRANCISCO, CA 94108	94-2282759	501(C)(3)	31,000				SUPPORT OF MISSION
FRIENDS OF CARROLLWOOD CULTURAL CENTER 4537 LOWELL RD TAMPA, FL 33618	30-0224777	501(C)(3)	6,934				SUPPORT OF MISSION

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BIBLE BASED FELLOWSHIP CHURCH 4811 EHRlich RD TAMPA, FL 33624	65-0139765	501(C)(3)	33,000				SUPPORT OF MISSION
GATOR BOOSTERS INC PO BOX 13796 GAINESVILLE, FL 32604	59-0737883	501(C)(3)	250,000				SUPPORT OF MISSION

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GEORGETOWN UNIVERSITY GIFT ADMINISTRATION DEPT 0734 WASHINGTON, DC 20073	53-0196603	501(C)(3)	28,500				SUPPORT OF MISSION
BOYS & GIRLS CLUB OF THE SUNCOAST 4625 EAST BAY DR STE 103 CLEARWATER, FL 33764	59-1566799	501(C)(3)	10,000				SUPPORT OF MISSION

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BOYS & GIRLS CLUB OF TAMPA BAY 1307 N MACDILL AVENUE TAMPA, FL 33607	59-0624368	501(C)(3)	20,250				SUPPORT OF MISSION
BRAIN & BEHAVIOR RESEARCH FOUNDATION 747 THIRD AVENUE NEW YORK, NY 10017	31-1020010	501(C)(3)	11,500				SUPPORT OF MISSION

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GULF COAST JEWISH FAMILY AND COMMUNITY SERVICES 14041 ICOT BLVD CLEARWATER, FL 33760	59-1229354	501(C)(3)	21,350				SUPPORT OF MISSION
CITY OF ST PETERSBURG FL PO BOX 2842 ST PETERSBURG, FL 33731	59-6000424	501(C)(3)	25,000				SUPPORT OF MISSION

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CHISELERS INC 401 WEST KENNEDY BLVD BOX 103F TAMPA, FL 33606	59-6200154	501(C)(3)	5,250				SUPPORT OF MISSION
CHURCH OF SCIENTOLOGY FLAG SERVICE ORGANIZATION 503 CLEVELAND ST CLEARWATER, FL 33755	59-2143308	501(C)(3)	170,000				SUPPORT OF MISSION

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CORBETT PREPARATORY SCHOOL OF IDS INC 12015 ORANGE GROVE DRIVE TAMPA, FL 33609	59-1282306	501(C)(3)	50,000				SUPPORT OF MISSION
COMPASSION INTERNATIONAL INCORPORATED 12290 VOYAGER PARKWAY COLORADO SPINGS, CO 80921	36-2423707	501(C)(3)	8,056				SUPPORT OF MISSION

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CLEARWATER CENTRAL CATHOLIC HIGH SCHOOL 2750 HAINES BAYSHORE RD CLEARWATER, FL 33760	59-0971744	501(C)(3)	50,000				SUPPORT OF MISSION
CLEARWATER FREE CLINIC 1218 COURT ST CLEARWATER, FL 33765	59-1852871	501(C)(3)	19,593				SUPPORT OF MISSION

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DOCTORS WITHOUT BORDERS USA 40 RECTOR ST 16TH FLOOR NEW YORK, NY 10006	13-3433452	501(C)(3)	303,750				SUPPORT OF MISSION
EDIBLE PEACE PATCH PROJECT INC 233 3RD ST N STE 203 ST PETERSBURG, FL 33701	45-2807222	501(C)(3)	12,000				SUPPORT OF MISSION

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EMORY UNIVERSITY GIFT PROCESSING 1762 CLIFTON ROAD NE SUITE 1400 ATLANTA, GA 30322	58-0566256	501(C)(3)	510,250				SUPPORT OF MISSION
FIRST BAPTIST CHURCH OF PLANT CITY 503 N PALMER ST PLANT CITY, FL 33563	59-0895024	501(C)(3)	6,000				SUPPORT OF MISSION

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FLORIDA STATE UNIVERSITY FOUNDATION 325 W COLLEGE AVE TALLAHASSEE, FL 32301	59-6152180	501(C)(3)	22,000				SUPPORT OF MISSION
H LEE MOFFITT CANCER CENTER & RESEARCH INSTITUTE FOUNDATION PO BOX 23827 TAMPA, FL 33623	59-3238636	501(C)(3)	16,637				SUPPORT OF MISSION

