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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

▶ Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

Open to Public Inspection

			endar year, or tax year beginning 05-01-2013 , 2013, and ending 04-3 C Name of organization	80-2014	D Emplo	vor iden	tification number			
	eck if ap Tress ch	pplicable lange	ORANGE BOWL COMMITTEE INC			84382	incation number			
┌ Nar	me char	nge	Doing Business As		39-03	04302				
_	ıal retur mınateo		Number and street (or P O box if mail is not delivered to street address) Room/su 14360 NW 77TH COURT	ııte	E Telepho					
_	ended r		City or town, state or province, country, and ZIP or foreign postal code MIAMI LAKES, FL 33016		(305)	341-47				
App	lication	pending					18,233,460			
			F Name and address of principal officer ERIC L POMS		Is this a group subordinates?	return f	or □ Yes 🔽 No			
			14360 NW 77TH COURT MIAMI LAKES,FL 33016	н(ь)	Are all subordı	nates	┌ Yes ┌ No			
					ıncluded?					
		pt status	✓ 501(c)(3)	1	If "No," attach	a list (see instructions)			
			W ORANGEBOWL ORG	H(c)	Group exempt	on num	ber ►			
	n of org rt I		Corporation Trust Association Other ► mary	L Yea	r of formation 19	71 M 9	itate of legal domicile FL			
Га			escribe the organization's mission or most significant activities							
s & Governance	Y T Y I	YOUTH A THE MET YOUTH I INTERNA CLASSIC CREATI	'S PREMIER COLLEGE FOOTBALL GAMES, TO INCLUDE A FESTIVAND IMPROVE LIFE IN THE SOUTH FLORIDA COMMUNITY ORAN FROPCS ORANGE BOWL BASKETBALL CLASSIC, ORANGE BOWL YOU FOOTBALL CHAMPIONSHIPS, ORANGE BOWL CHEER & DANCE CHATIONAL YOUTH REGATTA, ORANGE BOWL INTERNATIONAL TENCY, ORANGE BOWL PADDLE CHAMPIONSHIP, ORANGE BOWL LACR VE ART CONTEST THE ORGANIZATION ALSO PROVIDES FUNDING EMENTS THAT BENEFIT SOUTH FLORIDA'S YOUTH	GE BOW OUTH FO HAMPIOI NNIS CH OSSE CI	L PROGRAMS DOTBALL ALLI NSHIPS, ORAN AMPIONSHIP _ASSIC, AND	AND E\ ANCE, IGE BO S, ORAI THE OR	/ENTS INCLUDE ORANGE BOWL WL NGE BOWL SWIM ANGE BOWL			
Activities &	2 0	Check th	is box 🔭 if the organization discontinued its operations or disposed o	of more t	han 25% of its	net ass	ets			
ACT	3 1	Number	of voting members of the governing body (Part VI, line 1a)			3	25			
-			of independent voting members of the governing body (Part VI, line 1b)			4	25			
			mber of individuals employed in calendar year 2013 (Part V, line 2a)			5	84			
			mber of volunteers (estimate if necessary)			6	590			
	I		related business revenue from Part VIII, column (C), line 12 lated business taxable income from Form 990-T, line 34			7a 7b	0			
					Prior Year		Current Year			
a)	8		butions and grants (Part VIII, line 1h)		1,042,7		541,765			
Revenue	9 10		m service revenue (Part VIII, line 2g)		49,786,4		16,498,305			
ž	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,404,5	0	0			
	12		evenue—add lines 8 through 11 (must equal Part VIII, column (A), lin	e	52,233,7	28.2	18,233,460			
	13		and similar amounts paid (Part IX, column (A), lines 1-3)		2,355,9	_	1,882,535			
	14		ts paid to or for members (Part IX, column (A), line 4)		, ,	0	0			
SQ.	15	Salarıe 5–10)	es, other compensation, employee benefits (Part IX, column (A), lines		4,456,9	75	4,006,382			
Expenses	16a	•	sional fundraising fees (Part IX, column (A), line 11e)		, ,	0	0			
ਨੂੰ	ь	Total fu	ndraising expenses (Part IX, column (D), line 25) 🕨							
	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	•	31,190,6	_	12,756,714			
	18 19		expenses Add lines 13-17 (must equal Part IX, column (A), line 25) ue less expenses Subtract line 18 from line 12		38,003,5 14,230,2	_	18,645,631			
8 QK				_	inning of Curre		End of Year			
4.02					52,607,8		EE 0E0 020			
88.2	20	Total a	assets (Part X, line 16)							
det Ass und Ba	21	T otal I	iabilities (Part X, line 26)		3,067,3	302	55,050,938 3,266,157			
	21 22	Total I Net as	sets or fund balances Subtract line 21 from line 20			302				
Par Unde my kr prepa	21 22 T III r pena nowled rer ha	Total I Net as Sign Office of place and best any kreen services and best an	sets or fund balances Subtract line 21 from line 20	nying sch	3,067,3 49,540,5 edules and sta	302 379 tements	3,266,157 51,784,781 s, and to the best of			
Par Unde my kr prepa	21 22 T III r pena nowled rer ha	Total I Net as Sign Ilties of place and be any kr **** Signa ERIC Type	sets or fund balances Subtract line 21 from line 20	nying sch han office	3,067,3 49,540,5 edules and sta er) is based on 2015-03-10 Date	tements	3,266,157 51,784,781 s, and to the best of mation of which			
Pal Unde my kr prepa Sign Here	21 22 r pena nowled rer ha	Total I Net as Sign Ilties of place and kers s any kers ERIC Type P G	sets or fund balances Subtract line 21 from line 20	nying sch han office	3,067,3 49,540,5 edules and sta er) is based on 2015-03-10 Date	tements all infor	3,266,157 51,784,781 s, and to the best of mation of which			
Sign Here	21 22 r pena nowled rer ha	Total I Net as Sign Iltres of page and bas any kr ***** Signa ERIC Type P G F	sets or fund balances Subtract line 21 from line 20 ature Block Derjury, I declare that I have examined this return, including accompanielief, it is true, correct, and complete Declaration of preparer (other thowledge ** ture of officer L POMS CHIEF EXECUTIVE OFFICER or print name and title Inti/Type preparer's name EEOFFREY ADAMS Preparer's signature EEOFFREY ADAMS	nying sch han office	3,067,3 49,540,5 edules and sta er) is based on 2015-03-10 Date Check firself-employed	902 579 tements all infor PTIN P005410	3,266,157 51,784,781 6, and to the best of mation of which			

	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								r age .
Par	: 1111		_	rvice Accomp		s Part III .			٦
1	Brief	ly describe the org	anızatıon's mıss	sion					
		GE BOWL COMMI HAT ENHANCE TH					SUPPORT AND P	RODUCE A	CTIVITIES AND
2	the pi	ne organization und rior Form 990 or 99	90-EZ?			ne year which	were not listed o	n 	「Yes ▼ No
		es," describe these							
3		ne organization cea ces?	se conducting,	or make significar	nt changes in ho	wit conducts	, any program		┌ Yes ┌ No
	If "Y∈	es," describe these	changes on Scl	hedule O					
4	exper	ribe the organizationses Section 501(otal expenses, and	c)(3) and 501(c	:)(4) organizations	s are required to	report the a			
4a	(Cod	e) (Expenses \$	12,661,351	ıncludıng grants o	of \$) (Revenu	e \$	14,956,379)
	ATTR BUSII NEAR RIGH HIGH	NESSES, IN LINE WITH LLY \$100 MILLION IN EC	USANDS OF VISITOR OUR MISSION BAS CONOMIC IMPACT A DXIMATELY ONE-TH: IGH THE CONTINUE	RS WHO FUEL THE LOC ED ON ECONOMIC IMI IND MEDIA ADDED VAL IRD OF THE COMMITT	CAL ECONOMY WITH PACT STUDIES, IT 1 LUE FOR SOUTH FLO EE'S EXPENSES (\$6	H MILLIONS OF E S ESTIMATED OF DRIDA IN ADDIT MILLION) WER	OOLLARS THIS TRANS JR 2013-14 BOWL G TION TO ASSIGNING T E PAID DIRECTLY TO	SLATES INTO J AME AND FEST FELEVISION AN THE BCS AND	OBS AND BENEFITS LOCA IVAL EVENTS GENERATED ID TITLE SPONSORSHIP THEREFORE BENEFITS
4b	(Code	e) (Expenses \$	524,412	including grants of	of \$	322,782) (Reveni	ıe \$	231,225)
-	OF G CULM PROV SEGM REGU	RANTS, DONATIONS AN MINATING IN BOTH THE VIDED FUNDING AND HU MENTS ON THE INSIDE	ID COMMUNITY PRO OB YOUTH CHEERL UNDREDS OF VOLUI THE ORANGE BOWL EEK" PRESENTATIOI	OGRAMS TO SUPPORT LEADING CHAMPIONSH NTEER AND STAFF HO . TELEVISION PROGRAI NS TO SERVE THE MO	RTED LOCAL YOUTH THIS COMPETITION HIPS AND OB YOUTH URS TO HOST CHA M AS WELL AS A FE RE THAN 16,000 YO	H SPORTS LEAGU N THE COMPET H FOOTBALL CHA MPIONSHIPS, PE ATURE PROGRA	TTION RUNS THROUG MPIONSHIPS IN THI ROVIDED SUPPORT FO MABOUT THE YFA CH	HOUT THE FO S FISCAL YEAF OR PRODUCTION HAMPIONSHIPS	
	(6-4) (F +	1 200 000			1 200 000) (D		0.)
4 c	UNDE A TUI	OBC MADE A CHARITAB ERPRIVILEGED AREAS O	F MIAMI-DADE COU ALLATION OF NEW	JNTY THE COMMITTE SYNTHETIC TURF FOO	E ENTERED INTO A OTBALL AND SOCCE	PARK, AN EXIS N AGREEMENT \	WITH MIAMI-DADE C	ATED IN ONE DUNTY TO SUF	0) OF THE MOST PERVISE AND OVERSEE OI S PARK TO BE USED FOR
	/Cod		\ /Evpapsas d	1 157 200	including grants (of ¢	250 752 \ /Dayani	ıo ¢	1 210 701 \
	(Code	e COMMITTEE PROVIDES) (Expenses \$	1,157,288	INCluding grants of		359,753) (Revenu		1,310,701)
	SCHO COMI BOWI LACR GROU	DLARSHIPS FOR 22 IND: MITTEE SUPPORTS ORG L INTERNATIONAL TENN OSSE CLASSIC, ORANG	IVIDUALS AND MAD GANIZATIONS AND E NIS CHAMPIONSHIP: E BOWL IMPACT AN ALSO IS THERE IN T	E GRANTS TO SCHOLA EVENTS BOTH IN AND S, ORANGE BOWL INTI ID EXCELLENCE AWAR TIMES OF NEED, PROV	RSHIP FUNDS FOR OUTSIDE OF SOUTH ERNATIONAL YOUTH DS, AND ORANGE I	9 ORGANIZATIO H FLORIDA ON A H REGATTA, ORA BOWL SWIM CLA	ONS INCLUDING 5 UN N ANNUAL BASIS, SU NGE BOWL HEALTH A SSIC,BENEFITTING N	IVERSITIES AD CH AS JUNIOR AND WELLNESS UMEROUS CHA	DDITIONALLY, THE ORANGE BOWL, ORANGE FAIR, ORANGE BOWL
4d		er program service:	•	•					
	(Exp	enses \$	1,157,288	including grants o	of \$	359,753)	(Revenue \$	1,31	0,701)
4e	Tota	ıl program service e	expenses 🟲	15,543,051					

