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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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A	For th	e 2013 calendar year, or tax year beginning AUG 16, 2013 and a	ending J	<u>UN 30, 2014</u>	1
	Check if applicab	C Name of organization		D Employer identif	ication number
Г	Addre				
	Name			46-3	991728
	Initial	100000000000000000000000000000000000000	Room/suite	E Telephone number	
	Termi	,		766-1166	
	Amen	ded Charles and TID of the control o	G Gross receipts \$	1,203,908.	
	Application		H(a) Is this a group r		
	pendi	F Name and address of principal officer.BRANDON BOWERSOX-JC	for subordinates	s? ☐Yes X No	
		506 W FLORIDA AVE, URBANA, IL 61801		H(b) Are all subordinates i	
I	Tax-ex	empt status 501(c)(3)X 501(c)(4) ◀ (insert no.) 4947(a)(1) o	r 527	If "No," attach a	list (see instructions)
J	Websi	te: ► HTTP://UC2B.NET/		H(c) Group exemption	·
K	Form o	forganization: X Corporation Trust Association Other	L Year	of formation: 2013	M State of legal domicile: IL
P	art I	Summary		_	
<u>ന</u> ം	1	Briefly describe the organization's mission or most significant activities URBAN	IA-CHA	MPAIGN BIG	BROADBAND
Governance		IS A NONPROFIT ORGANIZATION THAT WAS FORM	MED TO	FACILITATE	THE
7 ii	2	Check this box if the organization discontinued its operations or dispose	ed of more	than 25% of its net a	ssets
₽ 0	3	Number of voting members of the governing body (Part VI, line 1a)		3	9
ص م	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	9
≦°s	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)		5	16
<u>~</u> ;	6	Total number of volunteers (estimate if necessary)		6	5
뜮	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
Z	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
Revenue CANNED MAK Revenue Activities &				Prior Year	Current Year
ã	8	Contributions and grants (Part VIII, line 1h)			783,229.
άŠ	9	Program service revenue (Part VIII, line 2g)			418,681.
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)			3.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			1,995.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)			1,203,908.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0.
		Benefits paid to or for members (Part IX, column (A), line 4)			0.
Ś	15	Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)			148,962.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0.
ĝ	ь	Total fundraising expenses (Part IX, column (D), line 25)	0.		
Û	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			773,883.
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)			922,845.
	19	Revenue less expenses Subtract line 18 from line 12 C C C C C C C C C C C C C C C C C C			281,063.
Net Assets or	3		Ве	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)			673,692.
ABS	21	Total assets (Part X, line 16) Total liabilities (Part X, line 26) Net assets or fund balances Subtract line 21 from line 20			392,629.
25	22_	Net assets or fund balances Subtract line 21 from line 20			281,063.
	art II	Signature Block OGDEN LIT			
Unc	der pena	lities of perjury, I declare that I have examined this return , including accompanying schedules	and stateme	ents, and to the best of m	y knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of whi	ch preparer	has any knowledge.	
		Brah & Collins		2/16	12015
Sig	n	Signature of officer		Date	
He	re	▶ BRANDON BOWERSOX-JOHNSON, PRESIDENT/DI	RECTO	R	
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	i	ate Check	PTIN
Pai	d	AMANDA ALT, CPA AMANDA ALT, CPA	8	2/16/15 self-employ	P00543797
Pre	parer	Firm's name MARTIN HOOD FRIESE & ASSOC LLC		Firm's EIN	37-1119790
Use	Only	Firm's address 2507 SOUTH NEIL STREET			
	···-·	CHAMPAIGN, IL 61820		Phone no. (2	17)351-2000
Ма	y the II	RS discuss this return with the preparer shown above? (see instructions)		- · · · · · · · · · · · · · · · · · · ·	X Yes No

	990 (2013) URBANA CHAMPAIGN BIG BROADBAND NFP	46-3991728	⊃age 2
Pai	rt III Statement of Program Service Accomplishments		
	,Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission		
	URBANA-CHAMPAIGN BIG BROADBAND IS A NONPROFIT ORGANIZAT	TION THAT WAS	
	FORMED TO FACILITATE THE TRANSITION OF A FIBER-OPTIC BE	ROADBAND NETWO	RK
	CONSTRUCTED BY THE CONSORTIUM (CITY OF CHAMPAIGN, CITY	OF URBANA,	
	UNIVERSITY OF ILLINOIS AT URBANA-CHAMPAIGN), USING MOST	TLY FEDERAL	
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes [X No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	? Yes	X No
3	If "Yes," describe these changes on Schedule O.	: 165 -	140
	•		
4	Describe the organization's program service accomplishments for each of its three largest program services, a		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ners, the total expenses, and	a
	revenue, if any, for each program service reported.		<u> </u>
4a	(Code) (Expenses \$11,950. including grants of \$) (Reve	enue \$ 1,9	<u>95.</u>)
	REIMBURSEMENT FOR DAMAGES		
	······································		
	·		
	CDC BOO		
4b		enue \$ 418,6	<u>RT•</u>)
	INTERNET SERVICES AND FIBER-OPTIC BROADBAND NETWORK		
			
		·	
			
_			
4c	(Code) (Expenses \$) (Reve	enue \$)
		· · · · · · · · · · · · · · · · · · ·	
		· · · · · · · · · · · · · · · · · · ·	
			
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$		
<u>4e</u>	Total program service expenses ► 688,672.		
		Form 990	(2013)

endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable. 22 a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 23 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 24 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 VII 25 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 VII 26 Did the organization amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 26 Did the organization amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 27 Did the organization obtain separate, independent audited financial statements for the tax year include a footnote that addresses the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 28 Did 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 29 Did the organization as school described in section 170(b)(1)(A)(b)? If "Yes," complete Schedule E 29 Did the organization report an Expansive Schedule F, Parts II and IV 20 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 20 Did the		- To The Control of t			
## 1 # 2 # 2 # 2 # 2 # 2 # 2 # 2 # 2 # 2		·		Yes	No
2 Is the organization required to complete Schedule (f). Schedule of Contributors) 3 Dd the organization engage in direct or indirect optical campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule (f). Part I I Section 501(x)(3) organization. Dd the organization engage in lobbying activities, or have a section 501(x)) election in effect during the tax year? If "Yes," complete Schedule (f). Part II I is the organization as obtained the Part Nie organization assessments, or similar amounts as obtained in Part Nie organization assessments as obtained in Part Nie organization and the organization amount on a divised funds or any similar funds or accounts? If "Yes," complete Schedule (f). Part II I de organization creave or hold a conservation easement, including easements to preserve open space, the environment, historic lain drars, or historic ordanization areas or historic ordanization areas or historic attributories? If "Yes," complete Schedule (g). Part II I Dd 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 in e21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X in e21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X in e21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X in e21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X in e21, for escrower or custodial account liability, serve as a custodian for amounts not listed in Part X in e21, for escrower or escription or the part X in e21, for escrower or escription or escription or escription or the part X in e21, for escription or escription or escription or escription or escription or escription or e	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 Did the organization engage in direct or indirect policical campagin activities on behalf of or in opposition to candidates for public officery if "Yes," complete Schedule C, Part I for the organization as action 501(k) organization. Did the organization engage in lobbying activities, or have a section 501(k) election in effect during the fax year" If "Yes," complete Schedule C, Part II for the organization as action 501(k)(4), 501(k)(6), 501(k)		If "Yes," complete Schedule A	_1_		X
public office? If 1'Yes, complete Schedule C, Part I 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 1'Yes, complete Schedule C, Part II 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 98-199" If "es," complete Schedule C, Part II Ab Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II Did the organization report an amount in Part X, line 21, for escribor 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 negotation services? If "Yes," complete Schedule D, Part II Did the organization report an amount for all particular to the service of the schedule D, Part II If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IV Did the organization report an amount for windings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IV Did the organization report an amount for other assets 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 XI Did the organization report an amount for other lassets 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 XI Did the organization report an amount for other lassets in Part X, line 18. That is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X X I	2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
4 Section 501(c)(3) organizations. Did the organization apage in lobbying activities, or have a section 501(n) election in effect during the tax year? If 'Yes, 'complete Schedule C, Part II is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes, 'complete Schedule C, Part II organization marked any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part II organization receive or hold a conservation assement, including assements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes, 'complete Schedule D, Part II organization marked areas, or historic structures? If 'Yes, 'complete Schedule D, Part II organization report an amount in Part X, line 21, for secrow or custodial account liability, serve as a custodian services? If 'Yes, 'complete Schedule D, Part II organization report any or the following questions is 'Yes,' then complete Schedule D, Part VI if the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Part VI if the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Part VI if the organization report an amount for investments - other securities in Part X, line 12 lift hat is 5% or more of its total assets reported in Part X, line 167 If 'Yes, 'complete Schedule D, Part VII if the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 If 'Yes, 'complete Schedule D, Part XII it is XII in the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 If 'Yes, 'complete Schedule D, Part XII it is XII in the organization report an amoun	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
duming the tax year? if "Yes," complete Schedule C, Part II 1 Is the organization a section SOI (c)(4), 501 (c)(5), or 501 (c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Reverue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advised in the organization receive or hold a conservation easement, including easements to preserve open space. 6 V X 7 Did the organization receive or hold a conservation easement, including easements to preserve open space. 8 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 negotation services? If "Yes," complete Schedule D, Part IV 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 negotation services? If "Yes," complete Schedule D, Part IV 10 Did the organization report an amount for liand, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V in Did the organization report an amount for investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part V in Did the organization report an amount for other liabilities 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 X in 16? If "Yes," complete Schedule D, Part X in 16? If "Yes," complete Schedule D, Part X in 16? If "Yes," complete Schedule D, Part X in 16? If "Yes," complete Schedule D, Part X in 16? If "Yes," complete Schedule D, Part X in 16? If "Yes," complete Schedule D, Part X in 16? If "Yes," complete Schedule D, Part X in 16? If "Yes," complete Schedule D, Part X in		public office? If "Yes," complete Schedule C, Part I	3		X
5 Is the organization a section SO1(c)(4), SO1(c)(5), or SO1(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98:197 if "Yes," complete Schedule C, Part III 5 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 II 7 Did the organization reserve in rhold a conservation easement, including easements to preserve open space. 8 Did the organization amount on rhold a conservation easement, including easements to preserve open space. 9 Did the organization maintain collections of works of art, instrucial treasures, or other similar assets? If "Yes," complete Schedule D, Part III 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account habitity, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? 17 If "Yes," complete Schedule D, Part IV 18 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 19 Did the organization report an amount for investments: other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII 10 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 10 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 XIII 11 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 XIII 11 Did the organization report	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
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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 III 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 9 Did the organization or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization or since the following questions is "Yes," then complete Schedule D, Part VIIII, Its, or X as applicable. 10 Did the organization answer to any of the following questions is "Yes," then complete Schedule D, Part SVIII, IVII, IVI, VIII, IVI, VIII, IVI, VIII, IVI, VIII, IVI, VIII, VI	6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 9 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account hability, 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 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 11 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 V 11 Did the organization report an amount for westments - organization report an amount for westments - organization and amount for investments organization and part X, line 16? If "Yes," complete Schedule D, Part V 11 Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X 11 Did the organization report an amount for other liabilities in Part X, line 15? If "Yes," complete Schedule D, Part X 11 Did the organization report an amount for westments for the tax year include a footinote that addresses the organization in school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule D, Part X 11 Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 11 Did the organization an anisomal or included properties of the United States? Did the organization an anisomal or included properties Schedule D, Part X 11 Did th		provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
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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 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a X Did the organization maintain an office, employees, or agents outside of the United States? 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 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 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 18 To 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 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X	12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
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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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X	18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
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20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X	19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		complete Schedule G, Part III	19		_X
	20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H			X
	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			

			_	
	•		Yes	No
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		X
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 27 If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J .	23		_X_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) 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		_X_
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		_X_
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or		i	
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		<u> X</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	ļ		
	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		<u>X</u>
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		28a		_ <u>X</u> _
b		28b		_X_
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		<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			7.5
	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			7.7
^^	If "Yes," complete Schedule N, Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		<u>X</u>
33	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	22		v
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		<u>X</u>
J-4	Part V, line 1	34	х	
252	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-21	X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	SSA		Λ
D	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?	_555		
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	- 50		
~,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	ł	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		$\neg \uparrow$	
	Note. All Form 990 filers are required to complete Schedule O	38	\mathbf{x}	
			990 (2013)
			•	,