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H LEE MOFFITT CANCER CENTER & RESEARCH INSTITUTE 12902 MAGNOLIA DR TAMPA, FL 33612	59-2451713	501(C)(3)	277,500				SUPPORT OF MISSION
HEELS TO HEAL INC 290 9TH AVE N STE M100 ST PETERSBURG, FL 33705	27-1488133	501(C)(3)	9,615				SUPPORT OF MISSION

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HILLSBOROUGH COMMUNITY COLLEGE FOUNDATION 39 COLOMBIA DR 7TH FLOOR TAMPA, FL 33606	59-1810717	501(C)(3)	20,500				SUPPORT OF MISSION
HINDU TEMPLE OF FLORIDA INC 5509 LYNN RD TAMPA, FL 33624	59-2411940	501(C)(3)	20,000				SUPPORT OF MISSION

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HOSPICE FOUNDATION OF THE FLORIDA SUNCOAST INC 5771 ROOSEVELT BLVD CLEARWATER, FL 33760	59-2252045	501(C)(3)	7,000				SUPPORT OF MISSION
HOSPICE OF THE TREASURE COAST INC 1201 SE INDIAN ST STUART, FL 34997	59-2199023	501(C)(3)	12,500				SUPPORT OF MISSION

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INTERFAITH SOCIAL ACTION COUNCIL OF SUN CITY CENTER INC PO BOX 5342 SUN CITY CENTER, FL 33571	59-2045248	501(C)(3)	5,745				SUPPORT OF MISSION
HILLSBOROUGH COUNTY SHERIFF'S OFFICE TINA SHINKOVICH GRANTS ADMINISTRATO 2008 E 8TH AVENUE TAMPA, FL 33605	59-6000665	501(C)(3)	10,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HILLSDALE BAPTIST CHURCH 6201 EHRLICH ROAD TAMPA, FL 33625	59-0971834	501(C)(3)	11,000				SUPPORT OF MISSION
INDI-ED FOUNDATION INC 230 17TH AVE NE ST PETERSBURG, FL 33704	81-1401130	501(C)(3)	10,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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INNER EXPLORER INC 430 FRANKLIN VILLAGE DR 325 FRANKLIN, MA 02038	45-2395336	501(C)(3)	20,000				SUPPORT OF MISSION
INTERNATIONAL COOPERATING MINISTRIES 1901 N ARMISTEAD AVE HAMPTON, VA 23666	54-6338714	501(C)(3)	7,511				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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JOHNS HOPKINS ALL CHILDREN'S HOSPITAL FOUNDATION PO BOX 3142 ST PETERSBURG, FL 33731	59-2481738	501(C)(3)	527,624				SUPPORT OF MISSION
JEFFERSON SCHOLARS FOUNDATION 112 CLARKE COURT CHARLOTESVILLE, NC 22903	31-1755873	501(C)(3)	60,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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KEEP ST PETE LIT PO BOX 10416 ST PETERSBURG, FL 33733	46-3441769	501(C)(3)	6,000				SUPPORT OF MISSION
KIWANIS OF SOUTHSHORE PO BOX 5753 SUN CITY CENTER, FL 33571	59-3243124	501(C)(3)	6,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LIFECARE NETWORK INC 122 N MOON AVE BRANDON, FL 33510	59-3229320	501(C)(3)	6,000				SUPPORT OF MISSION
LOVEFUTBOL 5105 CHEVY CHASE PARKWAY NW WASHINGTON, DC 20008	71-1027016	501(C)(3)	32,500				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LUTHERAN CHURCH OF THE CROSS DAY SCHOOL INC 4400 CHANCELLOR ST NE ST PETERSBURG, FL 33703	59-3295611	501(C)(3)	101,399				SUPPORT OF MISSION
MAINLY MOZART INC 404 EUCLID AVE STE 301 SAN DIEGO, CA 92114	33-0320305	501(C)(3)	6,950				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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JOHNS HOPKINS ALL CHILDREN'S HOSPITAL 501 6TH AVE S ST PETERSBURG, FL 33701	59-0683252	501(C)(3)	10,000				SUPPORT OF MISSION
JULIE WEINTRAUB'S HANDS ACROSS THE BAY INC 3800 ULMERTON ROAD CLEARWATER, FL 33762	27-1983612	501(C)(3)	18,500				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MAKE A WISH FOUNDATION 324 N DALE MABRY HWY STE 203 TAMPA, FL 33609	33-0320305	501(C)(3)	28,484				SUPPORT OF MISSION
