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Form 990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2010 calendar year, or tax year beginning 01/01 , 2010, and ending 06/30 , 20 10

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization: BIG BROTHERS BIG SISTERS OF AMERICA BIG BROTHERS BIG
Doing Business As:
Number and street (or P O. box if mail is not delivered to street address): 230 North 13th Street
Room/suite:
City or town, state or country, and ZIP + 4: Philadelphia, PA 19107

D Employer identification number: 23-1365190

E Telephone number: 215-665-7728

G Gross receipts $ 6,571,278

F Name and address of principal officer: Karen Mathis
230 North 13th Street, Philadelphia, PA 19107

H(a) Is this a group return for affiliates? ☐ Yes ☑ No
H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status: ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ bbbs.org

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1977

M State of legal domicile: PA

Part I Summary

1 Briefly describe the organization's mission or most significant activities: Big Brothers Big Sisters of America (the Organization) is the nation's premier mentoring organization. The Organization's vision is that all children achieve success in life. The Organization's mission is to provide children facing adversity with strong and enduring, professionally supported 1-to-1
(Continued on Schedule O, Statement 2)

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	21
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	20
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	101
6	Total number of volunteers (estimate if necessary)	6	30
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	17,467,928	6,021,816
9	Program service revenue (Part VIII, line 2g)	0	0
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-60,792	90,195
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	881,533	459,267
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	18,288,669	6,571,278
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	7,351,910	4,105,290
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	9,889,677	4,219,898
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 959,556		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	5,934,140	4,076,182
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	23,175,727	12,401,370
19	Revenue less expenses. Subtract line 18 from line 12	-4,887,058	-5,830,092

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	22,308,896	18,413,657
21	Total liabilities (Part X, line 26)	3,122,065	5,056,918
22	Net assets or fund balances. Subtract line 21 from line 20	19,186,831	13,356,739

Part II Signature Block

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

Sign Here

Signature of officer — Date 5/10/11

Max Miller, Chief Administration Officer
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN

Firm's name ▶ | Firm's EIN ▶
Firm's address ▶ | Phone no

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

3
617

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III . . . . . ☐

1 Briefly describe the organization's mission:

Big Brothers Big Sisters of America (the Organization) is the nation's premier mentoring organization. The Organization's vision is that all children achieve success in life. The Organization's mission is to provide children facing adversity with strong and enduring, professionally supported 1-to-1 relationships that change their lives for the better, forever. The Organization and its staff partner with

(Continued on Schedule O, Statement 3)

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 exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 $ 2,643,878 including grants of $ 0) (Revenue $ 0)

Member Communications: Includes the information delivered to the agencies via conferences, meetings, and training sessions. Also BBBSA supports the local staff and board in development for further BBBSA visibility and impact.

4b (Code:) (Expenses $ 3,493,578 including grants of $ 2,052,645) (Revenue $ 0)

Program Development: BBBSA works with agencies to develop programs and tools for agency use. This category also includes a learning and support function.

4c (Code:) (Expenses $ 4,553,499 including grants of $ 2,052,645) (Revenue $ 0)

Field Services: This category includes grants to agencies. Also includes field-based staff that engaged in direct category includes grants to agencies. Also includes field-based staff that engaged in direct support to the agencies.

4d Other program services. (Describe in Schedule O.)
(Expenses $ 0 including grants of $ 0) (Revenue $ 0)

4e **Total program service expenses** ▶ 10,690,955

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	✓	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		✓
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		✓
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		✓
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		✓
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	✓	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	✓	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		✓
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		✓
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		✓
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		✓
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a		✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b	✓	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		✓
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Parts I and IV*	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Parts II and IV*	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Parts III and IV*	16		✓
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (see instructions)*	17		✓
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		✓
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		✓
20 a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		✓
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	✓	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	✓	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25*	24a		✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		✓
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions).			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		✓
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		✓
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	✓	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		✓
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34		✓
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		✓
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* ☐ Yes ☑ No			
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	✓	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . . ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		✓	
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	101		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		✓	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file.* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a			✓
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			✓
b	If "Yes," enter the name of the foreign country: ▶ ---------- See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .	5a			✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			✓
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?	6a		✓	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		✓	
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a			✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f			✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			✓
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		✓	
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?	9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . .	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?	13a			
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			✓
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* .	14b			