	Check if Schedule O contains a response or note to any line in this Part V	_							
			Yes	No					
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable								
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			1					
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			l					
	(gambling) winnings to prize winners?	1c	X						
2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return 2a 16								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X						
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)								
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		_X_					
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			1					
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X					
b	If "Yes," enter the name of the foreign country ▶								
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			1					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u> X</u>					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X_					
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit								
	any contributions that were not tax deductible as charitable contributions?	6a		<u> X</u>					
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			1					
	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).	_		7.7					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	70		x					
	to file Form 8282? If "Yes." indicate the number of Forms 8282 filed during the year 7d	7с							
d	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		x					
e f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 1		X					
q	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X					
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X					
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting								
Ū	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		X					
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the organization make any taxable distributions under section 4966?	9a		x					
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X					
10	Section 501(c)(7) organizations. Enter.			1					
а	Initiation fees and capital contributions included on Part VIII, line 12			1					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			1					
11	Section 501(c)(12) organizations. Enter		:						
а	Gross income from members or shareholders 11a								
b	Gross income from other sources (Do not net amounts due or paid to other sources against								
	amounts due or received from them)			ĺ					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	_12a		<u> </u>					
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			1					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	4-		 					
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		 -					
	Note. See the instructions for additional information the organization must report on Schedule O								
þ	Enter the amount of reserves the organization is required to maintain by the states in which the								
_	organization is licensed to issue qualified health plans [13b] [13c] [13c]								
	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanging services during the tay year?	140		X					
	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b							
<u> </u>	ii 165, Has it filed a Form (20 to report these payments). If 140, provide an explanation in ocheonic o		990	(2013)					
		. 5.11		,=5,0)					

Form 990 (2013) URBANA CHAMPAIGN BIG BROADBAND NFP 46-3991728 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.		•								
	Check if Schedule O contains a response or note to any line in this Part VI			\mathbf{x}							
Sec	tion A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year 9										
	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.										
h	b Enter the number of voting members included in line 1a, above, who are independent 1b 9										
2											
-	officer, director, trustee, or key employee?										
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	2		X							
Ū	of officers, directors, or trustees, or key employees to a management company or other person?										
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X							
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X							
6	Did the organization have members or stockholders?	6		X							
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or										
, .	more members of the governing body?	7a		x							
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or										
~	persons other than the governing body?	7b		x							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	1.0									
а	The governing body?	8a	Х								
b	Each committee with authority to act on behalf of the governing body?	8b	Х	•							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the										
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)										
			Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a		_X_							
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,										
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b									
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X								
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.										
12a		12a	X								
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X								
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	ın Schedule O how this was done	12c	X								
13	Did the organization have a written whistleblower policy?	13		_X_							
14	Did the organization have a written document retention and destruction policy?	14		X							
15	Did the process for determining compensation of the following persons include a review and approval by independent										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		v								
a	The organization's CEO, Executive Director, or top management official	15a	X X								
b	Other officers or key employees of the organization	15b	Λ								
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).										
ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	160		X							
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a		- 11							
D	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's										
	exempt status with respect to such arrangements?	16b									
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ► NONE										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le								
	for public inspection. Indicate how you made these available. Check all that apply										
	Own website Another's website X Upon request Other (explain in Schedule O)										
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	d finan	cıal								
	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	ion 🕨	•								
	LESLIE LUNDY - 217-840-0814										
	713 EDGEBROOK DRIVE, CHAMPAIGN, IL 61820	_	_	_							

Form	$\alpha \alpha \alpha$	100	401	

URBANA CHAMPAIGN BIG BROADBAND NFP

46-3991728

Page 7

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

Check if Schedule (contains a response or note to an	y line in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per	box	(C) POSITION (do not check more than one box, unless person is both an officer and a director/trustee)				h an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) BRANDON BOWERSOX-JOHNSON	5.00	X		X				0.	0.	0
PRESIDENT (2) MICHAEL DELORENZO	0.50	Λ		Δ					0.	0
DIRECTOR		X						0.	0.	0
(3) DEBORAH FRANK FEINEN DIRECTOR	0.50	x						0.	0.	0
(4) JON GANT DIRECTOR	5.00	х						0.	0.	0
(5) PAUL HIXSON DIRECTOR	0.50	x						0.	0.	0
(6) PETER RESNICK DIRECTOR	0.50	х						0.	0.	0
(7) CRAIG ROST DIRECTOR	0.50	х						0.	0.	0
(8) DENNIS SCHMIDT DIRECTOR	5.00	х						0.	0.	0
(9) CHARLIE SMYTH DIRECTOR	5.00	х						0.	0.	0
(10) LESLIE LUNDY TREASURER	0.50			х				0.	0.	0
(11) WILLIAM DEJARNETTE	40.00			41				0.		
EXECUTIVE DIRECTOR OCTOBER 2013 - AP				X				41,322.	0.	0
(12) SABRINA GOSNELL OPERATIONS MANAGER, SECRETARY	40.00			х				56,483.	0.	0 .
										·
								:		
							<u></u>			······································
				_				,		

Form 990 (2013) URBANA C									46-39	917	728	Page 8
Part VII Section A. Officers, Directors, Trus	1	ploy	ees			ghe	st C	Compensated Employe	es (continued)			
、 (A) Name and title	(B) Average hours per week	offic	not c , unle	Pos heck ss pe	more rson	than s bot or/trus	h an	from	(E) Reportable compensation from related		Estimamou oth	nated int of ner
	hours for related organizations below line)	related of patricular control of the patricu								from from organi and re organiz	the zation elated	
					:							
1b Sub-total		<u> </u>					>	97,805.		0.		0.
 Total from continuation sheets to Part VI Total (add lines 1b and 1c) 	II, Section A						▶	97,805.		0.		0.
2 Total number of individuals (including but n compensation from the organization	ot limited to th	ose	liste	ed at	bove	e) wh	no r	eceived more than \$100	,000 of reportable			0
3 Did the organization list any former officer,			e, ke	у еп	nplo	yee,	or	highest compensated e	mployee on		Ye	
line 1a? If "Yes," complete Schedule J for s 4 For any individual listed on line 1a, is the su			ompo	ensa	ation	anc	ot	her compensation from	the organization	F	3	<u> </u>
and related organizations greater than \$150Did any person listed on line 1a receive or a			•						dual for services	-	4	X
rendered to the organization? If "Yes," com Section B. Independent Contractors	plete Schedul	e J f	or su	uch j	pers	on					5	X
Complete this table for your five highest co										ensa	tion from	1
the organization. Report compensation for (A)					vith (or w	ithir	(B)			(C)	
Name and business	address	NC	ONE	<u> </u>			\dashv	Description of s	ervices		mpensa	tion
											.	
							-					
							_					
2 Total number of independent contractors (i	ncludina but n	ot li	mite:	d to	the	Sp lie	ted	1 ahove) who received m	ore than			
\$100,000 of compensation from the organic		J. 111			(_						