Part IV Checklist of Required Schedule
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			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^{2}	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	2	Yes	
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^{\bullet}	3		Νo
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	Yes	
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? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
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	Yes	
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		No
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		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16		No
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 $11e^{\gamma}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
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		N o
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or 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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	3.0	Yes	

(:	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	•	Yes	 No
la	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 83			- 110
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
)	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	C.L.		
,	were not tax deductible?	6b		
a	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		N
L	services provided to the payor?	76		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
_	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
	· · · · · · · · · · · · · · · · · · ·			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	70		No
=	contract?	7e 7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			INC
y	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		
}	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		
	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		
	Section 501(c)(7) organizations. Enter			
	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			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
a	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			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
_				
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
ь	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			
Ξ	Enter the amount of reserves on hand			
a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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

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

	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax 1a 25			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	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		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	ا ا		
		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a	Yes	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing		Yes	
b 12a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		Yes	
b 12a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	11a		
b 12a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	11a 12a	Yes	
b 12a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	11a 12a 12b	Yes Yes Yes	
b 12a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?	11a 12a 12b	Yes Yes Yes	
b 12a b c 13 14 15	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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?	11a 12a 12b 12c 13	Yes Yes Yes	
b 12a b c 13 14 15	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official	11a 12a 12b 12c 13	Yes Yes Yes	
b 12a b c 13 14 15	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a 12a 12b 12c 13	Yes Yes Yes Yes	
b 12a b c 13 14 15 a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 12a b c 13 14 15 a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
b 12a b c 13 14 15 a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
b 12a b c 13 14 15 a b 16a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
b 12a b c 13 14 15 a b 16a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No

- Own website Another's website V Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►BRIAN PARK CFO 14360 NW 77TH COURT

Form 990	(2013	
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

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

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter - 0 - in columns (D), (E), and (F) if no compensation was paid

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

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

List all of the organization's former officers, key employees, or 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) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations

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

									,							
	(A) Name and Tıtle	(B) A verage hours per week (list any hours	verage Position (do not check more than one box, unless eek (list person is both an officer y hours and a director/trustee) related Position (do not check Reportable compensation compensation from the organization (W-organization (W-organ										(F) Estimated amount of othe compensation from the			
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		rganizati relate organiza	ed		
				Œ.			ted									
												1				
						-						+				
												+				
												-				
1b	Sub-Total			•			•	 -								
c	Total from continuation sheet	•					•	F		2 200 200				105 220		
d 	Total (add lines 1b and 1c) . Total number of individuals (in						· d abay	٠١ ١٠٠	ho rocovi	2,398,389		0		185,229		
2	\$100,000 of reportable comp						eu abov	e) w	no receive	ed more ti	idii					
													Yes	No		
3	Did the organization list any f o	ormer officer, dii	rector o	r trus	stee,	, key	emplo	yee,	, or highes	t compen	sated employee		1.03	110		
	on line 1a? If "Yes," complete S	Schedule J for suc	ch indiv	ıdual	•	•		•				3		No		
4	For any individual listed on lin organization and related organ individual													1		
5	Did any person listed on line 1	a receive or acc	crue co	- • mpen	• Isati	• on fi	rom an	• / []nr	elated or	anızatıon	or individual for	4	Yes			
_	services rendered to the organ											5		No		
S	ection B. Independent Co															
1	Complete this table for your fire compensation from the organization												tax year			
		(A) Name and business	-					· -	9		(B) scription of services	Ī	(C Comper)		
CENT	יי FERPLATE 2187 ATLANTIC STREET STAM		auu1E35								OULE O FOR DESCRIPT	ION	Compet	888,544		
	PRODUCTIONS INC 407 LINCOLN ROAD		BEACH FI	.33139	9					SEE SCHEE	OULE O FOR DESCRIPT	ION		734,527		
	ERMAN GROUP INC 436 ORANGE STREE									SEE SCHEE	OULE O FOR DESCRIPT	ION		348,187		

DIAMONETTE PARTY RENTALS 11091 NW 27TH STREET SUITE 100 DORAL FL 33172

\$100,000 of compensation from the organization \blacktriangleright 13

2 Total number of independent contractors (including but not limited to those listed above) who received more than

SAVOR SOCIETY 9760 MAYFLOWER PARK DRIVE CARMEL IN 46032

266,765

221,434

TENT RENTAL

SEE SCHEDULE O FOR DESCRIPTION

Contributions, Giffs, Grants and Other Similar Amounts	1a b c d e f g
Program Serwice Revenue	2a b c d e f g
levenue	3 4 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6
Other	9a b
	10a
	c d b

/III	Statement o Check if Schedi		onse or note to any li	ne in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
1a	Federated cam	paigns 1	a				512-514
Ь	Membership du						
C	Fundraising eve		·c				
d	Related organiz	zations 1	d				
e	Government grant	s (contributions) 1	e 325,975				
f	All other contributions and all other contributions are similar amounts no	ons, gifts, grants, and 1 ot included above	f 215,790				
g	Noncash contribution 1a-1f \$	ons included in lines					
h	Total. Add lines	s 1 a - 1 f		541,765			
			Business Code				
2a	ORANGE BOWL GA	ME	711210	13,793,266	13,793,266		
Ь	ORANGE BOWL FE	STIVAL	711300	1,036,476	1,036,476		
c	OTHER PROGRAM	SERVICE INCOME	711300	662,453	662,453		
d	COMMUNITY PROG	GRAMS	711300	505,450	505,450		
e	GAME RELATED PR	ROGRAMS	711210	500,660	500,660		
f		am service revenue	711210	300,000	300,000		
g		s 2a-2f		16,498,305			
3		ome (including divide ar amounts)		1,193,172			1,193,172
4	Income from inves	stment of tax-exempt bon	d proceeds 🕨				
5	Royalties		🕨				
		(ı) Real	(II) Personal				
	Gross rents Less rental						
b	expenses						
C	Rental income or (loss)						
d	Net rental inco	me or (loss)					
		(ı) Securities	(II) O ther				
7a	Gross amount from sales of assets other	218					
Ь	than inventory Less cost or						
	other basis and sales expenses	0					
c	Gain or (loss)	218					
d	Net gain or (los	ss)	· · · · •	218			218
8a	events (not inc	rom fundraising luding					
	\$ of contributions See Part IV, lin	s reported on line 1c)					
		•	a				
ь		•	b				
C		(loss) from fundraisin					
9a		rom gaming activities ne 19	a				
b	Less direct ex		b				
c		(loss) from gamıng ac					
10a	Gross sales of returns and allo	owances .					
1.		a					
b		oods sold b	Vantary				
C	Miscellaneous	(loss) from sales of in s Revenue	Business Code				
11a	i i sectioneou:		Dusiness code				
ь							
°	-						
d	All other reven	ue					
e e		s 11a-11d	▶				
							-
12	iotai revenue.	See Instructions .	🕨	18,233,460	16,498,305	(1,193,390

Part IX Statement of Functional Expenses				
Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns All	other organizati	ons must comp	lete column (A)	
Check if Schedule O contains a response or note to any line in this	Part IX			
Do not include amounts reported on lines 6b.	(A)	(B)	(C)	(D)

	Check it Schedule O contains a response or note to any line in this	I dicix			<u> </u>
	ot include amounts reported on lines 6b, o, 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 United States See Part IV, line 21	1,858,035	1,858,035		_
2	Grants and other assistance to individuals in the United States See Part IV, line 22		, ,		
3	Grants and other assistance to governments, organizations, and individuals outside the United	24,500	24,500		
	States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,616,419	744,274	872,145	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	1,936,089	1,314,679	621,410	_
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	93,436	47,554	45,882	
9	Other employee benefits	169,634	108,518	61,116	_
10	Payroll taxes	190,804	123,080	67,724	
11	Fees for services (non-employees)				
а	Management				
b	Legal	241,001	20,979	220,022	
c	Accounting	50,500	,	50,500	
d	Lobbying	39,000		39,000	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	137,654		137,654	
q	Other (If line 11g amount exceeds 10% of line 25,	,		,	
9	column (A) amount, list line 11g expenses on Schedule O)	541,729	452,062	89,667	
12	Advertising and promotion	899,360	712,261	187,099	
13	Office expenses	174,342	101,426	72,916	
14	Information technology	122,345	36,283	86,062	
15	Royalties				
16	Occupancy	163,294	131,604	31,690	
17	Travel	252,878	140,377	112,501	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,148		2,148	
20	Interest				
21	Payments to affiliates				_
22	Depreciation, depletion, and amortization	419,407	340,597	78,810	
23	Insurance	180,934	24,695	156,239	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	BCS PAYOUT	6,000,000	6,000,000		_
ь	EVENT COSTS	3,230,227	3,230,227		
С	OTHER	168,530	8,693	159,837	
d	CREDIT CARD FEES	133,365	123,207	10,158	
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	18,645,631	15,543,051	3,102,580	0
26	Joint costs. Complete this line only if the organization			-,-3 - ,-3 -	
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				
		<u>I</u>	<u> </u>	ı <u> </u>	rm 990 (2013)