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

Check if Schedule O contains a response to any question in this Part VI . . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year .	1a	21		
b	Enter the number of voting members included in line 1a, above, who are independent .	1b	20		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . .		3		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .		5		✓
6	Does the organization have members or stockholders?		6		✓
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a		✓
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.				
a	The governing body?		8a	✓	
b	Each committee with authority to act on behalf of the governing body?		8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		9		✓

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ See Schedule O, Statement 4

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

☑ Own website ☐ Another's website ☑ Upon request

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ Big Brothers Big Sisters of America, (215)567-7000

230 North 13th Street, Philadelphia, PA 19107

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

Check if Schedule O contains a response to any question in this Part VII . . . . . ☐

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Angelakis Michael Board Director	2	✓						0	0	0
(2) Benz Treuille Beverly Board Director	2	✓						0	0	0
(3) Bilney Jody Board Director	2	✓						0	0	0
(4) Bracken Frank Board Director	2	✓						0	0	0
(5) Hanna William Board Director	2	✓						0	0	0
(6) William Hybl Board Director	2	✓						0	0	0
(7) Jackson Brian Board Director	2	✓						0	0	0
(8) OBrien James Board Director	2	✓						0	0	0
(9) Rubacha Frances Board Director	2	✓						0	0	0
(10) Rudner Edward Board Director	2	✓						0	0	0
(11) Schwartz Steven Board Director	2	✓						0	0	0
(12) Singleton James Board Director	2	✓						0	0	0
(13) Smith Liz Board Director	2	✓						0	0	0
(14) Snow Kate Board Director	2	✓						0	0	0
(15) Swann Lynn Board Director	2	✓						0	0	0
(16) Taylor Robert Board Director	2	✓						0	0	0

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(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			
(17) Vigil Fernando Board Director	2	✓						0	0	0
(18) Wood Robert Board Director	2	✓						0	0	0
(19) Warren Kevin Board Director	2	✓						0	0	0
(20) Page Greg Board Chair	4			✓				0	0	0
(21) Mathis Karen President/CEO	50			✓	✓	✓		375,000	0	24,518
(22) Max Miller Chief Administrative Officer and General Counsel	50			✓	✓			87,980	0	0
(23) Koonce Stanley Exe VP/COO	50				✓			246,090	0	28,927
(24) Mesko Cindy VP Agency Development	50				✓			171,125	0	23,153
(25) Booth Nick VP Philanthropy	50				✓		✓	150,606	0	14,738
(26) Lewis Michael VP Finance	50				✓		✓	163,296	0	4,827
(27) Radelet Joseph VP Mentoring	50				✓		✓	134,447	0	6,048
(28) Continued On Schedule J2										
1b Sub-total ▶								1,328,544	0	102,211
c Total from continuation sheets to Part VII, Section A ▶								305,258	0	25,999
d Total (add lines 1b and 1c) ▶								1,633,802	0	128,210

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

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
Verizon Business, PO BOX 631763, Baltimore, MD 21263-1763	Computer Consulting	158,829
THE ADVERTISING COUNCIL INC, 261 MADISON AVENUE, New York, NY 10016-2303	Advertising	234,335

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

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a 0				
	b	Membership dues	1b 1,406,693				
	c	Fundraising events	1c 0				
	d	Related organizations	1d 0				
	e	Government grants (contributions)	1e 0				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 4,615,123				
	g	Noncash contributions included in lines 1a-1f $ 1,751,310					
	h	**Total.** Add lines 1a–1f ▶		6,021,816			
Program Service Revenue			Business Code				
	2a						
	b						
	c						
	d						
	e						
	f	All other program service revenue		0	0	0	0
	g	**Total.** Add lines 2a–2f ▶		0			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		90,195	90,195	0	0
	4	Income from investment of tax-exempt bond proceeds ▶		0	0	0	0
	5	Royalties ▶		0	0	0	0
			(i) Real / (ii) Personal				
	6a	Gross Rents					
	b	Less: rental expenses					
	c	Rental income or (loss)	0 / 0				
	d	Net rental income or (loss) ▶					
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory					
	b	Less cost or other basis and sales expenses					
	c	Gain or (loss)	0 / 0				
	d	Net gain or (loss) ▶					
	8a	Gross income from fundraising events (not including $ 0 of contributions reported on line 1c). See Part IV, line 18 a					
	b	Less: direct expenses b					
	c	Net income or (loss) from fundraising events ▶					
	9a	Gross income from gaming activities. See Part IV, line 19 a					
	b	Less: direct expenses b					
	c	Net income or (loss) from gaming activities ▶					
	10a	Gross sales of inventory, less returns and allowances a					
	b	Less: cost of goods sold b					
	c	Net income or (loss) from sales of inventory ▶					
	Miscellaneous Revenue		Business Code				
	11a	National Conference Revenue	900099	66,972	66,972	0	0
	b	AIM Web Server Hosting Fee Revenue	900099	392,295	392,295	0	0
	c						
	d	All other revenue		0	0	0	0
	e	**Total.** Add lines 11a–11d ▶		459,267			
	12	**Total revenue.** See instructions. ▶		6,571,278	549,462	0	0