URBANA CHAMPAIGN BIG BROADBAND NFP 46-3991728 Page 9 Form 990 (2013) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D)
Revenue excluded from tax under sections 512 - 514 (B) Related or Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a b Membership dues 1b Fundraising events 1c 1đ Related organizations e Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f 783,229. g Noncash contributions included in lines 1a-1f \$ 783,229 Total, Add lines 1a-1f Business Code 290,484. 290,484 Program Service Revenue 2 a SUBSCRIBER FEES 221000 120,561. 120,561. IRU MAINTENANCE FEES 221000 c DARK FIBER INCOME 221000 7,636. 7,636 f All other program service revenue 418,681 Total. Add lines 2a-2f Investment income (including dividends, interest, and 3 other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (II) Personal 6 a Gross rents b Less. rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less. direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 1,995. 221000 1,995. 11 a OTHER INCOME b d All other revenue 1,995. e Total. Add lines 11a-11d

203,908.

420,676.

Total revenue See instructions.

0.

Sect	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns All oth	ner organizations must co	mplete column (A).	
	Check if Schedule O contains a respor				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
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 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	82,159.	74,659.	7,500.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	53,933.	26,967.	26,966.	
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	4,161.	2,081.	2,080.	
9	Other employee benefits	2,642.	1,321.	1,321.	
10	Payroll taxes .	6,067.	3,034.	3,033.	
11	Fees for services (non-employees)				
а	Management				
b	Legal	113,407.	68,044.	45,363.	
С	Accounting				
	Lobbying	_			
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	64,463.	63,263.	1,200.	
12	Advertising and promotion	1 610		1 (10	
13	Office expenses	1,612.		1,612.	
14	Information technology				
15	Royalties	76 020	76.020		
16	Occupancy	76,030.	76,030.		
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	2 0 6 5	2 065		
19	Conferences, conventions, and meetings	2,865.	2,865.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,356.	3,214.	2,142.	
23	Insurance Other expenses, Itemize expenses not covered	5,330.	3,414.	4,144.	
24	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	NETWORK MAINTENANCE	114,006.	114,006.		
h	BBS EXPENSES	112,346.	112,346.		
c	BAD DEBT EXPENSE	108,009.		108,009.	
d	LEGAL SETTLEMENT	100,000.	100,000.		
	All other expenses	75,789.	40,842.	34,947.	
25	Total functional expenses Add lines 1 through 24e	922,845.	688,672.	234,173.	0.
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined			ļ	
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
					F 000 (0010)

Form 990 (2013) Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) (A) End of year Beginning of year 79,303. 1 Cash - non-interest-bearing 1 2 Savings and temporary cash investments 2 196,154. 3 Pledges and grants receivable, net 3 390,782. 4 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 instr). Complete Part II of Sch L 6 Notes and loans receivable, net 7 8 Inventories for sale or use 8 7,453. 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a b Less: accumulated depreciation 10b 10c 11 Investments · publicly traded securities 11 12 Investments · other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 0 673,692. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 288,852. Accounts payable and accrued expenses 17 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 0 103,777. 25 Total liabilities. Add lines 17 through 25 0 392,629. 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 84,909. 27 Unrestricted net assets 27 196,154. 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31

> 673,692. Form **990** (2013)

281,063.

32

33

34

0.

0.

32

33

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

	1990 (2013) URBANA CHAMPAIGN BIG BROADBAND NFP	46-3	991728	Pag	e 12
Pa	rt XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI				Щ
			1 000		00
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,203		
2	Total expenses (must equal Part IX, column (A), line 25)	2		, 84	
3	Revenue less expenses Subtract line 2 from line 1	3		,06	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			0.
5	Net unrealized gains (losses) on investments	5	.		
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,		201	0.0	c
Da	column (B)) rt XIII Financial Statements and Reporting	10	281	, 00	03.
I a				ĺ	\mathbf{x}
	Check if Schedule O contains a response or note to any line in this Part XII			/es	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			163	140
•	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	-		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	\mathbf{x}	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both			1	
	X Separate basis Consolidated basis Both consolidated and separate basis			- 1	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audıt,		İ	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audıt			
	Act and OMB Circular A-133?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit		ſ	_
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form 9	90 (2	2013)

SCHEDULE D

(Form 990)

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.

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

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	URBANA CHAMPAIGN B	IG BROADBAND NFP		46-39917	728
Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds o	r Acco	unts.Complete if th	ne
	organization answered "Yes" to Form 990, Part IV, lin	e 6.			
		(a) Donor advised funds	(b) Fu	nds and other accou	ınts
1	Total number at end of year				
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	funds		
_	are the organization's property, subject to the organization's	_		Yes	☐ No
6	Did the organization inform all grantees, donors, and donor a		ed only		
_	for chantable purposes and not for the benefit of the donor of		-		
	impermissible private benefit?			Yes	☐ No
Pai		ganization answered "Yes" to Form 990, Part	: IV, line 7		
1	Purpose(s) of conservation easements held by the organizat				
	Preservation of land for public use (e.g., recreation or		rcally imp	ortant land area	
	Protection of natural habitat	Preservation of a certifie	-		
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of	a conserv	ation easement on t	the last
	day of the tax year				
	•			Held at the End of th	e Tax Year
а	Total number of conservation easements		2a		
þ	Total acreage restricted by conservation easements		2b		
c	Number of conservation easements on a certified historic str	ructure included in (a)	2c		
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure			
	listed in the National Register		2d	<u> </u>	
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the or	ganızatıo	n during the tax	
	year ▶				
4	Number of states where property subject to conservation ea	sement is located >			
5	Does the organization have a written policy regarding the pe	nodic monitoring, inspection, handling of			
	violations, and enforcement of the conservation easements	t holds?		Yes	☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting,	, and enforcing conservation easements durii	ng the yea	ar ▶	
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during the	e year ►	\$	_
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 170(h)(4)(B)(ı)		
	and section 170(h)(4)(B)(ii)?			Yes	L∐ No
9	In Part XIII, describe how the organization reports conservat	·			
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes the	organiza	ition's accounting fo	r
	conservation easements.	(4) 11:4:4:4	· · · O::	1	
Pai	rt III Organizations Maintaining Collections o	-	er Simi	iar Assets.	
	Complete if the organization answered "Yes" to Form	·			
1a	If the organization elected, as permitted under SFAS 116 (AS	,,			•
	historical treasures, or other similar assets held for public ex		e of public	c service, provide, in	Part XIII,
	the text of the footnote to its financial statements that descr				
b	If the organization elected, as permitted under SFAS 116 (AS				
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public	service,	provide the following	g amounts
	relating to these items			•	
	(i) Revenues included in Form 990, Part VIII, line 1			p	
_	(ii) Assets included in Form 990, Part X			\$	-
2	If the organization received or held works of art, historical tre	•	ain, provid	je	
	the following amounts required to be reported under SFAS 1	To (ADC 908) relating to these items.	_	•	
a	Revenues included in Form 990, Part VIII, line 1			•	
b	Assets included in Form 990, Part X			D	