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	95,959	1	548,924
	2	Savings and temporary cash investments	2,895,490	2	1,660,144
	3	Pledges and grants receivable, net	660,000	3	150,000
	4	Accounts receivable, net	849,701	4	625,224
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		_	
9 0	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		5	
क्				6	
Assets	7	Notes and loans receivable, net		7	
_	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	208,124	9	160,231
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 9,857,075			
	b	Less accumulated depreciation 10b 2,920,238	7,159,653	10c	6,936,837
	11	Investments—publicly traded securities	35,098,096	11	38,441,479
	12	Investments—other securities See Part IV, line 11	5,640,858	12	6,528,099
	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)	52,607,881	16	55,050,938
	17	Accounts payable and accrued expenses	2,028,572	17	905,240
	18	Grants payable		18	
	19	Deferred revenue	701,222	19	847,203
	20	Tax-exempt bond liabilities		20	
ø.	21	Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
gej		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule	227.500		4.540.544
		D	337,508	25	1,513,714
	26	Total liabilities. Add lines 17 through 25	3,067,302	26	3,266,157
ě		Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 and complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets	49,540,579	27	51,784,781
_ ထ	28	Temporarily restricted net assets		28	
Ā	29	Permanently restricted net assets		29	
r Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
ō	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
s s	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net 4	33	Total net assets or fund balances	49,540,579	33	51,784,781
ž	34	Total liabilities and net assets/fund balances	52,607,881	34	55,050,938
		. State mashines and not assets/fully suitainess	J	J-7	

Par	t XI Reconcilliation of Net Assets				-9
	Check if Schedule O contains a response or note to any line in this Part XI			<u> </u>	<u></u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		18,2	233,460
2	Total expenses (must equal Part IX, column (A), line 25)	2		18,6	545,631
3	Revenue less expenses Subtract line 2 from line 1	3		-4	112,171
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) \cdot .	4		49,!	540,579
5	Net unrealized gains (losses) on investments	5		2,6	556,373
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		51,7	784,781
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. 区
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revi a separate basis, consolidated basis, or both	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign audit, review, or compilation of its financial statements and selection of an independent accountant?	tht of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Single Audit Act and OMB Circular A-133?	he	3a		No
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		

Software ID: Software Version:

EIN: 59-0384382

Name: ORANGE BOWL COMMITTEE INC

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

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related					(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		
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1033 1130)	2,1033 11130,	related organizations
SHAUN M DAVIS	10 00	х		х				0	0	0
OFFICER ANN E POPE	10 00	×		x				0	0	0
OFFICER LUIS E BOUE	10 00	×		X				0	0	0
OFFICER ANDREW HERTZ	10 00									
OFFICER O FORD GIBSON	4 00	X		Х				0	0	0
DIRECTOR		х						0	0	0
LEE STAPLETON OFFICER	10 00	x		x				0	0	0
MICHAEL CHAVIES OFFICER	10 00	х		х				0	0	0
DON SLESNICK	10 00	х		×				0	0	0
OFFICER PETER K SPILLIS	4 00	×						0	0	0
DIRECTOR SEAN PITTMAN	4 00									
DIRECTOR CHRISTOPHER E KNIGHT	4 00	X						0	0	0
DIRECTOR DOUGLAS P WILEY	4 00	X						0	0	0
DIRECTOR	4 00	Х						0	0	0
MATTHEW E MORRALL DIRECTOR	4 00	×						0	0	0
ALBERT E DOTSON JR DIRECTOR	4 00	х						0	0	0
BENJAMIN REID	4 00	х						0	0	0
JOSE C ROMANO	4 00	X						0	0	0
DIRECTOR JOHN P SEILER	4 00									
DIRECTOR TIM BATTLE	4 00	X						0	0	0
DIRECTOR		Х						0	0	0
LARRY GAUTIER DIRECTOR	4 00	х						0	0	0
JEFF E RUBIN DIRECTOR	4 00	х						0	0	0
CHARLES H JOHNSON	4 00	х						0	0	0
DIRECTOR YVONNE TURNER JOHNSON	4 00	х						0	0	0
DIRECTOR MARIO MURGADO	4 00	x						0	0	0
DIRECTOR TOM PENNEKAMP	4 00									
DIRECTOR PHILIP P SMITH	4 00	X						0	0	0
DIRECTOR		Х						0	0	0

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations					(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		
	below dotted line)	Individual trustee or clirector	Institutional Trustee	ICEI	Key employee	Highest compensated	Former			organizations
SHAWN D CREWS	4 00	х						0	0	0
DIRECTOR DEPOSITE IN										
PETER T PRUITT JR DIRECTOR	4 00	х						0	0	0
HOPE G VICTOR	4 00									
DIRECTOR		Х						0	0	0
MARIO TRUEBA	4 00	х						0	0	0
DIRECTOR		X						U	U	U
ERIC L POMS	60 00			х				743,018	0	40,362
CHIEF EXECUTIVE OFFICER										
BRIAN PARK CHIEF FINANCIAL OFFICER	60 00			Х				278,708	0	28,989
MICHAEL SAKS	60 00									
CHIEF OPERATING OFFICER				Х				386,645	0	39,023
JARRETT NASCA	60 00					х		356,112	0	13,923
VP - PARTNERSHIPS L DAWSON HUGHES	60 00									
VP-OPERATIONS	80 00					х		200,917	0	24,529
MITCH MORRALL	60 00							140.160	0	20.122
VP-EVENTS						Х		148,160	0	20,133
ANA HERNANDEZ	60 00					х		142,058	0	10,682
VP-MARKETING SEAN GLYNN	60.00									
CONTROLLER	60 00					х		142,771	0	7,588
	1					1				

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DLN: 93493070001395

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Name of the organization ORANGE BOWL COMMITTEE INC

Employer identification number

59-0384382

	rt I			blic Charity Stat						<u>nstruction</u>	s.		
he o	rganı	zatıon ıs	not a privat	e foundation becaus	eıtıs (Forl	ınes 1 throu	ıgh 11, check	only one b	oox)				
1	\sqcap	A churc	ch, conventi	on of churches, or as	ssociation of	churches d	escribed in s e	ection 170	(b)(1)(A)(i).				
2	\sqcap	A scho	ol described	in section 170(b)(1)(A)(ii). (At	tach Sched	ule E)						
3	Γ	A hosp	ıtal or a coo	perative hospital se	rvice organiz	atıon descr	ibed in sectio	n 170(b)(1	.)(A)(iii).				
4	Γ	A medi	cal researcl	n organization operat	ed ın conjun	ction with a	hospital des	cribed in s e	ection 170(b)	(1)(A)(iii).	Enter the		
_	_			ty, and state								_	
5	Г			erated for the benefit		or universi	ty owned or o	perated by	a governmen	tal unit des	cribed in		
_	_			A)(iv). (Complete P	•								
6	<u> </u>			local government or	-								
7	ļ	_		at normally receives		•	support from	a governm	iental unit or f	rom the gei	neral public		
8	Г			n 170(b)(1)(A)(vi). described in section			mplete Part II)					
9	Ī			at normally receives					butions, mem	bership fee	s, and gross	s	
	•	_		•	• •				•	•			
			receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses										
		acquire	acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)										
10	\sqcap	Anorga	anization or	ganized and operated	dexclusively	to test for	public safety	See sectio	on 509(a)(4).				
11	Γ	An orga	anızatıon org	ganized and operated	dexclusively	for the ben	efit of, to perf	orm the fur	nctions of, or	to carry out	the purpose	es of	
			•	y supported organiz			. , .			ee section	509(a)(3).	Check	
				bes the type of supp									
	_			b Type II c									
е	ı			ox, I certify that the on managers and oth									
			509(a)(2)	on managers and ou	ici ciidii oile	or more par	oner, suppore	ca organiza	acions deseris	ou in section	011 505 (4)(1	, 01	
f			-	received a written de	etermination	from the IR	S that it is a	Type I, Ty	pe II, or Type	III suppor	tıng organız	atio <u>n,</u>	
			his box	1000 has the suman.				6				ı	
g			rugust 17, 2 ig persons?	2006, has the organi	zation accep	ited any giit	or contributi	on from an	y or the				
			• .	rectly or indirectly o	ontrols, eith	er alone or	together with	persons de	escribed in (ii)	Yes	No	
		and (III) below, the	governing body of th	e supported	organizatio	n?			11	.g(i)		
		(ii) A fa	amily memb	er of a person descri	bed in (i) ab	ove?				110	g(ii)		
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı)	above?			119	g(iii)		
h		Provide	the follown	ng information about	the supporte	ed organizat	ion(s)						
•) Nam		(ii) EIN	(iii) Type of	(iv) Is		(v) Did you	•	(vi) Is		(vii) A m		
	uppor			organization	organizati		the organiz		organizat		monet	•	
O	ganiza	ation		(described on lines 1- 9 above	col (i) list your gove		in col (i) o	•	col (i) org	•	supp	ort	
				or IRC section	docume		support? ir		li tile o	3 .			
				(see	2304/110								
				instructions))	Yes	No	Yes	No	Yes	No			
					163	140	163	140	1 63	140			
rot a						-	+			1	+		

Sch	edule A (Form 990 or 990-EZ) 2013						Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201:	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
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						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is i	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and stop here. The organization qua 33 1/3% support test—2012. If the				and line 15 is 33	8 1/3% or more	
	box and stop here. The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	-2013. If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	-2012 . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	▶ 厂
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		▶ □
18	Private foundation. If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 📂	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	678,160	613,975	380,725	1,042,755	541,765	3,257,380
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	14,796,794	15,078,493	17,480,530	49,786,491	16,498,305	113,640,613
3	Gross receipts from activities that are not an unrelated trade or						
4	business under section 513 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	15,474,954	15,692,468	17,861,255	50,829,246	17,040,070	116,897,993
	Amounts included on lines 1, 2, and 3 received from disqualified persons	650,000					650,000
b	A mounts 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	747,520	1,888,297	2,151,092	2,560,160	103,455	7,450,524
c	year Add lines 7a and 7b	1,397,520	1,888,297	2,151,092	2,560,160	103,455	8,100,524
8	Public support (Subtract line 7c from line 6)						108,797,469
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🏲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	15,474,954	15,692,468	17,861,255	50,829,246	17,040,070	116,897,993
l0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	908,557	771,292	682,878	780,583	1,193,172	4,336,482
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	000 557	771 200	602.070	700 502	1 102 172	4 226 402
с 11	Add lines 10a and 10b Net income from unrelated	908,557	771,292	682,878	780,583	1,193,172	4,336,482
	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)	16,383,511	16,463,760	18,544,133	51,609,829	18,233,242	121,234,475
14	First five years. If the Form 990 is check this box and stop here	for the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	nization,
Se	ction C. Computation of Pul	olic Support Pe	ercentage				<u></u>
15	Public support percentage for 201			13, column (f))		15	89 740 %
16	Public support percentage from 20	12 Schedule A, P	art III, line 15			16	88 230 %
	ction D. Computation of Inv				(6))		
17 10	Investment income percentage for				n (†))	17	3 580 %
18 19a	Investment income percentage fro 33 1/3% support tests—2013. If th				line 15 is more t	18 han 33 1/3% and	2 520 %
	/- /	- sigainzacion ala	Sincer the bo	a su muc i t, unu	20 10 111016 1	2 2 1/2/0, alla	17 13 1106