LONG CENTER FOUNDATION INC 1501 N BELCHER ROAD 236 CLEARWATER, FL 33765	59-2702966	501(C)(3)	100,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MARQUETTE UNIVERSITY UNIVERSITY ADVANCEMENT PO BOX 1881 MILWAUKEE, WI 53201	39-0806251	501(C)(3)	10,000				SUPPORT OF MISSION
MEDAL OF HONOR CONVENTION OF TAMPA BAY PO BOX 7618 WESLEY CHAPEL, FL 33545	82-1777795	501(C)(3)	100,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MASTER THE POSSIBILITIES INC 8434 SW 80TH STREET SUITE 2 OCALA, FL 34481	46-2693153	501(C)(3)	80,000				SUPPORT OF MISSION
MERRIE-WOODE FOUNDATION 100 MERRIE-WOODE ROAD SAPPHIRE, NC 28774	62-1055955	501(C)(3)	6,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MEDICAL DEBT RESOLUTION INC 80 THEODORE FREMD AVE RYE, NY 10580	47-1442997	501(C)(3)	26,000				SUPPORT OF MISSION
NATIONAL ABORTION FEDERATION 1090 VERMONT AVE NW STE 1000 WASHINGTON, DC 20005	43-1097957	501(C)(3)	50,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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NATIONAL CHRISTIAN FOUNDATION TAMPA BAY 707 N FRANKLIN ST 800 TAMPA, FL 33602	47-3162614	501(C)(3)	1,285,943				SUPPORT OF MISSION
OLDSMAR CARES PO BOX 981 OLDSMAR, FL 34677	27-0569833	501(C)(3)	25,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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OPERATION HEAL OUR HEROES INC 108 W 17TH ST APT 10 NEW YORK, NY 10011	59-2216675	501(C)(3)	10,000				SUPPORT OF MISSION
PASCO HERNANDO STATE COLLEGE FOUNDATION INC 10230 RIDGE RD NEW PORT RICHEY, FL 34654	59-1731676	501(C)(3)	10,650				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PACE CENTER FOR GIRLS INC 7545 LITTLE RD NEW PORT RICHEY, FL 34654	59-2414492	501(C)(3)	30,000				SUPPORT OF MISSION
PARENTS & CHILDREN ADVANCE TOGETHER LITERACY MINISTRIES INC 913 NEWBERGER RD LUTZ, FL 33549	27-2313001	501(C)(3)	21,383				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PLANNED PARENTHOOD OF SOUTHWEST & CENTRAL FLORIDA 736 CENTRAL AVE SARASOTA, FL 34236	59-1274328	501(C)(3)	7,956				SUPPORT OF MISSION
PASCO EDUCATION FOUNDATION PO BOX 1248 LAND O LAKES, FL 34639	59-3048717	501(C)(3)	48,800				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PRAYER HOUSE 7935 RANCH ROAD PORT RICHEY, FL 34668	20-1451258	501(C)(3)	20,000				SUPPORT OF MISSION
PRESERVE VISION FLORIDA INC 9200 SEMINOLE BLVD SECOND FLOOR SEMINOLE, FL 33772	59-6181662	501(C)(3)	9,522				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PERFORMING ARTS CLUB OF SCC INC 1325 MISTY GREENS DR SUN CITY CENTER, FL 33573	51-0485081	501(C)(3)	6,000				SUPPORT OF MISSION
PINCKNEYVILLE MIDDLE SCHOOL 5440 WEST JONES BRIDGE RD NORCROSS, GA 30092	58-6000254	501(C)(3)	10,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PINELLAS COMMUNITY FOUNDATION 17755 US HWY 19 STE 150 CLEARWATER, FL 33764	23-7113194	501(C)(3)	31,000				SUPPORT OF MISSION
PINELLAS COUNTY URBAN LEAGUE INC 333 31ST ST N ST PETERSBURG, FL 33713	59-1665523	501(C)(3)	9,300				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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POSITIVE COACHING ALLIANCE - TAMPA BAY 1211 N WEST SHORE BLVD STE 305 TAMPA, FL 33607	77-0485946	501(C)(3)	148,100				SUPPORT OF MISSION
RAYMOND JAMES CHARITABLE ENDOWMENT FUND PO BOX 23559 ST PETERSBURG, FL 33742	59-3652538	501(C)(3)	24,092				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SALESIAN SISTERS OF TAMPA BAY ATTN TERESA ANDERSON 315 W COLUMBUS DRIVE TAMPA, FL 33602	53-0196617	501(C)(3)	8,848				SUPPORT OF MISSION
SPCA SUNCOAST 7734 CONGRESS ST NEW PORT RICHEY, FL 34653	59-1144139	501(C)(3)	11,500				SUPPORT OF MISSION