Sche	dule D (Form 990) 2013 URBANA	CHAMPAIGN 1	BIG	BROADB	AND NFP		46	-39	91728	Page 2
Par	t III Organizations Maintaining C	ollections of Ar	t, His	torical Tr	easures, or	Other	Similar A	Asset	S (continu	ied)
3	Using the organization's acquisition, accessi	on, and other record	s, chec	k any of the	following that a	are a sign	ıfıcant use	of its c	collection	items
	(check all that apply):									
а	Public exhibition	d			hange program	ıs				
b	Scholarly research	е	لــا	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co			•	-	=		ın Part	XIII.	
5	During the year, did the organization solicit of					sımılar as	ssets		1	
Do	to be sold to raise funds rather than to be ma								Yes	No_
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa	-	ete if the	e organizatio	n answered "Y	es" to Fo	rm 990, Pa	art IV, III	ne 9, or	
			liani for		a or other sees	to not in	dudod			
та	Is the organization an agent, trustee, custod	ian or other intermed	liary for	Contribution	is or other asse	ets not inc	luaea		l v	X No
	on Form 990, Part X?	and complete the fel	llauman	table.	•			L	Yes	IAJ NO
D	If "Yes," explain the arrangement in Part XIII	and complete the lo	llowing	labie.					Amount	
•	Beginning balance						10		Amount	
c d	Additions during the year						1c		78	,163.
e	Distributions during the year						1e		, <u>u</u>	7 = 0 3 •
f	Ending balance						1f		78	,163.
2a	Did the organization include an amount on F	orm 990. Part X. line	21?				<u> </u>	Х	Yes	☐ No
	If "Yes," explain the arrangement in Part XIII.	•		on has been	provided in Pa	rt XIII				$\overline{\mathbf{x}}$
Par										
		(a) Current year	(b) P	rior year	(c) Two years I	back (d)	Three years	s back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions								· · · · · · · · · · · · · · · · · · ·	
C	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities							Ì		
	and programs .									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curi	rent year end balance	e (line 1	g, column (a	i)) held as					
а	Board designated or quasi-endowment	 	_%							
	Permanent endowment	%								
С	Temporarily restricted endowment	%								
_	The percentages in lines 2a, 2b, and 2c shou									
3a	Are there endowment funds not in the posse	ssion of the organiza	ation tha	at are held a	nd administere	d for the	organizatio	on	Г	
	by									es No
	(i) unrelated organizations					-	•		3a(ı)	
h	(ii) related organizations If "Yes" to 3a(ii), are the related organizations	s lieted as required of	n Sahar	dulo D2					3a(iı) 3b	
4	Describe in Part XIII the intended uses of the	•							SU	
	t VI Land, Buildings, and Equipm		WITTOTAL	idildo						
	Complete if the organization answere		, Part IV	, line 11a S	ee Form 990, P	art X, line	10			
	Description of property	(a) Cost or ot		(b) Cost			mulated		(d) Book	value
		basis (investm		basis			ciation			-
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment									
е_	Other			_						
<u>Total</u>	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colur	nn (B), line 1	O(c))		<u> </u>			0.

Schedule D (Form 990) 2013

	(Form 990) 2013 URBANA CHAN	MPAIGN BIG	BROAL	BAND NFF		46-3991728 Page
Part VII	Investments - Other Securities.					
	Complete if the organization answered "Yes"					
(a) Descrip	tion of security or category (including name of security)	(b) Book value		(c) Method of v	aluation Cost or	end-of-year market value
(1) Financia	al derivatives			<u>.</u>		
(2) Closely	held equity interests				· · · · · · · · · · · · · · · · · · ·	
(3) Other						
(A)						
(B)				*****		
(C)				····		
(D)						
(E)						
(F)						
(G)						
(H)			•			
	b) must equal Form 990, Part X, col. (B) line 12.) ►	<u>_</u>				
Part VIII	Investments - Program Related.					
	Complete if the organization answered "Yes"	to Form 990, Part IV	, line 11c	See Form 990,	Part X, line 13	
	(a) Description of investment	(b) Book value		(c) Method of v	aluation Cost or	end-of-year market value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	b) must equal Form 990, Part X, col. (B) line 13.)			· ·		
Part IX	Other Assets.					
	Complete if the organization answered "Yes"	to Form 990, Part IV	, line 11d	See Form 990,	Part X, line 15	
	(a)	Description				(b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	mn (b) must equal Form 990, Part X, col (B) lin	e 15)				
Part X	Other Liabilities.					
	Complete if the organization answered "Yes"	to Form 990, Part IV,	line 11e	or 11f See Form	990, Part X, line	25
1.	(a) Description of liability		(b) E	Book value		
(1) Fed	eral income taxes					
(2) UC	2B PLEDGES		. 	700.		
(3) DU	E TO ITV3			100,944.		
(4) PA	YROLL TAXES PAYABLE			2,133.		
(5)						
(6)						
(7)						
(8)						
(9)						
	mn (b) must equal Form 990, Part X, col (B) lin	e 25)		103,777.	•	
	for uncertain tax positions. In Part XIII, provide				inancial statemen	its that reports the
	ation's liability for uncertain tax positions unde			=		