►V more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

33 1/3% support tests—2012. 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 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. 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).									
	Facts And Circumstances Test									
Retu	ırn Reference	Explanation								
		Schodulo A / Form 000 o	000 E7) 201							

Schedule A (Form 990 or 990-EZ) 2013

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DLN: 93493070001395

OMB No 1545-0047

Inspection

SCHEDULE C

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ) For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

Political Campaign and Lobbying Activities

▶ See separate instructions. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B

• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** ORANGE BOWL COMMITTEE INC 59-0384382 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 Was a correction made? 4a □ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 3 Did the filing organization file Form 1120-POL for this year? Yes 4

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-

Sch	nedule C (Form 990 or 990-EZ) 2013					Page 2
Pä	art II-A Complete if the organization	is exempt under	section 501(c)(3) and file	ed Form 5768	
_	under section 501(h)).		Link in Doub TV an	- h - 66:1: - h - d		a adduses FIN
٠.	Check ► If the filing organization belongs to a expenses, and share of excess lobb		iist in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,
3	Check ► ☐ If the filing organization checked bo		l" provisions app	ly		
	Limits on Lobbying E (The term "expenditures" means ar		l .)		(a) Filing organization's totals	(b) Affiliated group totals
La	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
ь	Total lobbying expenditures to influence a legisl	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	o)		Γ		
d	O ther exempt purpose expenditures			Γ		
e	Total exempt purpose expenditures (add lines 1	c and 1d)		Γ		
f	Lobbying nontaxable amount Enter the amount is columns	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lir	ue 1f)				
h	Subtract line 1g from line 1a If zero or less, ent	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 repo	orting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t	he instructions fo	ection do not r lines 2a thro	havè to con ough 2f on p		ne five
	Lobbying Exp	enditures During	4-Year Avera ⊤	ging Period	1	1
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					

e Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

Par		rganization is exempt under section 501(c)(3) and has felection under section 501(h)).	ТОИ				-
For ea	ech "Yes" response to lines 12 throi	gh 11 below, provide in Part IV a detailed description of the lobbying	(a)		(b)	
activi	•	gn 11 below, provide in Fart IV a decaned description of the lobbying	Yes	No	A	moui	nt
1		anization attempt to influence foreign, national, state or local t to influence public opinion on a legislative matter or referendum,					
а	Volunteers?		Yes				
b	Paid staff or management (include	Yes					
c	Media advertisements?		No				
d	Mailings to members, legislators	, or the public?		No			
е	Publications, or published or bro	-		No			
f	Grants to other organizations for	<u> </u>		No			
g		heir staffs, government officials, or a legislative body?	Yes				45,425
h		rs, conventions, speeches, lectures, or any similar means?		No			
i	Other activities?			No			
j	Total Add lines 1c through 1:						45,425
2a	_	the organization to be not described in section 501(c)(3)?		l No			
ь		tax incurred under section 4912		ı			
		tax incurred by organization managers under section 4912					
		a section 4912 tax, did it file Form 4720 for this year?		1			
		rganization is exempt under section 501(c)(4), section 5	501(c)(5), o	rse	ctio	n
	501(c)(6).	· J · · · · · · · · · · · · · · · · · · ·	(-	/(- // -			
				_		Yes	No
1	Were substantially all (90% or r	nore) dues received nondeductible by members?		L	1		
2	Did the organization make only i	n-house lobbying expenditures of \$2,000 or less?		L	2		
3	Did the organization agree to ca	ry over lobbying and political expenditures from the prior year?			3		
Par		rganization is exempt under section 501(c)(4), section 5 either (a) BOTH Part III-A, lines 1 and 2, are answered " ed "Yes."					
1	Dues, assessments and similar	amounts from members	1				
2	Section 162(e) nondeductible lo expenses for which the section !	bbying and political expenditures (do not include amounts of political 527(f) tax was paid).					
а	Current year		2a				
b	Carryover from last year		2b				
C	Total		2c				
3	Aggregate amount reported in se	ection 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	does the organization agree to c	ount on line 2c exceeds the amount on line 3, what portion of the excess arryover to the reasonable estimate of nondeductible lobbying and					
	political expenditure next year?		4				
5		political expenditures (see instructions)	5				
	rt IV Supplemental Inf						
Pro Par	vide the descriptions required for t II-B, line 1 Also, complete this	Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated groupart for any additional information	ıp lıst),	Part II	-A , lı	ne 2,	, and
	Return Reference	Explanation					
PAR	T II-B, LINE 1G	DESCRIPTION OF LOBBYING ACTIVITIES THE ORANGE BOWL COVOLUNTEERS AND CONSULTANTS TO ASSIST IN A RESOLUTION OF ADD COUNTY AND ITS PARTNERSHIP WITH THE OBC IN A \$1.2 M TO THE COUNTY FOR THE REDEVELOPMENT OF THE ATHLETIC FIVES ESTATES PARK LOCATED IN AN URBAN AREA OF THE COUNTBENEFIT THE ORGANIZATION, BUT RATHER IT WILL PROVIDE A SMIAMI-DADE COUNTY AND THE COMMUNITY CONSULTANTS, OF EMPLOYEES CONTACTED AND MET WITH LOCAL GOVERNMENT OF GRANTS TO FUND CHARITABLE PROJECTS AND ACTIVITIES OF THE ITHER INCLUDED IN A GOVERNMENTAL BUDGET OR A RESOLUTION OF THE PROVENTION OF THE PROJECTS AND ACTIVITIES OF THE PROVENTION OF THE PROPERTY OF THE PROVENTION OF THE PROVENTION OF THE PROVENTION OF THE PROPERTY OF THE PROVENTION OF THE PROPERTY OF THE PROVENTION OF THE PROPERTY OF THE PROPE	ON BEI ILLIO ELD AI TY IT IGNIF: FICER: FFICIA HE OR	HALF O N CHAF ND SCO WILL NO ICANT I S, AND LLS TO GANIZA	F MIAREBOT DE BENEKEY	AMI- BLE (OARI IREC FIT JRE N WE	GIFT D AT CTLY TO

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Part IV Supplemental Information		
Return Reference	Explanation	

Schedule D (Form 990) 2013

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DLN: 93493070001395

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions. ► Information about Schedule D (Form 990)

Open to Public

al Revenue Service and its in	istructions is at <u>www.irs.gov/rorin990</u> .		Inspection
nme of the organization ANGE BOWL COMMITTEE INC		Employer identification	on number
		59-0384382	
	r Advised Funds or Other Similar I	unds or Accounts.	Complete if the
organization answered "Yes" to Forn	<u> </u>	(h) Funda and ath	
Total number at end of year	(a) Donor advised funds	(b) Funds and oth	ier accounts
Aggregate contributions to (during year)			
Aggregate grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and donor funds are the organization's property, subject to	the organization's exclusive legal control?		┌ Yes ┌ No
Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?			┌ Yes ┌ No
rt III Conservation Easements. Comp	lete if the organization answered "Yes"	to Form 990, Part IV,	line 7.
Purpose(s) of conservation easements held by t Preservation of land for public use (e g , recr Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization	reation or education)	n historically important la certified historic structure the form of a conservatio	re
easement on the last day of the tax year	meta a quamitea conservation contribution in		
		Held at the E	nd of the Year
Total number of conservation easements		2a	
Total acreage restricted by conservation easem	ents	2b	
Number of conservation easements on a certifie	d historic structure included in (a)	2c	
Number of conservation easements included in (historic structure listed in the National Register		2d	
Number of conservation easements modified, tra	ansferred, released, extinguished, or termina	ted by the organization du	rıng
Number of states where property subject to cons	servation easement is located >		
Does the organization have a written policy rega enforcement of the conservation easements it he	rding the periodic monitoring, inspection, ha		┌ Yes ┌ No
Staff and volunteer hours devoted to monitoring,	, inspecting, and enforcing conservation ease	ements during the year	
A mount of expenses incurred in monitoring, insp	pecting, and enforcing conservation easemen	ts during the year	
Does each conservation easement reported on I and section 170(h)(4)(B)(II)?	ine 2(d) above satisfy the requirements of se	ection 170(h)(4)(B)(i)	┌Yes ┌No
In Part XIII, describe how the organization repo balance sheet, and include, if applicable, the tex the organization's accounting for conservation e	t of the footnote to the organization's financi		
t III Organizations Maintaining Colle	ctions of Art, Historical Treasures red "Yes" to Form 990, Part IV, line 8.	or Other Similar As	ssets.
If the organization elected, as permitted under S works of art, historical treasures, or other simila service, provide, in Part XIII, the text of the foo	r assets held for public exhibition, education	, or research in furtherand	
If the organization elected, as permitted under S works of art, historical treasures, or other simila service, provide the following amounts relating t	SFAS 116 (ASC 958), to report in its revenue ir assets held for public exhibition, education	statement and balance s	
(i) Revenues included in Form 990, Part VIII, li	ine 1	▶ \$	
(ii) Assets included in Form 990, Part X			
If the organization received or held works of art, following amounts required to be reported under		for financial gain, provide	
Revenues included in Form 990, Part VIII, line			
	-		
Assets included in Form 990, Part X		▶ \$	