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	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 governments and organizations in the U.S. See Part IV, line 21	4,105,290	4,105,290		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	913,582	730,866	45,679	137,037
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	3,306,316	2,636,110	188,506	481,700
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
a	Management	2,582,650	1,996,575	421,238	164,837
b	Legal				
c	Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	78,746	62,830	4,370	11,546
13	Office expenses	143,833	114,762	7,982	21,089
14	Information technology				
15	Royalties				
16	Occupancy	355,219	283,423	19,713	52,083
17	Travel	754,463	632,424	54,421	67,618
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	43,803	34,949	2,431	6,423
23	Insurance	76,859	61,325	4,265	11,269
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a	Leases	40,609	32,401	2,254	5,954
b					
c					
d					
e					
f	All other expenses				
25	**Total functional expenses.** Add lines 1 through 24f	12,401,370	10,690,955	750,859	959,556
26	**Joint costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing	11,786,301	1	3,821,020
	2	Savings and temporary cash investments		2	5,663,842
	3	Pledges and grants receivable, net	9,570,489	3	6,907,191
	4	Accounts receivable, net	362,989	4	1,415,615
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	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)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	112,211	9	142,975
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 794,276			
	b	Less: accumulated depreciation — 10b: 331,262	476,906	10c	463,014
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11	0	12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	22,308,896	16	18,413,657
Liabilities	17	Accounts payable and accrued expenses	780,719	17	805,495
	18	Grants payable	2,341,346	18	2,360,469
	19	Deferred revenue		19	1,890,954
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	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. Complete Part X of Schedule D	0	25	
	26	**Total liabilities.** Add lines 17 through 25	3,122,065	26	5,056,918
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	3,332,943	27	1,509,117
	28	Temporarily restricted net assets	15,609,944	28	11,603,678
	29	Permanently restricted net assets	243,944	29	243,944
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	19,186,831	33	13,356,739
	34	Total liabilities and net assets/fund balances	22,308,896	34	18,413,657

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI . . . . . ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,571,278
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,401,370
3	Revenue less expenses. Subtract line 2 from line 1	3	-5,830,092
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	19,186,831
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	13,356,739

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . . ☐

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

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization	Employer identification number
BIG BROTHERS BIG SISTERS OF AMERICA BIG BROTHERS BIG SISTERS OF AMERICA	23-1365190

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 11, 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.)

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 organization that normally receives: (1) more than 33⅓% 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 33⅓% 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.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ 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 that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I **b** ☐ Type II **c** ☐ Type III–Functionally integrated **d** ☐ Type III–Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box . . . . . ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)		
(ii) A family member of a person described in (i) above?	11g(ii)		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants ")	27,118,058	26,407,355	32,304,216	17,467,928	6,021,816	109,319,373
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4 **Total.** Add lines 1 through 3	27,118,058	26,407,355	32,304,216	17,467,928	6,021,816	109,319,373
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4.						109,319,373

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	27,118,058	26,407,355	32,304,216	17,467,928	6,021,816	109,319,373
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	39,071	382,897	-448,022	-60,792	90,195	3,349
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	324,958	643,956	843,580	881,533	459,267	3,153,294
11 **Total support.** Add lines 7 through 10						112,476,016

12 Gross receipts from related activities, etc (see instructions) 12 0

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 2010 (line 6, column (f) divided by line 11, column (f)) . . . . 14 97.19 %

15 Public support percentage from 2009 Schedule A, Part II, line 14 . . . . . 15 97.7 %

16a **33 1/3% support test—2010.** 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—2009.** 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—2010.** 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 IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization . . . . . ▶ ☐

b **10%-facts-and-circumstances test—2009.** 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 IV 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 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 IV.)						
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 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2010** (line 10c, column (f) divided by line 13, column (f)) . . .	17	%
18	Investment income percentage from **2009** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests—2010.** 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—2009.** 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 **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

General Explanation - Other income in 2010 includes National Conference Registration $66,972 and Agency Information Management System Hosting Fees of $392,295.