Schedule D (Form 990) 2013

Schedule D (Form 990) 2013 URBANA CHAMPAIGN BIG BE		46-3991728 Page 4
Part XI Reconciliation of Revenue per Audited Financial Sta	•	er Return.
Complete if the organization answered "Yes" to Form 990, Part IV, lin	ne 12a.	
1 Total revenue, gains, and other support per audited financial statements		1 1,203,908.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	
a Net unrealized gains on investments	2a	
b Donated services and use of facilities	. 2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIII)	2d	
e Add lines 2a through 2d		2e U.
3 Subtract line 2e from line 1		3 1,203,908.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	1.1	j
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII.) c Add lines 4a and 4b	4b	
		4c 0. 5 1,203,908.
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 Part XII Reconciliation of Expenses per Audited Financial St		
Complete if the organization answered "Yes" to Form 990, Part IV, lin	•	oor rictarri.
Total expenses and losses per audited financial statements	124	1 922,845.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25.		722,043.
a Donated services and use of facilities	2a	
b Prior year adjustments	2b	
c Other losses	2c	
d Other (Describe in Part XIII.)	2d	
e Add lines 2a through 2d	20	
3 Subtract line 2e from line 1		3 922,845.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1		32370231
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII)	4b	
c Add lines 4a and 4b		4c 0.
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	8.)	5 922,845.
Part XIII Supplemental Information.		
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a		ine 4, Part X, line 2, Part XI,
PART IV, LINE 2B:		
EXPLANATION: THE ORGANIZATION CURRENTLY H	OLDS IN ESCROW A	BALANCE OF
PLEDGE CONTRIBUTIONS RECEIVED FROM MEMBER	S IN THE COMMUNIT	Y, WITH AN
UNDERSTANDING THAT IF THE UC2B BROADBAND	NETWORK WAS BROUG	HT TO THEIR
LOCATIONS IN THE FUTURE, THEIR SUBSCRIPTI	ON FEES WOULD BE	OFFSET BY THE
AMOUNT OF THEIR CONTRIBUTIONS. AS THE OP	ERATIONS OF THE N	ETWORK WERE
ASSUMED BY ITV-3 IN JUNE 2014, THIS ESCRO	W BALANCE WAS PAY	ABLE TO ITV-3 AS
OF JUNE 30, 2014, WHICH IS REFLECTED IN T	HE OTHER LIABILIT	IES ACCOUNT
BALANCE ON THE STATEMENT OF FINANCIAL POS	ITION.	

Schedule D (Form 990) 2013 Part XIII Supplemental In	URBANA CHAMPAIGN BIG BROADBAND NF	P 46-3991728 Page 5
Part XIII Supplemental In	formation (continued)	
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<u> </u>		

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization

URBANA CHAMPAIGN BIG BROADBAND NFP

Employer identification number 46-3991728

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TRANSITION OF A FIBER-OPTIC BROADBAND NETWORK CONSTRUCTED BY THE
CONSORTIUM (CITY OF CHAMPAIGN, CITY OF URBANA, UNIVERSITY OF ILLINOIS
AT URBANA-CHAMPAIGN), USING MOSTLY FEDERAL GRANT FUNDS, TO AN
EXPERIENCED INTERNET SERVICE PROVIDER (ISP) FOR THE OPERATIONAL PHASE
OF THE PROJECT. URBANA-CHAMPAIGN'S LONGER TERM GOAL IS TO EXPAND THE
AVAILABILITY OF, AS WELL AS EDUCATE THE COMMUNITY ABOUT, THE BENEFITS
OF BROADBAND INTERNET.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
GRANT FUNDS, TO AN EXPERIENCED INTERNET SERVICE PROVIDER (ISP) FOR THE
OPERATIONAL PHASE OF THE PROJECT. URBANA-CHAMPAIGN'S LONGER TERM GOAL
IS TO EXPAND THE AVAILABILITY OF, AS WELL AS EDUCATE THE COMMUNITY
ABOUT, THE BENEFITS OF BROADBAND INTERNET.
FORM 990, PART VI, SECTION B, LINE 11:
EXPLANATION: THE BOARD OF DIRECTORS WILL BE PROVIDED WITH A PDF COPY OF THE
FORM 990 VIA E-MAIL BEFORE IT IS FILED IN ORDER TO REVIEW FOR ANY QUESTIONS
AND CHANGES THEY MAY HAVE.
FORM 990, PART VI, SECTION B, LINE 12C:
EXPLANATION: THE ORGANIZATION REGULARLY AND CONSISTENTLY MONITORS AND
ENFORCES COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY BY REQUIRING ALL
BOARD MEMBERS, DIRECTORS, AND OFFICERS TO DISCLOSE ANY CONFLICTS AT THE
START OF ANY BOARD MEETING AND MUST ABSTAIN FROM ANY INVOLVEMENT IN BOARD
ACTION ITEMS FOR WHICH THEY HAVE A CONFLICT.

Name of the organization **Employer identification number** URBANA CHAMPAIGN BIG BROADBAND NFP 46-3991728 FORM 990, PART VI, SECTION B, LINE 15: EXPLANATION: THE ORGANIZATION SETS COMPENSATION BY HAVING THE COMPENSATION PACKAGE REVIEWED BY THE NINE MEMBER BOARD. THE COMPENSATION, BASED ON EXPECTED DUTIES AND JOB DESCRIPTION, IS DETERMINED BY THE ORGANIZATION'S BOARD MEMBERS IN CLOSED SESSION. FORM 990, PART VI, SECTION C, LINE 18: EXPLANATION: THE ORGANIZATION MAKES ITS FORM 1024 AND 990 AVAILABLE FOR PUBLIC INSPECTION UPON REOUEST. FORM 990, PART VI, SECTION C, LINE 19: EXPLANATION: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990, PART XII, LINE 2C EXPLANATION: NO CHANGES HAVE BEEN MADE IN THE PROCESS. ADDITIONAL DISCLOSURE EXPLANATION: URBANA-CHAMPAIGN BIG BROADBAND (THE ORGANIZATION) IS A NONPROFIT ORGANIZATION FORMED AUGUST 16, 2013. PRIOR TO BEING ORGANIZED AS A SEPARATE NONPROFIT ENTITY, THE ORGANIZATION EXISTED AS AN INTERGOVERNMENTAL CONSORTIUM, KNOWN AS THE UC2B INTERGOVERNMENTAL CONSORTIUM (THE CONSORTIUM), FORMED BY THE CITY OF CHAMPAIGN, ILLINOIS (CHAMPAIGN), THE CITY OF URBANA, ILLINOIS (URBANA), AND THE UNIVERSITY OF ILLINOIS AT URBANA-CHAMPAIGN (THE UNIVERSITY). ACTIVITY REPORTED IN Schedule O (Form 990 or 990-EZ) (2013) Name of the organization