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SPECIAL OPERATIONS WARRIOR FOUNDATION PO BOX 89367 TAMPA, FL 33689	52-1183585	501(C)(3)	27,500				SUPPORT OF MISSION
ST JOSEPH'S HOSPITAL OF TAMPA FOUNDATION INC 2700 W DR MARTIN LUTHER KING JR BOULEVARD SUITE 310 TAMPA, FL 33607	59-1100828	501(C)(3)	50,761				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ST PETER CLAVER CATHOLIC SCHOOL 1401 N GOVERNOR ST TAMPA, FL 33602	53-0196617	501(C)(3)	5,871				SUPPORT OF MISSION
ST PETERSBURG CATHOLIC HIGH SCHOOL 6333 9TH AVE N ST PETERSBURG, FL 33710	59-0803197	501(C)(3)	12,025				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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STARTING RIGHT NOW INC 1212 W CASS ST TAMPA, FL 33606	26-3725699	501(C)(3)	64,450				SUPPORT OF MISSION
ST PROCOPIUS ABBEY 5601 COLLEGE RD LISLE, IL 60532	36-2169184	501(C)(3)	25,000				SUPPORT OF MISSION

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SUNCOAST VOICES FOR CHILDREN FOUNDATION INC 8550 ULMERTON RD STE 255 LARGO, FL 33771	20-1133518	501(C)(3)	7,422				SUPPORT OF MISSION
ST ANDREW'S EPISCOPAL CHURCH 509 E TWIGGS ST TAMPA, FL 33602	59-0816461	501(C)(3)	7,944				SUPPORT OF MISSION

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ST LAWRENCE CATHOLIC SCHOOL 5225 N HIMES AVE TAMPA, FL 33614	59-0875805	501(C)(3)	10,974				SUPPORT OF MISSION
ST LEO UNIVERSITY PO BOX 6665 MC 2354 ST LEO, FL 33574	59-1237047	501(C)(3)	6,200				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ST PETERSBURG OPERA COMPANY PO BOX 23827 ST PETERSBURG, FL 33731	20-8523525	501(C)(3)	10,445				SUPPORT OF MISSION
TAMPA HILLSBOROUGH ECONOMIC DEVELOPMENT CORPORATION 101 E KENNEDY BLVD STE 1750 TAMPA, FL 33602	27-1010441	501(C)(3)	10,000				SUPPORT OF MISSION

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TEACHERS COLLEGE COLUMBIA UNIVERSITY 525 W 120TH ST BOX 306 NEW YORK, NY 10027	13-1624202	501(C)(3)	37,500				SUPPORT OF MISSION
TEXAS CIVIL RIGHTS PROJECT 1405 MONTOPOLIS DR AUSTIN, TX 78741	74-1995879	501(C)(3)	50,000				SUPPORT OF MISSION

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TAMPA JEWISH COMMUNITY CENTER FEDERATION 13009 COMMUNITY CAMPUS DRIVE TAMPA, FL 33625	23-7182057	501(C)(3)	24,000				SUPPORT OF MISSION
TAMPA BAY MOBILITY ALLIANCE 1710 N 19TH ST STE 207 TAMPA, FL 33605	82-5149053	501(C)(3)	140,000				SUPPORT OF MISSION

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TALLER TREES FOUNDATION 1275 66TH ST N ST PETERSBURG, FL 33710	82-2912271	501(C)(3)	25,000				SUPPORT OF MISSION
THE CYPRESS INITIATIVE INC 913 S PARSONS AVENUE SUITE A BRANDON, FL 33511	20-8378337	501(C)(3)	187,500				SUPPORT OF MISSION