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization	Employer identification number
BIG BROTHERS BIG SISTERS OF AMERICA BIG BROTHERS BIG SISTERS OF AMERICA	23-1365190

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

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

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

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

Part II Conservation Easements. Complete if the organization answered "Yes" to 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 Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, 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, and enforcing conservation easements during the year ▶ ----------

7 Amount of expenses incurred in monitoring, inspecting, 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 XIV, 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" to 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 XIV, 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) Revenues included in 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 Revenues included in 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 XIV.

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" to 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 XIV and complete the following table:

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

2a Did the organization include an amount on Form 990, Part X, line 21? . . . ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to 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	243,944	243,700	240,842		
b Contributions	0	0	0		
c Net investment earnings, gains, and losses	0	244	2,858		
d Grants or scholarships	0	0	0		
e Other expenditures for facilities and programs	0	0	0		
f Administrative expenses	0	0	0		
g End of year balance	243,944	243,944	243,700		

2 Provide the estimated percentage of the year end balance held as:

a Board designated or quasi-endowment ▶ 0 %
b Permanent endowment ▶ 100 %
c Term endowment ▶ 0 %

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

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

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

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	0		0
b Buildings	0	0	0	0
c Leasehold improvements	412,791	0	95,677	317,114
d Equipment	381,485	0	235,585	145,900
e Other	0	0	0	0
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				463,014

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

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

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13.)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

	(a) Description	(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* ▶		

Part X Other Liabilities. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Amount
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25.)* ▶		

2. FIN 48 (ASC 740) Footnote. In Part XIV, 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).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	6,571,278
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	12,401,370
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-5,830,092
4	Net unrealized gains (losses) on investments	4	0
5	Donated services and use of facilities	5	187,854
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV.)	8	0
9	Total adjustments (net). Add lines 4 through 8	9	187,854
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-5,642,238

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	6,571,278
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a	0		
b	Donated services and use of facilities	2b	0		
c	Recoveries of prior year grants	2c	0		
d	Other (Describe in Part XIV.)	2d	0		
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	6,571,278
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	0		
b	Other (Describe in Part XIV.)	4b	0		
c	Add lines **4a** and **4b**			4c	0
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12)*			5	6,571,278

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	12,401,370
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	0		
b	Prior year adjustments	2b	0		
c	Other losses	2c	0		
d	Other (Describe in Part XIV.)	2d	0		
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	12,401,370
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	0		
b	Other (Describe in Part XIV.)	4b	0		
c	Add lines **4a** and **4b**			4c	0
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	12,401,370

Part XIV Supplemental Information

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D, Part V, Line 4 - Annual Agency Staff Awards.

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization

BIG BROTHERS BIG SISTERS OF AMERICA BIG BROTHERS BIG SISTERS OF AMERICA

Employer identification number

23-1365190

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 Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed . . . ▶ ☐

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

2 Enter total number of section 501(c)(3) and government organizations . . . ▶ 54

3 Enter total number of other organizations . . . ▶ 0

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to 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 non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2						
3						
4						
5						
6						
7						

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Schedule I, Part I, Line 2 - To be considered, local affiliated agencies must apply for the grants that we offer. If the agency is selected to receive a grant they must complete and sign a memorandum of understanding which provides specific grant requirements.