URBANA CHAMPAIGN BIG BROADBAND NFP

Employer identification number 46-3991728

THIS RETURN COVERS A FULL YEAR PERIOD FROM JULY 1, 2013, TO JUNE 30,

2014. THE BOARD OF DIRECTORS OF THE ORGANIZATION IS MADE UP OF NINE

MEMBERS (THREE OF WHICH ARE APPOINTED BY EACH CONSORTIUM ENTITY). THE

ORGANIZATION WAS FORMED TO FACILITATE THE TRANSITION OF A FIBER-OPTIC

BROADBAND NETWORK CONSTRUCTED BY THE CONSORTIUM, USING MOSTLY FEDERAL

GRANT FUNDS, TO AN EXPERIENCED INTERNET SERVICE PROVIDER (ISP) FOR THE

OPERATIONAL PHASE OF THE PROJECT. THE ORGANIZATION'S LONGER TERM GOAL

IS TO EXPAND THE AVAILABILITY OF, AS WELL AS EDUCATE THE COMMUNITY

ABOUT, THE BENEFITS OF BROADBAND INTERNET.

FUNDING FOR THE CONSTRUCTION OF THE FIBER NETWORK WAS PROVIDED UNDER A

FEDERAL GRANT FROM THE NATIONAL TELECOMMUNICATIONS AND INFORMATION

ADMINISTRATION OF THE UNITED STATES DEPARTMENT OF COMMERCE (NTIA), AS

PART OF THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGRAM (BTOP). THE

CONSORTIUM AGREED TO PROVIDE NON-CONSTRUCTION FUNDING FOR THE START-UP

PERIOD OF THE PROJECT, DEFINED AS BEGINNING AUGUST 15, 2011, AND ENDING

OCTOBER 31, 2014, IN A LETTER OF UNDERSTANDING (LOU) AGREEMENT SIGNED

IN JULY 2011 AND AS AMENDED THEREAFTER. IN ADDITION, THE CONSORTIUM,

AS WELL AS OTHER UNRELATED PARTIES, AGREED TO PROVIDE REIMBURSEMENTS

FOR NETWORK MAINTENANCE EXPENSES REALIZED UNDER 20 YEAR INDEFEASIBLE

RIGHT TO USE AGREEMENTS (IRU), EXPIRING BETWEEN THE YEARS 2032 AND

IN SEPTEMBER 2013 THE CONSORTIUM DONATED THE FIBER NETWORK ASSETS AND
REVENUE STREAMS RELATED TO THOSE ASSETS TO THE ORGANIZATION IN EXCHANGE
FOR THE ORGANIZATION TAKING ON THE OBLIGATIONS DICTATED BY THE NTIA, AS
WELL AS THE LIABILITY TO OVERSEE AND MAINTAIN THE NETWORK ASSETS IN

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization URBANA CHAMPAIGN BIG BROADBAND NFP	Employer identification number 46-3991728
DURING THE TRANSITIONAL PHASE IN WHICH THE ORGANIZATION W	AS SOLICITING
PARTNERS, THE ORGANIZATION OVERSAW THE DAILY OPERATIONS A	ND MAINTENANCE
OF THE NETWORK FOR APPROXIMATELY SIX MONTHS.	
ON FEBRUARY 28, 2014, THE ORGANIZATION ENTERED INTO A DIR	ECT FINANCING
LEASE AGREEMENT WITH ITV-3 IN WHICH, BEGINNING JUNE 2014,	ALL FIBER
NETWORK ASSETS, AS WELL AS THE OBLIGATIONS AND LIABILITIE	S RELATED TO
THOSE NETWORK ASSETS, WERE ASSUMED BY ITV-3. ALSO ASSUMED	BY ITV-3 WERE
TWO REVENUE STREAMS RELATED TO THE OPERATIONS OF THE FIBE	R NETWORK:
SUBSCRIBER FEES INCOME AND IRU MAINTENANCE FEES INCOME.	
THE AGREEMENT WITH ITV-3 STATES THAT FOR A PERIOD OF 20 Y	EARS THE FIBER
NETWORK ASSETS WILL REVERT BACK TO THE ORGANIZATION IN TH	E EVENT THAT
ITV-3 FAILS TO PERFORM ITS OBLIGATIONS UNDER THE TERMS SE	T BY NTIA IN
ITS GRANT TO THE CONSORTIUM, OR FAILS TO MEET THE TERMS O	F ITV-3'S
AGREEMENT WITH THE ORGANIZATION.	

SCHEDULE R (Form 990)

Name of the organization Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ See separate instructions.

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

➤ Attach to Form 990.

OMB No 1545-004	2013

Employer identification number Open to Public Inspection 46-3991728

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

URBANA CHAMPAIGN BIG BROADBAND NFP

Direct controlling End-of-year assets **e** Total income ਉ Legal domicile (state or foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity

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

<u>F</u>	Section 512(b)(13) controlled	entity?	å			×				
	Section	ent	Yes							
(4)	Direct controlling	entity								
(e)	Public charity	status (if section	501(c)(3))		PUBLIC	CHARITY				
(g)	Exempt Code	section				501(C)(3)				
(c)	Legal domicile (state or	foreign country)				ILLINOIS				
(q)	Primary activity			BUILDING AND OPERATING AN	OPEN-ACCESS FIBER-OPTIC	BROADBAND NETWORK				
(a)	Name, address, and EIN	of related organization		URBANA-CHAMPAIGN BIG BROADBAND SYSTEM	CONSORTIUM (CITY OF CHAMPAIGN AS LEAD), 102 DPEN-ACCESS FIBER-OPTIC	N NEIL STREET, CHAMPAIGN, IL 61820				

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

Schedule R (Form 990) 2013

332161 09-12-13 LHA

46-3991728

Page 2

Schedule R (Form 990) 2013 URBANA CHAMPAIGN BIG BROADBAND NFP

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

Part III

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing DX managing Jile partner? 65) Yes No	(j) (k) General or Percentage managing ownership partner?
Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year	ganizations Taxable	as a Corpo	ration or Trust Co	mplete if the	e organization an	swered "Yes" c	n Form 990, Pa	ırt IV, line 34	t because it had	d one or mo	ore related
(a) Name, address, and EIN of related organization	Ni Ni	Prime	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp. S corp, or trust)	(f) Share of total income		(g) Share of end-of-year assets	(h) Percentage ownership	Section 512(b)(13) controlled entity?
										į	