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THE FLORIDA AQUARIUM 701 CHANNELSIDE DR TAMPA, FL 33602	59-2807815	501(C)(3)	18,053				SUPPORT OF MISSION
THE GREENER SIDE HAVEN INC 3892 N LECANTO HWY BEVERLY HILLS, FL 34465	47-1759254	501(C)(3)	7,250				SUPPORT OF MISSION

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THE NATURE CONSERVANCY 4245 N FAIRFAX DR STE 100 ARLINGTON, VA 22203	53-0242652	501(C)(3)	30,766				SUPPORT OF MISSION
THE MASTER CHORALE OF TAMPA BAY 30382 USF HOLLY DRIVE TAMPA, FL 33620	59-2877120	501(C)(3)	10,504				SUPPORT OF MISSION

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THE STUDIO 620 INC 620 1ST AVE S ST PETERSBURG, FL 33701	52-2398308	501(C)(3)	61,722				SUPPORT OF MISSION
THIRD ORDER REG OF ST FRANCIS PROV OF MOST SACRED HRT OF JESUS 4518 S MANHATTAN AVE TAMPA, FL 33611	25-1064181	501(C)(3)	20,000				SUPPORT OF MISSION

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THE UNITED METHODIST CHURCH OF SUN CITY CENTER 1210 DEL WEBB BLVD W SUN CITY CENTER, FL 33573	59-2131662	501(C)(3)	24,334				SUPPORT OF MISSION
TORAH ACADEMY OF MINNEAPOLIS 2800 JOPPA AVE S ST LOUIS PARK, MN 55416	41-6007486	501(C)(3)	6,780				SUPPORT OF MISSION

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TAMPA PREPARATORY SCHOOL INC 727 W CASS STREET TAMPA, FL 33606	59-1618607	501(C)(3)	19,150				SUPPORT OF MISSION
RECOVER PINELLAS INC 11254 58TH ST N PINELLAS PARK, FL 33782	80-0626229	501(C)(3)	65,000				SUPPORT OF MISSION

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ROUND HOUSE THEATRE INC DEVELOPMENT DEPARTMENT 1 VETERANS PL SILVER SPRING, MD 20910	52-1289737	501(C)(3)	25,000				SUPPORT OF MISSION
RUTGERS UNIVERSITY FOUNDATION - CINJ 335 GEORGE ST STE 4000 LIBERTY PLAZA NEW BRUNSWICK, NJ 08901	22-7318742	501(C)(3)	250,000				SUPPORT OF MISSION

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SALVADOR DALI MUSEUM INC 1 DALI BLVD ST PETERSBURG, FL 33701	59-2015192	501(C)(3)	10,250				SUPPORT OF MISSION
SARASOTA OPERA ASSOCIATION 61 N PINEAPPLE AVE SARASOTA, FL 34236	23-7089047	501(C)(3)	23,331				SUPPORT OF MISSION

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SAVING SIGHT AND SOUND INC 624 LUZON AVE TAMPA, FL 33060	83-2120390	501(C)(3)	20,000				SUPPORT OF MISSION
SHEPHERDS VILLAGE INC 1910 E BAY DR LARGO, FL 33771	59-3096209	501(C)(3)	25,000				SUPPORT OF MISSION

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UNITED STATES ARMY RANGER ASSOCIATION INC PO BOX 52126 FORT BENNING, GA 31995	58-2002582	501(C)(3)	15,000				SUPPORT OF MISSION
UNITED WAY OF MIAMI-DADE INC 3250 SW THIRD AVE MIAMI, FL 33129	59-0830840	501(C)(3)	41,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF SOUTH FLORIDA PO BOX 864571 ORLANDO, FL 32886	59-3102112	501(C)(3)	30,000				SUPPORT OF MISSION
VANDERBILT UNIVERSITY 2301 VANDERBILT PL NASHVILLE, TN 37240	62-0476822	501(C)(3)	250,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VETERANS ALTERNATIVE INC 1750 ARCADIA RD HOLIDAY, FL 34690	47-2601144	501(C)(3)	14,000				SUPPORT OF MISSION
VETERINARY CARE FOUNDATION INC 16550 NW 46TH ST MORRISTON, FL 32668	26-1074767	501(C)(3)	6,326				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VOTO LATINO INC PO BOX 35608 WASHINGTON, DC 20033	20-1350252	501(C)(3)	50,000				SUPPORT OF MISSION
VSA FLORIDA 4202 E FOWLER AVE EDU 105 TAMPA, FL 33647	59-2758321	501(C)(3)	9,849				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEDUFLORIDA WEST COAST PUBLIC BROADCASTING 1300 N BLVD TAMPA, FL 33607	59-0840626	501(C)(3)	32,200				SUPPORT OF MISSION
WERNLE CHILDREN'S HOME INC PO BOX 1386 RICHMOND, IN 47375	35-0868957	501(C)(3)	29,766				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WILDLIFE CONSERVATION NETWORK INC 209 MISSISSIPPI ST SAN FRANCISCO, CA 94107	30-0108469	501(C)(3)	25,000				SUPPORT OF MISSION
YESHIVA GEDOLAH OF SOUTH MONSEY 260 SADDLE RIVER RD AIRMONT, NY 10952	13-3724701	501(C)(3)	10,000				SUPPORT OF MISSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YESHIVA OF MINNEAPOLIS 3115 OTTAWA AVE S ST LOUIS PARK, MN 55416	45-2697278	501(C)(3)	10,800				SUPPORT OF MISSION
YMCA OF GREATER ST PETERSBURG 600 FIRST AVE N STE 201 ST PETERSBURG, FL 33701	59-0624468	501(C)(3)	10,950				SUPPORT OF MISSION