BIG BROTHERS BIG SISTERS OF AMERICA
23-1365190

Description of Grants and Other Assistance to Governments and Organizations in the United States

		Amount of cash grant	Amount of non-cash assistance
Name and address	BBBS of Broward County 4101 Ravenswood Road Suite 226 Fort Lauderdale, FL 33312	13,799	0
EIN	59-1507595		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of St Lucie County Inc 125 North 2nd Street Fort Pierce, FL 34950	5,019	0
EIN	59-2455513		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Northeast Florida 3100 University Blvd 120 Jacksonville, FL 32216	23,186	0
EIN	59-0683256		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Greater Miami Plaza 701 SW 27th Ave Suite 800 Miami, FL 33135	23,265	0
EIN	65-0639541		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Northwest Florida 1149 Cneghton Rd Ste 1 Pensacola, FL 32504	10,325	0
EIN	59-2996893		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Metro Atlanta 100 Edgewood Ave 710 Atlanta, GA 30303	41,005	0
EIN	58-0861895		
IRC code section	501©(3)		
Method of valuation			
Description of non-			

cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of the Chattahoochee Valley PO Box 1825 Columbus, GA 31902	12,099	0
EIN	58-0828094		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Honolulu Inc 418 Kuwili Street Suite 106 Honolulu, HI 96817	26,882	0
EIN	99-0109970		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Siouxland 3650 Glen Oaks Blvd Sioux City, IA 51104	20,000	0
EIN	42-1121154		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Southwestern Illinois 6400 West Main Suite 1G Belleville, IL 62223	15,245	0
EIN	37-1095468		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Metro Chicago 560 W Lake Street 5th Floor Chicago, IL 60661	26,556	0
EIN	36-2681212		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	Kansas BBBS Inc 310 E 2nd Street Wichita, KS 67202	24,825	0
EIN	23-7056717		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Massachusetts Bay	25,000	0

	75 Federal Street 8th Floor Boston, MA 02110		
EIN	04-2074462		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BS Association of Grtr Boston 161 Massachusetts Ave 2nd Floor Boston, MA 02115	10,000	0
EIN	04-2150651		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Central Maryland Inc 3600 Clipper Mill Road 250 Baltimore, MD 21211	62,101	0
EIN	52-0631265		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of the National Capital Area 10210 Greenbelt Road Suite 900 Lanham, MD 21211	8,409	0
EIN	53-0190849		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS Twin Cities 2550 University Avenue Suite 410N St Paul, MN 55114	121,482	0
EIN	32-0017737		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Mississippi 175 E Capitol Str Suite 222 Jackson, MS 39201	36,500	0
EIN	64-0930671		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Yellowstone Cty 504 B North 20th St Billings, MT 59101	19,200	0
EIN	23-7451775		

IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Great Falls 18 Sixth Street North Suite 26 Great Falls, MT 59401	14,200	0
EIN	51-0187877		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Lake County PO Box 12 Ronan, MT 59864	19,745	0
EIN	81-0362546		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Grtr Charlotte 3801 E Indepencence Boulevard Charlotte, NC 28205	25,402	0
EIN	56-2264009		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Triangle 1001 Navaho Drive GL 150 Raleigh, NC 27609	14,900	0
EIN	56-2109717		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Monmouth County Inc 174 Main Street Eatown, NJ 07724	10,503	0
EIN	22-2115416		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Essex Hudson 494 Broad Street Suite 103 Newark, NJ 07102	7,500	0
EIN	22-3676931		
IRC code section	501©(3)		
Method of valuation			
Description of non-			

cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Morris Bergen 1259 Rt 46 East Bldg 3 Parsippany, NJ 07054	5,798	0
EIN	11-3675554		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of C New Mexico 5400 Phoenix NE Suite 200 Albuquerque, NM 87110	167,529	0
EIN	85-0271207		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS San Juan County 4800 College Blvd Suite 104 Farmington, NM 87402	79,007	0
EIN	85-0295346		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of SW New Mexico PO Box 15091 Las Cruces, NM 88005	11,000	0
EIN	85-0347573		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of N New Mexico 1229 St Francis Drive Suite C Santa Fe, NM 87505	45,589	0
EIN	85-0276498		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS Northern Nevada 495 Apple Street Ste 104 Reno, NV 89502	25,000	0
EIN	11-2422452		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of the Capital Region Inc	20,000	0

	1492 Central Ave Albany, NY 12205		
EIN	23-2260248		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	Be A Friend Program Inc 85 River Rock Drive Suite 107 Buffalo, NY 14207	31,242	0
EIN	16-1106399		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Long Island Inc 70 Acorn Lane Levittown, NY 11756	9,606	0
EIN	13-5600383		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of New York City Inc 223 East 30th Street New York, NY 10016	31,184	0
EIN	16-0997229		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Greater Cleveland 1422 Euclid Ave 552 Cleveland, OH 44115	15,411	0
EIN	34-1039700		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Oklahoma 5840 S Memorial Drive Suite 105 Tulsa, OK 74145	85,000	0
EIN	73-1226237		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Central Oregon 2125 NE Daggett Lane Bend, OR 97701	14,550	0
EIN	93-0677650		

IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Columbia NW 1827 NE 44th Avenue Suite 100 Portland, OR 97213	73,750	0
EIN	93-1303640		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS Southeastern Pennsylvania 123 South Broad Street Suite 2180 Philadelphia, PA 19109	20,951	0
EIN	23-1352034		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Greater Pittsburgh Inc 5989 Penn Circle South Pittsburgh, PA 15206	12,788	0
EIN	25-6074707		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Upstate 620 N Main St 102 Greenville, SC 29601	12,000	0
EIN	20-4243553		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Carolina Youth 5055 Lackawanna Boulevard North Charleston, SC 29405	12,033	0
EIN	57-0669877		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Black Hills 425 Kansas City Street Rapid City, SD 57701	10,000	0
EIN	46-0282706		
IRC code section	501©(3)		
Method of valuation			
Description of non-			

cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Tennessee Valley Inc 4928 Homberg Drive Suite B13 Knoxville, TN 37919	6,350	0
EIN	62-0842531		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Central Texas 1400 Tillery Street Austin, TX 78721	12,451	0
EIN	74-1678586		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Grtr Houston 6437 High Star Drive Houston, TX 77074	35,585	0
EIN	74-1148915		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of North Texas 450 E John Carpenter Freeway Irving, TX 75062	111,096	0
EIN	75-0800632		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS OF SOUTH TEXAS 202 Baltimore San Antonio, TX 78215	26,725	0
EIN	74-1897630		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Utah Inc 151 East 5600 So Suite 200 Murray, UT 84107	34,545	0
EIN	87-0336168		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Southwest Washington	34,378	0

	1802 Black Lake Blvd 102 Olympia, WA 98512		
EIN	91-1225443		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Puget Sound 1600 South Graham Street Seattle, WA 98108	60,189	0
EIN	91-0673185		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Greater Williamsburg 1707 Main Street 438 La Crosse, WI 54601	35,728	0
EIN	39-1762460		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		
Name and address	BBBS of Metro Milwaukee Inc 788 N Jefferson St Ste 600 Milwaukee, WI 53202	15,179	0
EIN	39-1239687		
IRC code section	501©(3)		
Method of valuation			
Description of non-cash assistance			
Purpose of grant	Capcity Building		

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" to Form 990, Part IV, line 23.**
▶ **Attach to Form 990.** ▶ **See separate instructions.**

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization

BIG BROTHERS BIG SISTERS OF AMERICA BIG BROTHERS BIG SISTERS OF AMERICA

Employer identification number

23-1365190

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☐ First-class or charter travel	☐ Housing allowance or residence for personal use		
	☐ Travel for companions	☐ Payments for business use of personal residence		
	☐ Tax indemnification and gross-up payments	☐ Health or social club dues or initiation fees		
	☐ Discretionary spending account	☐ Personal services (e.g., maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply.			
	☑ Compensation committee	☐ Written employment contract		
	☐ Independent compensation consultant	☑ Compensation survey or study		
	☐ Form 990 of other organizations	☑ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a		✓
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		✓
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		✓
	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	5a		✓
b	Any related organization?	5b		✓
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	6a		✓
b	Any related organization?	6b		✓
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		✓
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		✓
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

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

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

Note. The sum of columns (B)(i)–(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
Mathis Karen	(i)	325,000	50,000	0	0	24,518	399,518	124,500
1	(ii)	0	0	0	0	0	0	0
Koonce Stanley	(i)	246,090	0	0	0	28,927	275,017	275,041
2	(ii)	0	0	0	0	0	0	0
Max Miller	(i)	87,980	0	0	0	0	87,980	0
3	(ii)	0	0	0	0	0	0	0
Mesko Cindy	(i)	171,125	0	0	0	23,153	194,278	166,240
4	(ii)	0	0	0	0	0	0	0
Zeiger Stuart	(i)	94,346	0	0	0	6,118	100,464	170,424
5	(ii)	0	0	0	0	0	0	
Booth Nick	(i)	150,606	0	0	0	14,738	165,344	210,779
6	(ii)	0	0	0	0	0	0	0
Lewis Michael	(i)	163,296	0	0	0	4,827	168,123	191,867
7	(ii)	0	0	0	0	0	0	0
Radelet Joseph	(i)	134,447	0	0	0	6,048	140,495	182,722
8	(ii)	0	0	0	0	0	0	0
Maguire Diane	(i)	138,659	0	0	0	16,369	155,028	166,328
9	(ii)	0	0	0	0	0	0	0
Keenan Kay	(i)	72,253	0	0	0	2,750	75,003	172,679
10	(ii)	0	0	0	0	0	0	0
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Part III Supplemental Information