Part	••• Organizations Maintaining Col	lections of Art	<u>, His</u>	tori	cal T	reasu	ires, or O	<u>the</u>	<u>r Similar</u>	Asse	ets (co	ontinued)
3	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other record	ds, ch	eck	any of	the foll	lowing that a	re a	significant	use of	its .	
а	Public exhibition		d	Γ	Loan	orexc	hange progr	ams				
b	Scholarly research		e	\sqcap	Othe	r						
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIII	llections and expla	ın hov	v the	y furth	er the o	organızatıon	's ex	empt purpo	se in		
5	During the year, did the organization solicit o assets to be sold to raise funds rather than t	be maintained as	part o	fthe	organ	ızatıon	's collection	?			Yes	┌ No
Par	Escrow and Custodial Arrange Part IV, line 9, or reported an am						n answered	Y" b	es" to For	n 990), 	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	an or other interme	diary	for c	ontribi	utions	or other ass	ets i	not	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII $$	I and complete the	follow	ıng t	able		_					
										Amo	unt	
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 Fo	rm 990, Part X, line	21?							Г	Yes	☐ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	natı	on has	been p	provided in P	art	XIII			Г
Pai	t V Endowment Funds. Complete											
_		(a)Current year	(b)	Prior	year	b (c) ⊤	wo years back	(d)	Three years b	ack (e	Four y	ears back
1a	Beginning of year balance							┢		+		
Ь	Contributions							⊢		+		
С	Net investment earnings, gains, and losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the curr	ent year end balanc	e (lın	e 1 g	, colun	nn (a))	held as					
а	Board designated or quasi-endowment ►											
b	Permanent endowment ▶											
c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c shou	ld equal 100%										
За	Are there endowment funds not in the posses	sion of the organiza	ation t	hat	are hel	d and a	admınıstered	for	the			
	organization by								г		Yes	No
	(i) unrelated organizations			•				•		3a(i)		
ь	(ii) related organizations							•		3a(ii) 3b		<u> </u>
4	Describe in Part XIII the intended uses of th	•						•	[<u> </u>		<u> </u>
	t VI Land, Buildings, and Equipme					n ansv	wered 'Yes	' to	Form 990	Part	IV, lıı	ne
	11a. See Form 990, Part X, line 1										·	
	Description of property) Cost o is (inves		(b)Cost or of basis (othe		(c) Accumu depreciati		(d) Bo	ook value
1 a	and						1,925	,133				1,925,133
b i	Buildings						5,145	,431	74	8,671		4,396,760
c l	_easehold improvements		•									
	easehold improvements		:				2,786	,511	2,17	1,567		614,944
d E	Equipment		· ·				2,786	,511	2,17	1,567		614,944

Part VII Investments—Other Securities. Co See Form 990, Part X, line 12.	emplete if the organization a	answered 'Yes' to Form 990, Part IV, line 11b.
(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) AETOS CAPITAL MANAGEMENT FUNDS	6,528,099	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	▶ 6,528,099	
Part VIII Investments—Program Related. (
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		, Part IV, line 11d See Form 990, Part X, line 15
(a) Desc	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)	
Part X Other Liabilities. Complete if the org Form 990, Part X, line 25. (a) Description of liability		
Federal income taxes DUE TO THE CITY OF MIAMI-MOORE PARK STADIUM	1	
PROJECT(SEE PART XIII) DUE TO THE CITY OF FT LAUDERDALE-CARTER PAR STADIUM PROJECT(SEE PART XIII)	85,246 K 254,955	
DUE TO MIAMI-DADE COUNTY-IVES PARK PROJECT (SEE PART XIII)	1,173,513	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 1,513,714	
	1,010,010	

Schedule	D (Form 990) 2013					Page 4
Part X		evenue per Audited Financial Stawered 'Yes' to Form 990, Part IV, line		ts With Revenue p	er R	eturn Complete If
1 T		er support per audited financial statements			1	14,752,179
	· = · ·	it not on Form 990, Part VIII, line 12				
		tments	2a	2,656,373		
		acılıtıes	2b	· · ·		
		s	2c			
d 0) ther (Describe in Part XIII)		2d			
	dd lines 2a through 2d .		<u> </u>		2e	2,656,373
3 S	Subtract line 2e from line 1 .				3	12,095,806
4 A	mounts included on Form 99	0, Part VIII, line 12, but not on line 1				
		uded on Form 990, Part VIII, line 7b	4a	137,654		
	·	·	4b	6,000,000		
c A	dd lines 4a and 4b				4c	6,137,654
5 T	otal revenue Add lines 3 and	d 4c. (This must equal Form 990, Part I, line	12) .		5	18,233,460
Part XI		xpenses per Audited Financial Sta		nts With Expenses	s per	Return. Complete
	•	iswered 'Yes' to Form 990, Part IV, line				
		r audited financial statements			1	12,507,977
		it not on Form 990, Part IX, line 25		ı		
		acılıtıes	2a		-	
			2b		-	
			2c		-	
			2d		4	
	-				2e	0
					3	12,507,977
		0, Part IX, line 25, but not on line 1:	ı	ı		
		uded on Form 990, Part VIII, line 7b		137,654	1	
			4b	6,000,000	1	
					4c	6,137,654
	otal expenses Add lines 3 ar Supplemental Inf	nd 4c. (This must equal Form 990, Part I, lin	e 18)		5	18,645,631
	line 4, Part X, line 2, Part XI	Part II, lines 3, 5, and 9, Part III, lines 1a , lines 2d and 4b, and Part XII, lines 2d and				de any additional
	Return Reference	Explanation				
PART X,	LINE Z	THE ORGANIZATION ASSESSES ITS TAFOR UNCERTAINTIES IN INCOME TAXESTANDARDS CODIFICATION, WHICH PRECOGNITION AND MEASUREMENT OF TO BE TAKEN IN A TAX RETURN FOR OYEARS FROM THE LATER OF EACH RETSUBJECT TO EXAMINATION BY THE OFFICE OF TAXES	ES" AS ROVID UNCE PEN TA URN'S I GANIZ O LONI FOR YE DSITIO ES FOR BILITIE NTERES ASSIFI (ES TH/	PRESCRIBED BY THE ES GUIDANCE FOR FI RTAIN TAX POSITION X YEARS (GENERALL) DUE DATE OR THE DA ATION'S MAJOR TAX GER SUBJECT TO INC ARS BEFORE APRIL 30 NS AND DETERMINES UNCERTAIN TAX POS S TO THE EXTENT IT GT AND PENALTIES RE IED AS A COMPONEN AT IT DOES NOT HAV	ACCC NANO NS TA (A PE TE FI JURI OME O, 201 S WHE SITIO DEEM ELATE T OF E AN	OUNTING CIAL STATEMENT KEN OR EXPECTED RIOD OF THREE LED) THAT REMAIN SDICTIONS TAX EXAMINATIONS 1 THE THER IT HAS ANY NS THE IS THEM MORE ED TO UNCERTAIN INCOME TAX Y SIGNIFICANT
	, LINE 4B - OTHER	AMOUNT PAID TO THE BOWL CHAMPIC				
ADJUSTI PART XII ADJUSTI	I, LINE 4B - OTHER	AMOUNT PAID TO THE BOWL CHAMPIC	NSHIF	SERIES 6,000,000		
PART X,	MENTS					

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493070001395

OMB No 1545-0047

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

Open to Public **Inspection**

Name of the organization ORANGE BOWL COMMITTEE INC ► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

						59-0384382	
Part I General Information	n on Grants and	d Assistance				•	
Does the organization maintain the selection criteria used to av Describe in Part IV the organiz	ward the grants or as	sistance?					✓ Yes
Part II Grants and Other A Form 990, Part IV, lin							es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Additional Data Table							
2 Enter total number of section 5		 ment organizations list	ted in the line 1 table .			▶	21
3 Enter total number of other orga							15
9							

1	Grants and Other Assistance to Individuals in the United States. Com	mplete 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	e	(b) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance	
(1) COLLEGE SCHOLARSHIPS GI DIRECTLY TO INDIVIDUALS	VEN	28	24,500				
Part IV Supplemental Ir	nformat	ion. Provide the infor	mation required in P	art I, line 2, Part III,	column (b), and any other	addıtıonal ınformatıon.	
Return Reference	Explanat	tion					
	THE MONITORING OF GRANT FUNDS IS DEPENDENT ON THE NATURE AND THE RECIPIENT OF THE GRANT IN SOME CASES, THE RECIPIENT IS REQUIRED TO REPORT BACK ON HOW THE GRANT IS USED OTHERS ARE NOT REQUIRED TO REPORT, HOWEVER, IN SOME CASES, JOINT CHECKS ARE ISSUED TO INSURE THE GRANT IS PROPERLY USED						

Additional Data

Software ID:

Software Version:

EIN: 59-0384382

Name: ORANGE BOWL COMMITTEE INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JUNIOR ORANGE BOWL COMMITTEE INC 1390 S DIXIE HWY SUITE 202 CORAL GABLES,FL 33146	59-2189635	501(C)(3)	25,000				GENERAL SUPPORT

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PALM BEACH COUNTY SPORTS COMMISSION INC - LOU GROZA AWARD 1555 PALM BEACH LAKES BLVD NO 1410 WEST PALM BEACH,FL 33401	65-0263296	501(C)(3)	10,000				SUPPORT FOR THE ANNUAL LOU GROZA AWARD		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ATLANTIC COAST CONFERENCE PO DRAWER ACC GREENSBORO,NC 27417	56-0599082	501(C)(3)	25,000				FUNDING SUPPORT FOR THE ACC INTER- INSTITUTIONAL ACADEMIC COLLABORATIVE		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NAT MOORE FOUNDATION 16911 NORTHEAST 6TH AVENUE MIAMI,FL 33162	65-0815097	501(C)(3)	6,000				GENERAL SUPPORT		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ONE HUNDRED BLACK MEN OF SOUTH FLORIDA INC 10022 HAMMOCKS BLVD SUITE 201 MIAMI,FL 33196	65-0138060	501(C)(3)	10,000				SCHOLARSHIP PRO GRAM		

Form 990, Schedule 1, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF MIAMI PO BOX 248106 CORAL GABLES,FL 33124	59-0624458	501(C)(3)	15,000				SCHOLARSHIP PRO GRAM		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
DICK CONLEY MEMORIAL FOOTBALL LEAGUE INC 18911 SW 310TH STREET HOMESTEAD,FL 33030	65-0462391		10,000				SUPPORT FOR YOUTH FOOTBALL TEAMS		