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

2018

Open to Public Inspection

Name of the organization
COMMUNITY FOUNDATION OF TAMPA BAY INC

Employer identification number
59-3001853

Part I Questions Regarding Compensation

		Yes	No		
<p>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.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input checked="" type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) </td> </tr> </table>	<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input checked="" type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)			
<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input checked="" type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)				
<p>b If any of the boxes in 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.</p>	1b		No		
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</p>	2	Yes			
<p>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.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations </td> <td style="width: 50%; vertical-align: top;"> <input checked="" type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee </td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee			
<input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee				
<p>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:</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	4a		No		
	4b		No		
	4c		No		
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p> <p>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:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III.</p>	5a		No		
	5b		No		
<p>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:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III.</p>	6a		No		
	6b		No		
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</p>	7		No		
<p>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.</p>	8		No		
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9				

Part III Supplemental Information

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

Return Reference	Explanation
PART I, LINE 1A - BENEFITS PROVIDED TO CEO	THE FOUNDATION BOARD APPROVED PAYING THE DUES AT THE CENTRE CLUB (SOCIAL CLUB) FOR USE BY THE CEO FOR BUSINESS MEETINGS AND FOUNDATION EVENTS. THE CLUB HAS BEEN USED ONLY FOR BUSINESS PURPOSES. SHOULD PERSONAL USE OF THE CLUB ARISE, THE CEO WILL REIMBURSE THE FOUNDATION FOR SUCH CHARGES.



**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2018

▶ **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.**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
COMMUNITY FOUNDATION OF TAMPA BAY INC

Employer identification number
59-3001853

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	X	63	5,004,564	ACTIVE MARKET QUOTES
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 ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
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 is not required to be used for exempt purposes for the entire holding period?		No
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?	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		No
b If "Yes," describe in Part II		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part II Supplemental Information.

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 30B	THE COUNT REPORTED IN PART 1, LINE 10, COLUMN (B) IS THE NUMBER OF CONTRIBUTIONS RECEIVED A SINGLE CONTRIBUTION MAY HAVE CONSISTED OF MORE THAN ONE PUBLICLY TRADED SECURITY

SCHEDULE O
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2018**Open to Public Inspection**

Department of the Treasury

Name of the organization

COMMUNITY FOUNDATION OF TAMPA BAY INC

Employer identification number

59-3001853

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	ALL MEMBERS OF THE BOARD OF TRUSTEES WERE PROVIDED ACCESS TO A COMPLETE COPY OF FORM 990 VIA THE FOUNDATION'S INTRANET AND A BOARD LOG-IN PORTAL PRIOR TO FILING THE FORM THE FOUNDATION'S VICE PRESIDENT AND CHIEF FINANCIAL OFFICER PRESENTED THE FORM 990 TO A MEETING OF THE FINANCE COMMITTEE PRIOR TO FILING THE RETURN AND RESPONDED TO THE TRUSTEES' QUESTIONS THE COMMITTEE APPROVED THE RETURN AS PREPARED AND PRESENTED, AND MOVED THAT THE RETURN BE FILED