Schedule R (Form 990) 2013

Page 3

Schedule R (Form 990) 2013

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

				•	
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	S S
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ns with one or more re	lated organizations listed	ın Parts II·IV?		_
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a	×
b Gift, grant, or capital contribution to related organization(s)				tb X	
c Gift, grant, or capital contribution from related organization(s)				10	×
d Loans or loan guarantees to or for related organization(s)				1 d	×
e Loans or loan guarantees by related organization(s)				1e	×
					;
† Dividends from related organization(s)				=	×
g Sale of assets to related organization(s)				1 g	×
h Purchase of assets from related organization(s)				ŧ	×
i Exchange of assets with related organization(s)				=	×
j Lease of facilities, equipment, or other assets to related organization(s)				į	×
k Lease of facilities, equipment, or other assets from related organization(s)				*	×
l Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)	-		=	×
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			-t	×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)		•	ŧ	×
 Sharing of paid employees with related organization(s) 				10	×
 P Reimbursement paid to related organization(s) for expenses 				9	
					×
 r Other transfer of cash or property to related organization(s) s Other transfer of cash or property from related organization(s) 		,		F &	××
2 If the answer to any of the above is "Yes," see the instructions for information on v	who must complete th	is line, including covered	nation on who must complete this line, including covered relationships and transaction thresholds		
(a) Name of related organization	(b) Transaction type (a·s)	(c) Amount involved	(d) Method of determining amount involved	penjon	
URBANA-CHAMPAIGN BIG BROADBAND SYSTEM	Ф	583,229.	САЅН		
(2)		T STATE OF S			
(3)					
(4)					
(5)					
(6)					!

Page 4

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

Schedule R (Form 990) 2013

Schedule F	R (Form 990) 2013	<u>URBANA</u>	<u>CHAMPAIGN</u>	BIG	BROADBAND NFP	46-3991728 Page 5
Part VII	R (Form 990) 2013 Supplemental Info	ormation				
	Provide additional inform		nses to questions or	Schedu	le R (see instructions)	
	•		<u> </u>			
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			7.511			
						
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Form **8868**

(Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No. 1545-1709

• If yo	are filing for an Automatic 3-Month Extension, comple	te only Pa	rt I and check this box		- 	▶ X				
If yor	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of	this form)						
Do not	complete Part II unless you have already been granted a	an automa	tic 3-month extension on a previous	sly filed Fo	rm 8868					
Electro	nic filing (e-file). You can electronically file Form 8868 if y	ou need a	3-month automatic extension of tir	ne to file (6 months for a c	orporation				
require	d to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	ion of time You can electronically f	ile Form 8	868 to request a	an extension				
of time	to file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for	Transfers	Associated With	Certain				
Person	al Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details	on the ele	ctronic filing of t	his form,				
visit wv	www.irs.gov/efile.and.click.on.e-file.for.Chanties.& Nonprofits									
Part	I Automatic 3-Month Extension of Time	. Only s	ubmit original (no copies ne	eded).						
A corp	pration required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and	complete						
Part I o	nly				_					
All othe	r corporations (including 1120-C filers), partnerships, REM	ICs, and ti	rusts must use Form 7004 to reques	st an exter	sion of time					
to file ir	ncome tax returns.			Enter file	er's identifying	number				
Туре о	Name of exempt organization or other filer, see instru		Employer identification number (EIN) or							
print		. ,								
-	URBANA CHAMPAIGN BIG BROADI	46-3991728								
File by the	Number street and some surviva as Ka D.O. have	Social security number (SSN)								
filing your	713 EDGEBROOK DRIVE			,	•					
return Se instructio		City, town or post office, state, and ZIP code For a foreign address, see instructions								
	CHAMPAIGN, IL 61820	Ū	·							
						,				
Enter tl	ne Return code for the return that this application is for (file	a separa	te application for each return)			0 1				
Applica	ation	Return	Application			Return				
Is For		Code	Is For	Code						
	90 or Form 990-EZ	01	Form 990-T (corporation)							
Form 9		02	Form 1041-A							
		03	Form 4720 (other than individual)							
Form 990-PF			Form 5227							
Form 990-T (sec 401(a) or 408(a) trust)			Form 6069	10						
Form 990-T (trust other than above)			Form 8870							
1 01111 3	LESLIE LUNDY	06	1 01111 007 0			12				
● The	books are in the care of ▶ 713 EDGEBROOK I	AVI AC	- CHAMDATON II. 6	1820						
	phone No ► 217-840-0814	JIVI A II	Fax No Fax No	1020						
	e organization does not have an office or place of business	n the Lin		•		\blacksquare				
	s is for a Group Return, enter the organization's four digit (lf this is fo	r the whole are:	up, obsolv thus				
box ►			· · · · · · · · · · · · · · · · · · ·		r the whole grou	• •				
					ers the extension	on is ior.				
1	request an automatic 3-month (6 months for a corporation FEBRUARY 15, 2015, to file the exemp		•		The extension					
-		t Organiza	non return for the organization name	eu above	THE extension					
13	for the organization's return for									
	► X tax year beginning AUG 16, 2013		d ending JUN 30, 2014							
•	tax year beginning AUG 10, 2013	, an	d ending <u>JUN 30, 2014</u>		<u> </u>					
2 lf	the tax year entered in line 1 is for less than 12 months, c	heck reaso	on: X Initial return	Fınal retui	'n					
	Change in accounting period									
3a It	this application is for Forms 990-BL, 990-PF, 990-T, 4720,	enter the tentative tax, less any								
nonrefundable credits See instructions				3a	\$	0.				
<u>r</u> 1	this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter any	refundable credits and							
_	this application is for Forms 330-FF, 330-1, 4720, or 6003	•	stimated tax payments made Include any prior year overpayment allowed as a credit							
b If		-		3b_	\$	0.				
b If		ayment al	lowed as a credit	3b	\$	0.				
b If	stimated tax payments made Include any prior year overp	ayment al	lowed as a credit h this form, if required,	3b 3c	\$ \$	0.				