Form 990, Schedule 1, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GLADES GLEN BROWNS YOUTH FOOTBALL 2000 SOUTH MAIN STREET BELLE GLADE,FL 33430	41-2125097		7,200				SUPPORT FOR YOUTH FOOTBALL TEAMS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GLADES TRI-CITY YOUTH ATHLETIC LEAGUE PO BOX 286 PAHOKEE,FL 33476	20-4977160		7,500				SUPPORT FOR YOUTH FOOTBALL TEAMS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
KEY WEST JR FOOTBALL LEAGUE INC 3155 FLAGLER AVENUE KEY WEST,FL 33040	20-0251207		10,000				SUPPORT FOR YOUTH FOOTBALL TEAMS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
LEISURE CITY MODELLO PO BOX 924255 PRINCETON,FL 33092	65-0765717	501(C)(3)	7,200				SUPPORT FOR YOUTH FOOTBALL TEAMS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
OPTIMIST CLUB OF NORTH MIAMI BEACH 5256 NW 190 COURT MIAMI,FL 33055	65-1090859		5,600				SUPPORT FOR YOUTH FOOTBALL TEAMS			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PALM BEACH COUNTY YOUTH FOOTBALL LEAGUE INC PO BOX 20216 WEST PALM BEACH,FL 33416	59-2341857	501(C)(3)	15,000				SUPPORT FOR YOUTH FOOTBALL TEAMS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
OPTIMIST CLUB OF WEST KENDALL (DOLPHINS) 6125 SW 133 AVENUE MIAMI,FL 33183	59-1923532		5,600				SUPPORT FOR YOUTH FOOTBALL TEAMS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SOUTH KENDALL OPTIMIST CLUB INC 13490 SW 194TH STREET MIAMI,FL 33177	65-0771448		6,000				SUPPORT FOR YOUTH FOOTBALL TEAMS			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WEST BOYNTON FOOTBALL LEAGUE INC 5685 MUIRFIELD VILLAGE CIRCLE LAKE WORTH,FL 33463	61-1523239	501(C)(3)	10,000				SUPPORT FOR YOUTH FOOTBALL TEAMS			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WESTERN COMMUNITIES FOOTBALL LEAGUE 12207 OLD COUNTRY ROAD WELLINGTON,FL 33414	65-0525236	501(C)(3)	12,500				SUPPORT FOR YOUTH FOOTBALL TEAMS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BOCA FLAG FOOTBALL AND CHEERLEADING CORP 7301-A WEST PALMETTO PARK ROAD SUITE 203 BOCA RATON,FL 33433	20-2312210	501(C)(3)	12,500				SUPPORT FOR YOUTH FOOTBALL TEAMS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MIAMI-DADE EXTREME YOUTH FOOTBALL LEAGUE INC 14629 SW 104TH STREET 234 MIAMI,FL 33186	65-0479441		7,500				SUPPORT FOR YOUTH FOOTBALL TEAMS			

Form 990,Schedule I, Pai	form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNITED STATES TENNIS ASSOCIATION INCORPORATED 70 WEST RED OAK LANE WHITE PLAINS,NY 10604	13-5459420	501(C)(6)	15,000				SUPPORT FOR THE 2013 ORANGE BOWL INTERNATIONAL TENNIS CHAMPIONSHIP			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CORAL REEF YACHT CLUB 2484 SOUTH BAYSHORE DRIVE MIAMI,FL 33133	59-0776439	501(C)(7)	12,000				SUPPORT FOR THE 2013 ORANGE BOWL INTERNATIONAL YOUTH REGATTA		

Form 990,Schedule I, Pa	form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CITY OF SOUTH MIAMI (GREY GHOSTS) 6130 SUNSET DRIVE SOUTH MIAMI,FL 33143	59-6000431	501(C)(3)	5,600				SUPPORT FOR YOUTH FOOTBALL TEAMS			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
LIBERTY SQUARE - HELPING HANDS YOUTH CENTER 17211 NW 47TH COURT MIAMI,FL 33055	65-0963338	501(C)(3)	5,700				SUPPORT FOR YOUTH FOOTBALL TEAMS			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MOORE PARK - HELPING HANDS YOUTH CENTER 17211 NW 47TH COURT MIAMI,FL 33055	65-0963338	501(C)(3)	5,700				SUPPORT FOR YOUTH FOOTBALL TEAMS		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
OPA-LOCKA HURRICANES - HELPING HANDS YOUTH CENTER 17211 NW 47TH COURT MIAMI,FL 33055	65-0963338	501(C)(3)	5,700				SUPPORT FOR YOUTH FOOTBALL TEAMS		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
OAK GROVE - HELPING HANDS YOUTH CENTER 17211 NW 47TH COURT MIAMI,FL 33055	65-0963338	501(C)(3)	5,700				SUPPORT FOR YOUTH FOOTBALL TEAMS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SOUTH FLORIDA SPORTS FOUNDATION INC (DBA MIAMI DOLPHINS FOUNDATION) 7500 SW 30TH STREET DAVIE,FL 33314	65-0575416	501(C)(3)	6,875				GENERAL SUPPORT		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NATIONAL YOUTH FOOTBALL LEAGUE OF AMERICA 18620 NW 67TH AVENUE MIAMI,FL 33045	03-0597551		7,500				SUPPORT FOR YOUTH FOOTBALL LEAGUE			

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
DANIA BEARS ATHLETIC ASSOCIATION 18062 SW 33 STREET MIRAMAR,FL 33029	77-0676615		6,000				SUPPORT FOR YOUTH FOOTBALL LEAGUE		

Form 990,Schedule I, Pa	form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
OPTIMIST CLUB OF MIAMI SPRINGS FLORIDA PO BOX 660071 MIAMI SPRINGS,FL 33266	59-6155179		5,600				SUPPORT FOR YOUTH FOOTBALL LEAGUE			

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States						
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OPTIMIST CLUB OF HIALEAH INC 808 EAST 32 STREET HIALEAH,FL 33013	85-8012817		5,600				SUPPORT FOR YOUTH FOOTBALL LEAGUE

Form 990,Schedule I, Pai	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
TAMIAMI COLTS ATHLETIC ASSOCIATION 11201 SW 24 STREET MIAMI,FL 33165	26-2538483	501(C)(3)	8,000				SUPPORT FOR YOUTH FOOTBALL LEAGUE	

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BUCCANEERS YOUTH AND ATHLETIC ASSOCIATION INC 4408 SW 25TH STREET HOLLYWOOD,FL 33023	65-0659375		5,600				SUPPORT FOR YOUTH FOOTBALL LEAGUE

Form 990,Schedule 1, Pa	Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
HELPING HANDS BULLS - HELPING HANDS YOUTH CENTER 17211 NW 47TH COURT MIAMI,FL 33055	65-0963338	501(C)(3)	5,700				SUPPORT FOR YOUTH FOOTBALL LEAGUE	

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States						
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FLORIDA SPORTS FOUNDATION INC 800 NORTH MAGNOLIA ORLANDO,FL 32803	45-3113933	501(C)(3)	6,000				SUNSHINE STATE GAMES SUPPORT

Form 990,Schedule 1, Pa	Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
BIG BROTHERS AND BIG SISTERS OF GREATER MIAMI 701 SW 27TH AVENUE 800 MIAMI,FL 33135	59-6166904	501(C)(3)	25,000				GENERAL SUPPORT	

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DLN: 93493070001395

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization ORANGE BOWL COMMITTEE INC **Employer identification number**

59-0384382

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropiate 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			
	▼ Travel for companions			
	Tax idemnification 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 in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
	,		165	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	▼ Compensation committee ▼ Written employment contract			
	✓ Independent compensation consultant ✓ Compensation survey or study			
	Form 990 of other organizations A pproval 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			
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4 c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only 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			
а	The organization?	5a	Yes	
ь	Any related organization?	5b		No
	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			
а	The organization?	6a		No
b	Any related organization?	6b		Νo
	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		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Νo
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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)ERIC L POMS CHIEF EXECUTIVE OFFICER	(i) (ii)	397,171 0	329,070 0	16,777 0	25,653 0	14,709 0	783,380 0	0
(2)BRIAN PARK CHIEF FINANCIAL OFFICER	(i) (ii)	163,282 0	109,897 0	5,529 0	14,475 0	14,514 0	307,697 0	0
(3)MICHAEL SAKS CHIEF OPERATING OFFICER	(i) (ii)	231,113 0	153,159 0	2,373 0	23,668 0	15,355 0	425,668 0	o 0
(4)JARRETT NASCA VP - PARTNERSHIPS	(i) (ii)	139,796 0	209,105 0	7,211 0	13,256 0	667 0	370,035 0	0
(5)L DAWSON HUGHES VP- OPERATIONS	(i) (ii)	128,993 0	67,5 4 5 0	4,379 0	11,775 0	12,754 0	225,446 0	o 0
(6)MITCH MORRALL VP-EVENTS	(i) (ii)	100,654 0	47,506 0	0 0	7,961 0	12,172 0	168,293 0	0
(7)ANA HERNANDEZ VP-MARKETING	(i) (ii)	89,579 0	52,479 0	0 0	4,149 0	6,533 0	152,740 0	0
(8)SEAN GLYNN CONTROLLER	(i) (ii)	90,699 0	51,854 0	218 0	7,173 0	415 0	150,359 0	0

Schedule J (Form 990) 2013

Part IIII Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

The semiples and parties and addition	the semplete and parties any additional information					
Return Reference	Explanation					
PART I, LINE 1A	FIRST CLASS TRAVEL IT IS THE WRITTEN OBC POLICY TO BOOK ALL AIR TRAVEL COACH AT THE BEST AVAILABLE RATE ANY UPGRADE IS THE RESPONSIBILITY OF THE MEMBER OR EMPLOYEE, UNLESS OTHERWISE APPROVED BY THE CEO (OR CHAIRMAN FOR THE CEO) IN RARE CASES WHEN THERE ARE UNAVOIDABLE TRAVEL DELAYS OR CHANGES AND/OR NO OTHER OPTIONS AVAILABLE TRAVEL FOR COMPANIONS IT IS THE WRITTEN OBC POLICY THAT SPOUSE TRAVEL IS ONLY APPROVED WHERE IT IS RELEVANT FOR BUSINESS PURPOSES THE CEO (OR CHAIRMAN FOR THE CEO) SHALL APPROVE THE TRAVEL OF AN OBC MEMBER OR EMPLOYEE'S SPOUSE THE CHAIRMAN SHALL APPROVE THE TRAVEL OF THE CEO'S SPOUSE					
PART I, LINE 5	THE COMMITTEE MAY PAY SUPPLEMENTAL COMPENSATION TO ITS STAFF BASED ON ACHIEVING A VARIETY OF INDIVIDUAL AND ORGANIZATIONAL FINANCIAL GOALS INCLUDING TICKET SALES AND SPONSORSHIP REVENUE					
FORM 990, SCHEDULE J, PART II, COLUMN (B)(II)-BONUS & INCENTIVE COMPENSATIO	THE BONUS & INCENTIVE COMPENSATION SHOWN ON THIS SCHEDULE REPRESENTS AMOUNTS PAID IN 2013 BASED ON BOTH ORGANIZATIONAL AND INDIVIDUAL PERFORMANCE ACHIEVED FOR THE PRIOR FISCAL YEAR ENDED APRIL 30, 2013, WHICH INCLUDED HOSTING BOTH THE DISCOVER ORANGE BOWL GAME AND THE DISCOVER BCS NATIONAL CHAMPIONSHIP GAME AND RELATED EVENTS					

Schedule J (Form 990) 2013

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DLN: 93493070001395

OMB No 1545-0047

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Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons ► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,

or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

	ne of the organization NGE BOWL COMMITTEE INC						E	Employer identification number						
THE THE	D	it Tuesday	hin /	-t FO1/-\/	(2) and an abo	- F01/a\/4\			84382	`				
					(3) and sectio 90, Part IV, line						40b			
	e of disquali				n disqualified	(c) Des					(d) Corr	rected?		
			per	son and organ	nization						Yes	No		
												•		
2 Enterthe a	amount of ta	x incurred by	organizatio	n managers o	r dısqualıfıed pe	rsons durina t	he vea	r unde	rsectio	n				
4958 .									▶ \$					
3 Enterthe a	amount of ta	x, ıf any, on lıı	ne 2, above	e, reimbursed l	by the organizat	ion			► \$					
				ted Person	I S. 1990-EZ, Part \	/ line 38a or	Form 9	90 P.	art IV li	ine 26	orifthe			
					, line 5, 6, or 22		1 01111 3	,,,,,	arciv, n	mc 20,	or in the			
a) Name of	(b)	(c)	(d) Loa		(e)Original	(f)Balance	(g) In		(h)	_	(i)Wr			
interested person	Relationsl with	nip Purpose Ioan	of or from		principal amount	due	defaul	default?		default?		ved	agreen	nent?
person	organizati		organiza	acion.	amount				by board					
									or					
			То	From	\dashv		Yes	No	Yes	No No	Yes	No		
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tal		<u> </u>												
art IIII Gra	ants or As molete if th	ssistance B	ion answe	ng Interest	ed Persons. n Form 990, P	art IV line	27							
(a) Name of Ir		(b) Relation			unt of assistanc			ustano	ce (e) Purpo:	se of ass	sistano		
perso		ınterested p	erson and t	1 ' '		(-, , , ,			(1	,				
		organ	ızatıon											
						<u> </u>								

Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.									
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization revenues?					
				Yes	No				
(1) TIM BATTLE	DIRECTOR	305,889	SEE PART V		No				
						_			

Part V Supplemental Information

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

Return Reference	Explanation
SCHEDULE L, PART V	THE BOARD OF DIRECTORS REQUIRES ANY MEMBER THAT PROVIDES SERVICES TO THE OBC
	AND IS ON THE BOARD OF DIRECTORS OR A COMMITTEE THAT IS INVOLVED WITH THEIR
	AREAS OF INTEREST NEEDS TO DISCLOSE THE RELATIONSHIP AND ABSTAIN FROM
	DECISION MAKING THAT INVOLVES THEIR ENTITY THE ORGANIZATION HAS DONE
	BUSINESS WITH KEEN BATTLE MEAD RELATIVE TO MOST OF ITS INSURANCE FOR MANY
	YEARS, INCLUDING PRIOR TO WHEN TIMOTHY BATTLE, A PRINCIPAL FROM KEEN BATTLE
	MEAD, WAS ELECTED AS A MEMBER OF THE ORANGE BOWL COMMITTEE MR BATTLE WAS
	THEREAFTER ELECTED TO THE BOARD OF DIRECTORS FOR 2010-13 THE BOARD OF
	DIRECTORS VOTED TO APPROVE A RENEWAL CONTRACT WITH KEEN BATTLE MEAD FOR
	2013-14 SUBJECT TO OBC STAFF ENSURING THAT THE TERMS WERE FAIR MARKET VALUE OR
	BETTER, WHICH IT DID THROUGH A REVIEW BY THE RISK MANAGEMENT COMMITTEE MR
	BATTLE WAS NOT INVOLVED IN THE RISK MANAGEMENT COMMITTEE'S REVIEW AND DID
	NOT PARTICIPATE IN THE VOTE TO APPROVE THE CONTRACT IT SHOULD BE NOTED THAT
	WHILE THE ANNUAL PREMIUMS, INCLUSIVE OF THE COMMISSIONS, PAID TO KEEN BATTLE
	MEAD ARE \$305,889 THE COMMISSIONS RETAINED BY KEEN BATTLE MEAD ARE ONLY
	\$33,600 THE RETAINED COMMISSION OF 11% IS WELL WITHIN INDUSTRY NORMS

Schedule L (Form 990 or 990-EZ) 2013

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(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493070001395

OMB No 1545-0047

2013

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Supplemental Information to Form 990 or 990-EZ

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

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number Name of the organization ORANGE BOWL COMMITTEE INC 59-0384382

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	ALL MEMBERS HAVE THE RIGHT TO VOTE IN THE ELECTION OF MEMBERS OF THE BOARD OF DIRECTORS AND TO VOTE TO APPROVE CERTAIN DECISIONS OF THE BOARD OF DIRECTORS AS DESCRIBED IN THE EXPLANATIONS FOR QUESTIONS 7A AND 7B NO MEMBERS OF THE ORGANIZATION HAVE THE RIGHT TO RECEIVE DISTRIBUTIONS OF INCOME OR ASSETS FROM THE ORGANIZATION

Return Reference	Explanation
VI, SECTION A, LINE 7A	ALL MEMBERS IN GOOD STANDING PER THE BY-LAWS, EXCLUDING COLLEGIATE REPRESENTATIVE MEMBERS, HONORARY MEMBERS, MEMBERS AT LARGE, EMERITUS MEMBERS AND ACTIVE MEMBERS UNTIL THE COMPLETION OF THEIR SECOND FESTIVAL, HAVE THE RIGHT TO VOTE FOR MEMBERS OF THE BOARD OF DIRECTORS EACH YEAR THE ELECTION WILL INCLUDE THE SECOND VICE-CHAIR, 3 PAST CHAIRS/PRESIDENTS, AND 6-7 AT-LARGE DIRECTORS (FOR A TWO-YEAR TERM)

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	ALL MEMBERS IN GOOD STANDING PER THE BY-LAWS, EXCLUDING COLLEGIATE REPRESENTATIVE MEMBERS, HONORARY MEMBERS, MEMBERS AT LARGE, EMERITUS MEMBERS AND NEW ACTIVE MEMBERS UNTIL THE COMPLETION OF THEIR SECOND FESTIVAL, HAVE THE RIGHT TO VOTE ON THE FOLLOWING MATTERS ELECTION OF NEW MEMBERS, RE-ELECTION OF MEMBERS, THE REMOVAL OF BOARD MEMBERS, THE AMOUNT OF CHARGES FOR MEMBERSHIP BENEFITS AS WELL AS DUES AND ASSESSMENTS, THE CRITERIA FOR NEW MEMBERS TO MEET BEFORE THEY ARE ELECTED OR RE ELECTED, THE PURCHASE, SALE OR ENCUMBRANCE OF ANY REAL PROPERTY, THE ELECTION OF MEMBERS TO THE MEMBERSHIP SERVICES COMMITTEE, ANY AMENDMENT TO THE ARTICLES OF INCORPORATION OR BY LAWS OF THE COMMITTEE, THE ANNUAL BUDGET FOR THE COMMITTEE AND ANY CONTRACT WITH A TERM OF ONE YEAR OR MORE AND WHICH HAS AGGREGATE EXPENDITURES OF MORE THAN \$1,000,000 00 (WHETHER LUMP SUM OR INSTALLMENT), WITH THE EXCEPTION OF EMPLOY MENT AGREEMENTS

Return Reference	Explanation
FORM 990, PART VI,	FORM 990 IS INITIALLY REVIEWED BY THE ORGANIZATION'S CEO, CFO, TREASURER, AND AUDIT COMMITTEE
SECTION B, LINE 11	AND THEN PRESENTED TO BOARD OF DIRECTORS FOR APPROVAL BEFORE IT IS FILED

Return Reference	Explanation
PART VI,	IT IS THE POLICY OF THE COMMITTEE THAT ANY BUSINESS DONE WITH ANY MEMBER OR MEMBER'S COMPANY MUST BE FAIR, REASONABLE AND COMPETITIVE WITHIN THE MARKETPLACE, AND HAVE THE PRIOR APPROVAL OF THE BOARD WHENEVER SUCH BUSINESS IS BEING DISCUSSED AND VOTED ON BY THE BOARD, ANY MEMBER(S) WITH AN INTEREST IN SAID BUSINESS MUST DISCLOSE SUCH INTEREST, NOT PARTICIPATE IN BOARD DISCUSSIONS AND ABSTAIN FROM VOTING ALSO, ANNUALLY EACH BOARD MEMBER AND KEY EMPLOYEE MUST COMPLETE A CONFIDENTIAL CONFLICT OF INTEREST DISCLOSURE STATEMENT

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	LINE 15A THE COMPENSATION OF THE CEO IS ESTABLISHED BY THE BOARD OF DIRECTORS THROUGH A TRANSPARENT, STRUCTURED AND THOUGHTFUL PROCESS DESIGNED TO ENSURE THE REASONABLENESS OF SUCH COMPENSATION, WHICH PROCESS IS DOCUMENTED IN THE MINUTES OF THE MEETINGS OF THE BOARD OF DIRECTORS IT INVOLVES BOTH INTERNAL (EMPLOY EE PERFORMANCE ASSESSMENT) AND EXTERNAL (MARKETPLACE SURVEYS AND COMPARABLES) REVIEWS THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS IS CHARGED WITH RECOMMENDING TO THE BOARD THE COMPENSATION OF THE CEO IN MAKING THE RECOMMENDATION, THE BY LAWS REQUIRE COMPLIANCE WITH THE REQUIREMENTS FOR THE REBUTTABLE PRESUMPTION OF REASONABLENESS IN ACCORDANCE WITH THE "INTERMEDIATE SANCTIONS" REGULATIONS UNDER SECTION 4958 OF THE CODE. THE MEMBERS OF THE BOARD OF DIRECTORS ARE ELECTED ANNUALLY BY THE 300 PLUS MEMBERSHIP OF THE ORGANIZATION AND ARE SUBJECT TO TERM LIMITS TO ASSURE THEIR INDEPENDENCE AND COMMUNITY ORIENTATION LINE 15B - THE COMPENSATION OF THE CHIEF OPERATING OFFICER AND CHIEF FINANCIAL OFFICER IS SET IN THE SAME MANNER AS THAT OF THE CEO, BY RECOMMENDATION OF THE COMPENSATION COMMITTEE AND APPROVAL BY THE BOARD OF DIRECTORS THE COMPENSATION OF OTHER OFFICERS AND KEY EMPLOYEES IS RECOMMENDED BY THE CEO TO A HUMAN RESOURCES COMMITTEE (HRC), WHICH CONSISTS OF AT-LARGE, NON-EMPLOYEE MEMBERS OF THE ORGANIZATION THE HCR IN ITS REVIEW TAKES INTO CONSIDERATION INFLATION, EXPERIENCE, PERFORMANCE, SURVEY'S OF SIMILAR ORGANIZATIONS AND PERIODIC COMPENSATION STUDIES OF OUTSIDE COMPENSATION CONSULTANTS. THE HRC THEN RECOMMENDS COMPENSATION TO THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS, WHICH THEN MAKES FINAL RECOMMENDS FOR APPROVAL TO THE BOARD OF DIRECTORS.

Return Reference	Explanation
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

Return Reference	Explanation
FORM 990, PART XI,	NO CHANGE HAS BEEN MADE IN THE ORGANIZATION'S AUDIT OVERSIGHT COMMITTEE PROCEDURES OR IN ITS
LINE 2C	SELECTION OF AN INDEPENDENT ACCOUNTANT

FORM 990, PART VII, SECRIPTION OF SERVICES BY THE FOLLOWING BUSINESSES CENTERPLATE HOSPITALITY SERVICES AT SUN LIFE SECTION B - INDEPENDENT CONTRACTORS ONTRACTORS REQUIRED EVENTS, SOME OF WHICH WAS OFFSET BY PAID ADMISSION FEES ACT PRODUCTIONS PRODUCTION AND/OR TALENT FEES FOR HALF-TIME ENTERTAINMENT FOR THE DISCOVER ORANGE BOWL GAME AND FOR THE PRE-GAME PARTIES AND FAN ZONES FOR BOTH THE DISCOVER ORANGE BOWL GAME AND THE DISCOVER BCS NATIONAL CHAMPIONSHIP GAME SILVERMAN GROUP INC MARKETING SERVICES INCLUDING STRATEGIC PLANNING, COLLATERAL MATERIAL DEVELOPMENT AND MEDIA BUYING SAVOR SOCIETY TENT RENTAL AND HOSPITALITY SERVICES PROVIDED IN CONJUNCTION WITH THE DISCOVER BCS NATIONAL CHAMPIONSHIP PREGAME PARTY	Return Reference	Explanation
	SECTION B - INDEPENDENT	STADIUM FOR THE DISCOVER ORANGE BOWL, THE DISCOVER BCS NATIONAL CHAMPIONSHIP GAME, AND BANK ATLANTIC CENTER FOR THE METROPCS ORANGE BOWL BASKETBALL CLASSIC INCLUDING CONTRACTUALLY REQUIRED EVENTS, SOME OF WHICH WAS OFFSET BY PAID ADMISSION FEES ACT PRODUCTIONS PRODUCTION AND/OR TALENT FEES FOR HALF-TIME ENTERTAINMENT FOR THE DISCOVER ORANGE BOWL GAME AND FOR THE PRE-GAME PARTIES AND FAN ZONES FOR BOTH THE DISCOVER ORANGE BOWL GAME AND THE DISCOVER BCS NATIONAL CHAMPIONSHIP GAME SILVERMAN GROUP INC MARKETING SERVICES INCLUDING STRATEGIC PLANNING, COLLATERAL MATERIAL DEVELOPMENT AND MEDIA BUYING SAVOR SOCIETY TENT RENTAL AND HOSPITALITY

Return Reference	Explanation
FORM 990, GENERAL COMMENT	FORM 990 IS DESIGNED AS A FINANCIAL REPORTING VEHICLE. ITS NATURE DOES NOT ALWAYS ALLOW FOR DETAILED DESCRIPTIONS OF CERTAIN ITEMS. WE ENCOURAGE ANY ONE VIEWING THIS DOCUMENT FOR ANY OTHER PURPOSE THAN THAT FOR WHICH IT IS INTENDED TO CONTACT THE ORANGE BOWL COMMITTEE WITH ADDITIONAL QUESTIONS

(a)

DLN: 93493070001395

OMB No 1545-0047

2013

Open to Public Inspection

(f)

Related Organizations and Unrelated Partnerships

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ► See separate instructions.

(b)

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

(c)

Name of the organization ORANGE BOWL COMMITTEE INC **Employer identification number**

59-0384382 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(d)

Name, address, and EIN (If applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity
(1) OBC MOORE PARK LLC 14360 NW 77TH COURT MIAMI LAKES, FL 33016 33-1102438	\$5 65 MILLION REDEVELOPMENT OF STADIUM, TRACK & OTHER MOORE PARK FACILITIES	FL	0	,	ORANGE BOWL COMMITTEE INC 59- 0384382
(2) OB YOUTH SPORTS LLC 14360 NW 77TH COURT MIAMI LAKES, FL 33016 35-1102435	SUPPORTS ALLIANCE OF S FL YOUTH FOOTBALL LEAGUES INCLUDING CHEERLEADERS	FL	231,225	,	ORANGE BOWL COMMITTEE INC 59- 0384382
(3) OB PROPERTY HOLDINGS LLC 14360 NW 77TH COURT MIAMI LAKES, FL 33016 20-5062073	OWNS THE REAL ESTATE USED BY THE COMMITTEE AS ITS BUSINESS OFFICES	FL	0		ORANGE BOWL COMMITTEE INC 59- 0384382
(4) OB FESTIVAL EVENTS LLC 14360 NW 77TH COURT MIAMI LAKES, FL 33016 80-0669297	HOSTS AND PRODUCES EVENTS CONSISTENT WITH THE ORAGANIZATION'S MISSION	FL	58,650	,	ORANGE BOWL COMMITTEE INC 59- 0384382
(5) OB CARTER PARK LLC 14360 NW 77TH COURT MIAMI LAKES, FL 33016 45-5473507	\$3 MILLION REDEVELOPMENT OF STADIUM, TRACK, & OTHER CARTER PARK FACILITIES	FL	0		ORANGE BOWL COMMITTEE INC 59- 0384382
(6) OB IVES ESTATES LLC 14360 NW 77TH COURT MIAMI LAKES, FL 33016 46-2660660	\$1 2 MILLION REDEVELOPMENT OF ATHLETIC FIELD AND SCOREBOARD	FL	0		ORANGE BOWL COMMITTEE INC 59- 0384382
Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the		rganızatıon answe	red "Yes" on F	orm 990, Part IV	, line 34 because it had one

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

Part III	Identification of Related Org because it had one or more rela					ation ansv	vered "Ye	es" on	Form	990, Part	IV, lu	ne 34	ļ	
	(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	entity -	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		(h Disprop r allocat	rtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	j) eral or agıng :ner?	(k) Percentage ownership
						,			Yes	No		Yes	No	
												_		
													\square	
Part IV	Identification of Related Org line 34 because it had one or mo	ore related organız							wered	d "Yes				IV,
Na	(a) ame, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity		(e) Type of entity (C corp, S corp, or trust)		total Share	re of end- of-year assets		(h) ercentage wnership	(i) Section 512 (b)(13) controlled entity?		No.
							1			-	ĺ	Yes	<u>*</u>	No
												ı		

Part V	Transactions With Related Organizations Complete if the organization answ	vered "Yes" on Forn	n 990, Part IV, line	e 34, 35b, or 36.					
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule									
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?									
a Red	a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity								
b Gift									
c Gıft									
d Loa	d Loans or loan guarantees to or for related organization(s)								
e Loans or loan guarantees by related organization(s)									
f Div	f Dividends from related organization(s)								
g Sal	g Sale of assets to related organization(s)								
h Pur	h Purchase of assets from related organization(s)								
i Exc	i Exchange of assets with related organization(s)								
j Lea	se of facilities, equipment, or other assets to related organization(s)				1j				
k Lea	se of facilities, equipment, or other assets from related organization(s)				1k				
I Perf	l Performance of services or membership or fundraising solicitations for related organization(s)								
m Perf	m Performance of services or membership or fundraising solicitations by related organization(s)								
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
o Sharing of paid employees with related organization(s)									
p Rei	p Reimbursement paid to related organization(s) for expenses								
q Rei	q Reimbursement paid by related organization(s) for expenses								
r Other transfer of cash or property to related organization(s)									
s Oth	s Other transfer of cash or property from related organization(s)								
2 If th	e answer to any of the above is "Yes," see the instructions for information on who must complet		T T						
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	unt invo	lved			

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

revenue) that was not a related organization. See instructions													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V?UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
]	
												\Box	
	•												

Schedule R (Form 990) 2013

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2013

Additional Data

Software ID:

Software Version:

EIN: 59-0384382

Name: ORANGE BOWL COMMITTEE INC

Form 990, Schedule R, Part I - Identification of Disregarded Entities

(a) Name, address, and EIN (If applicable) of disregarded entity	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Total income	(e) End-of-year assets	(f) Direct Controlling Entity		
(1) OBC MOORE PARK LLC 14360 NW 77TH COURT MIAMI LAKES, FL 33016 33-1102438	\$5 65 MILLION REDEVELOPMENT OF STADIUM, TRACK & OTHER MOORE PARK FACILITIES	FL	0	,	ORANGE BOWL COMMITTEE INC 59- 0384382		
(1) OB YOUTH SPORTS LLC 14360 NW 77TH COURT MIAMI LAKES, FL 33016 35-1102435	SUPPORTS ALLIANCE OF S FL YOUTH FOOTBALL LEAGUES INCLUDING CHEERLEADERS	FL	231,225	·	ORANGE BOWL COMMITTEE INC 59- 0384382		
(2) OB PROPERTY HOLDINGS LLC 14360 NW 77TH COURT MIAMI LAKES, FL 33016 20-5062073	OWNS THE REAL ESTATE USED BY THE COMMITTEE AS ITS BUSINESS OFFICES	FL	0		ORANGE BOWL COMMITTEE INC 59- 0384382		
(3) OB FESTIVAL EVENTS LLC 14360 NW 77TH COURT MIAMI LAKES, FL 33016 80-0669297	HOSTS AND PRODUCES EVENTS CONSISTENT WITH THE ORAGANIZATION'S MISSION	FL	58,650	,	ORANGE BOWL COMMITTEE INC 59- 0384382		
(4) OB CARTER PARK LLC 14360 NW 77TH COURT MIAMI LAKES, FL 33016 45-5473507	\$3 MILLION REDEVELOPMENT OF STADIUM, TRACK, & OTHER CARTER PARK FACILITIES	FL	0	,	ORANGE BOWL COMMITTEE INC 59- 0384382		
(5) OB IVES ESTATES LLC 14360 NW 77TH COURT MIAMI LAKES, FL 33016 46-2660660	\$1 2 MILLION REDEVELOPMENT OF ATHLETIC FIELD AND SCOREBOARD	FL	0		ORANGE BOWL COMMITTEE INC 59- 0384382		