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

SCHEDULE J-2 (Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the Organization

BIG BROTHERS BIG SISTERS OF AMERICA BIG BROTHERS BIG SISTERS OF AMI

Employer identification number

23 1365190

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(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			
Maguire Diane VP Human Resources	50				✓		✓	138,659	0	16,369
Keenan Kay VP Marketing & Communications	50				✓		✓	72,253	0	3,512
Zeiger Stuart VP Information Technology	50				✓		✓	94,346	0	6,118

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.

OMB No 1545-0047

2010

Open To Public Inspection

Name of the organization

BIG BROTHERS BIG SISTERS OF AMERICA BIG BROTHERS BIG SISTERS OF AMERICA

Employer identification number

23-1365190

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art—Works of art				
2	Art—Historical treasures				
3	Art—Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities—Publicly traded				
10	Securities—Closely held stock				
11	Securities—Partnership, LLC, or trust interests				
12	Securities—Miscellaneous				
13	Qualified conservation contribution—Historic structures				
14	Qualified conservation contribution—Other				
15	Real estate—Residential				
16	Real estate—Commercial				
17	Real estate—Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (Donated Legal Serive)	✓	10	187,854	Fair Market Value
26	Other ▶ (Donated Advertising)	✓	15	1,563,456	Fair Market Value
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 0

		Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 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? 30a		✓
b	If "Yes," describe the arrangement in Part II.		
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31		✓
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a		✓
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.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization	Employer identification number
BIG BROTHERS BIG SISTERS OF AMERICA BIG BROTHERS BIG SISTERS OF AMERICA	23-1365190

Form 990, Header, Line A - Changed fiscal year to June 30.

Form 990, Part VI, Section B, Line 11a - The IRS Form 990 is reviewed by the CEO and Chief Administration Officer. The document is also shared with our external auditors

Form 990, Part VI, Section B, Line 12c - Our officers, directors, and key employees must complete conflict of interest document annually listing all of their external relations with other companies and organizations. They must also disclose and resolve potential conflicts that occu throughout the year.

Form 990, Part VI, Section B, Line 15 - Regarding the process for determing CEO compensation, the Board's Human Resource and Compensation Committee reviews the comparability data and seeks independent objective input.

Form 990, Part VI, Section C, Line 19 - The organization makes its governing documents, conflict of interest policy, and financial statements available to the public upon request. The financial statements are also available on our website at bbbs.org.

Activity Or Mission Description

Description

relationships that change their lives for the better, forever The Organization and its staff partner with parents/guardians, volunteers and other in the community and holds itself accountable for each child in the program achieving * Higher aspirations, greater confidence, and better relationships * Avoidance of risky behaviors * Educational success The Organization works closely with Big Brothers Big Sisters agencies ("local affiliates" or "affiliated agencies") throughout the country to implement its programs These agencies are separate legal entities which are not controlled by the Organization, and are therefore not consolidated within the Organization's financial statements

Mission Description

Description

parents/guardians, volunteers and other in the community and holds itself accountable for each child in the program achieving * Higher aspirations, greater confidence, and better relationships * Avoidance of risky behaviors * Educational success The Organization works closely with Big Brothers Big Sisters agencies ("local affiliates" or "affiliated agencies") throughout the country to implement its programs These agencies are separate legal entities which are not controlled by the Organization, and are therefore not consolidated within the Organization's financial statements

States Where Copy Of Return Is Filed

States
AL
CT
FL
GA
IL
IN
KY
MA
MD
ME
MN
NC
NH
NJ
NY
OH
OR
PA
RI
SC
TN
UT
VA
WA
WI