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	EVERY MEMBER OF THE BOARD OF TRUSTEES, AS WELL AS EVERY STAFF MEMBER, IS REQUIRED TO COMPLETE AND SIGN A CONFLICT OF INTEREST POLICY IT IS ALSO ON THE AGENDA FOR EACH BOARD OF TRUSTEE'S MEETING AND ANYONE WHO MIGHT HAVE A CONFLICT IS EXPECTED TO DISCLOSE THE POTENTIAL CONFLICT AND RECUSE THEMSELVES FROM VOTING

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION OF THE PRESIDENT AND CEO IS DETERMINED BY THE FOUNDATION'S EXECUTIVE COMMITTEE (AN INDEPENDENT BODY) ACTING AS THE COMPENSATION COMMITTEE THIS COMMITTEE USES COMPARABILITY DATA WHICH IS OBTAINED FROM THE FLORIDA PHILANTHROPIC NETWORK, THE COUNCIL ON FOUNDATIONS, AND FROM REVIEW OF FORM 990'S FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS SUPPORTING DOCUMENTATION IS RETAINED AND DELIBERATIONS AND DECISIONS OF THE EXECUTIVE COMMITTEE ARE DOCUMENTED IN ITS MINUTES THE PROCESS WAS LAST UNDERTAKEN IN DECEMBER 2018 COMPENSATION OF OTHER OFFICERS AND KEY EMPLOYEES IS DETERMINED BY THE PRESIDENT AND CEO BASED ON USE OF COMPARABILITY DATA OBTAINED FROM FLORIDA PHILANTHROPIC NETWORK, THE COUNCIL ON FOUNDATIONS, AND FROM REVIEW OF THE FORM 990'S FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS SUPPORTING DOCUMENTATION IS RETAINED THE PROCESS WAS LAST UNDERTAKEN DURING THE YEAR ENDED JUNE 30, 2019

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAINTAINS ITS MOST RECENT IRS FROM 990 AND AUDITED FINANCIAL STATEMENTS ON ITS WEB SITE THESE DOCUMENTS AND A LISTING OF INVESTMENT FUND MANAGERS, FOUNDATION FEE SCHEDULE, INVESTMENT COMMITTEE MEMBERS, AND INVESTMENT PERFORMANCE ARE POSTED ON THE ORGANIZATION WEBSITE THE COMMUNITY FOUNDATION NOTES IT IS NOT REQUIRED TO MAKE ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	AGENCY FUNDS EXCESS GIFTS OVER GRANTS -2,648,930 ADMINISTRATIVE FEES - AGENCY FUNDS 276,087 INVESTMENT INCOME OF AGENCY FUNDS -1,590,702

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	NEITHER THE OVERSIGHT PROCESS NOR THE SELECTION PROCESS WAS CHANGED DURING THE YEAR FOR THE AUDIT COMMITTEE

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2018

Open to Public Inspection

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
 ▶ **Attach to Form 990.**
 ▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
COMMUNITY FOUNDATION OF TAMPA BAY INC

Employer identification number

59-3001853

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) CFTB REALTY LLC 550 N REO ST SUITE 301 TAMPA, FL 33609	HOLDING REAL ESTATE	FL			COMMUNTIY FOUNDATION OF TAMPA BAY

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) CHARITABLE REMAINDER TRUSTS (6)	TRUST ADMINISTRATION	FL	COMMUNITY FOUNDATION OF TAMPA BAY	T					No
(2) CHARITABLE LEAD TRUSTS (1)	TRUST ADMINISTRATION	FL	COMMUNITY FOUNDATION OF TAMPA BAY	T					No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		No
b Gift, grant, or capital contribution to related organization(s)		No
c Gift, grant, or capital contribution from related organization(s)		No
d Loans or loan guarantees to or for related organization(s)		No
e Loans or loan guarantees by related organization(s)		No
f Dividends from related organization(s)		No
g Sale of assets to related organization(s)		No
h Purchase of assets from related organization(s)		No
i Exchange of assets with related organization(s)		No
j Lease of facilities, equipment, or other assets to related organization(s)		No
k Lease of facilities, equipment, or other assets from related organization(s)		No
l Performance of services or membership or fundraising solicitations for related organization(s)	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		No
o Sharing of paid employees with related organization(s)		No
p Reimbursement paid to related organization(s) for expenses		No
q Reimbursement paid by related organization(s) for expenses	Yes	
r Other transfer of cash or property to related organization(s)		No
s Other transfer of cash or property from related organization(s)		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation