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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)

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

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

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

Open to Public

A	For t	he 201	6 calendar year, or tax year begin	ning , 2016	s, and ending			, 20	
_			C Name of organization			D Employer ide	ntification	number	
В	Check if	applicable	BUILD-A-BEAR FOUNDATION	ON		33-100	7188		
	Add		Doing business as			7			
Х		ne change	Number and street (or P O box if mail is n	ot delivered to street address)	Room/suite	E Telephone nu	ımber		
T	Initia	al return	1954 INNERBELT BUSINES	SS CENTER DR	1	(314) 42	3-8000)	
		al return/	City or town, state or province, country, ar	nd ZIP or foreign postal code					
 	Ame	ninated ended	ST. LOUIS, MO 63114			G Gross receipt	s \$	567	7,972
 		lication	F Name and address of principal officer	RAYMOND MUELLER		H(a) Is this a gro		Yes	
L_	pen	aing	1954 INNERBELT BUS CT	R DR ST. LOUIS, MO 63	3114	subordinates (H(b) Are all subore		Н	
_	Tax-e	exempt sta) (insert no) 4947(a)(1)			ich alist (see		
<u>:</u>			WWW.BUILDABEAR.COM/FOUN		01 327	H(c) Group exem	,	•	
<u></u>				Association Other	1 Year of for	mation 2001 M		<u> </u>	MO
È	arti		mmary	(330ciation)	L rear or lor	mation 2002 in	State of leg	a dominone	
	1		describe the organization's mission or	meet eleminant estimates MAKE	A POSTTIVE	TMPACT ON	THE I	TVES O	F
	1		LDREN BY SUPPORTING PROC					1100	
٢			RYONE BY PROMOTING H.E.A		TILL CHILDE	JIKB HBAKI			
E L									
Governance	2		this box if the organization dis	· · · · · · · · · · · · · · · · · · ·			1 1		9.
9	3		er of voting members of the governing t				3		
Activities &	4		er of independent voting members of the				4		
5	5		number of individuals employed in caler				5		0.
Ç	6		number of volunteers (estimate if necess	<i>**</i> • • • • • • • • • • • • • • • • • •			6		
٩	1 '0		inrelated business revenue from Part VII				7a		0.
	<u>k</u>	Net ur	related business taxable income from F	orm 990-T, line 34	 		7b		0.
					-	Prior Year		Current Y	
يو	8		butions and grants (Part VIII, line 1h)			1,181,23		564	,112.
en	9		am service revenue (Part VIII, line 2g)				0.		0.
Revenue	10		ment income (Part VIII, column (A), line			1,88		3	,860.
	11		revenue (Part VIII, column (A), lines 5, 6				0.		<u> </u>
_	12	Total r	evenue - add lines 8 through 11 (must	equal Part VIII, column (A), line 12) .		1,183,12			,972.
	13	Grants	s and similar amounts paid (Part IX, colu	mn (A), lines 1-3)		39,5		615	,890.
9	14	Benef	ts paid to or for members (Part IX, colun	nn (A), line 4)			0.		
) y	15	Saları	es, other compensation, employee bene	fits (Part IX, column (A), lines 5-10)			0.		0.
) SU	16a	a Profes	sional fundraising fees (Part IX, column	(A), line 11e)			0.		0.
Expenses	t t		undraising expenses (Part IX, column (D	,, iii o 20, p	<u> </u>			^、 -> 、	,
j w	1 17	Other	expenses (Part IX, column (A), lines 11a expenses Add lines 13-17 (must equal	a-11d, 11f-24e)		91,02			,382.
,	18	Total e	expenses Add lines 13-17 (must equal l	Part IX, column (A), line 25 CEN	/En	130,5			,272.
-	119	Reven	ue less expenses Subtract line 18 from	line 12		1,052,5	57.	-138	,300.
Net Assets or	2			AUG n o	SOLD SOLD	eginning of Current		End of Ye	ar
્ર કું	20	Total	assets (Part X, linc 16)		2017 . 2011	1,810,38			,106.
T Š	21	Total I	iabilities (Part X, line 26)		છું 🗀	71,2	19.	108	,305.
	22	Net as	sets or fund balances Subtract line 21	from line 20 QGDEN.		1,739,10	51.	1,600	,801.
	art II	_Sig	nature Block						
Ur	nder pe	enalties c	f perjury, I declare that I have examined this	return, including accompanying scheo	lules and statemen	ts, and to the best o	f my knowle	edge and b	elief, it is
tru	ie, cori	rect, and	complete Declaration of preparer (other than	oπicer) is based on all information of wh	iich preparer nas ar	ny knowledge			
			By Muelle			7/8	14/17	, 	
Sig			Signature of officer			Date			
He	ere		RAY MUELLER	TREASU	JRER				
			Type or print name and title		,				
_		Print/	Type preparer's name	Preparer's signature	Date	Check	if PTIN		
Pai		1			1	self-employ	red		
	pare	Firm's	name >			Firm's EIN			
US	e Only	y	address >			Phone no			
Ma	y the		cuss this return with the preparer shown	above? (see instructions)				Yes	X No
_			Reduction Act Notice, see the separate						0 (2016)

PAGE 2

Checklist of Required Schedules

Part IV

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	_		
	complete Schedule D. Part III	8		Х
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	l	Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	\$30 A/80	20 Sept.	<i>(</i> 2233
	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,"	Land Andrews	PARKE 1 TO SECURE	ALEXANDER WIT
	complete Schedule D, Part VI	11a	Ì	Х
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		Х
c	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional .	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14 <u>a</u>	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign-investments-valued-at-\$100,000-or-more? If "Yes," complete-Schedule-F, Parts I-and-IV	14b		_X-
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		\Box	
	If "Yes," complete Schedule G, Part III	19		X
			000	

Part	V Checklist of Required Schedules (continued)		<u> </u>	ugo .
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	
24 a	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		
ď	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit		1	
		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		<u> </u>
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		İ	
	disqualified persons? If "Yes," 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,		ł	
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled		}	v
	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,	š, ,	1	ž ž
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	200	4	x
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		 -
b	Schedule L, Part IV	28b		х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200	+	
C	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		$\frac{\pi}{x}$
30	Did the organization receive more than \$25,000 in non-cash contributions in res, complete schedule w Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	23		 -
30	conservation contributions? If "Yes," complete Schedule M	30	l	Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N</i> ,			
٠.	Part I	31)	Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
-	complete Schedulc N, Part II	32	į	Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	İ	Х
-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	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
		35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,		1	
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		-	
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	

Par				
	Check if Schedule O contains a response or note to any line in this Part V	· · · · ₁	· · · · ·	ليا
		J. 1985.3	Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	Effect the flumber of Forms W-28 included in line 1a Effect -0- if not applicable,			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	1c		
20	reportable gaming (gambling) winnings to prize winners?	10	E. S.	ÆXX
Za	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0.			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			ŽŽ.
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	4.130.1300.	X
	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	_	X
b	If "Yes," enter the name of the foreign country		14.5	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR)			ر از نیاست
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_
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		- 1	
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		_X_
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or	_		
	gifts were not tax deductible?	6b	Sec. 38 (28)	
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			· V
	and services provided to the payor?	7a	-+	<u>X</u>
	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 to file Form 8282?	7c	ļ	х
	If "Yes," indicate the number of Forms 8282 filed during the year	70	338	
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	Sandik iz Sir. 13	X
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	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. Did a donor advised fund maintained by the		39	
	sponsoring organization have excess business holdings at any time during the year?	8		Х
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		_X_
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			144
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			1
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)	42-	X.L.	2002
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	36. 35	C.344
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a	25 30 C	: 000 Mg
а	Is the organization licensed to issue qualified health plans in more than one state?	2.34	7.2%	
h	Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which			
U	the organization is licensed to issue qualified health plans			
r	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
ISA			~~~	

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O	See ın	struc	tions
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sect	ion A. Governing Body and Management			
	•		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	1,		
	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		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			Ì
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		Х
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		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
•	the year by the following			
	The governing body?	8a	X	3300.2371
a	Each committee with authority to act on behalf of the governing body?	8b	X	
b		"		
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
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue		1	
Occil	On B. F Chales (This econor B requeste information about policies not required by the internal revenue	0000	Yes	No
40-	Did the agreement on heart level shouters broughes on affiliate 0	10a		X
	Did the organization have local chapters, branches, or affiliates?	100		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10b		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	$\overline{}$	X	
_	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		7/8/2
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	1	X	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	406	х	
	rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	.	v	
	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	88
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?	. 254		المقتضد
а	The organization's CEO, Executive Director, or top management official	15a		
Þ	Other officers or key employees of the organization	15b	/25 mm . 6	0 W 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		535	
	with a taxable entity during the year?	16a	N 40 40 4	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Secti	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ ATTACHMENT 1			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501(c	s(8)(only)
	available for public inspection. Indicate how you made these available. Check all that apply			
	Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest i	oolicv	, and
	financial statements available to the public during the tax year		,	
20	State the name, address, and telephone number of the person who possesses the organization's books and record RAYMOND MUELLER 1954 INNERBELT BUSINESS CENTER DRIVE ST. LOUIS, MO 63114 314-423-8000	s 🕨		
	RAYMOND MUELLER 1954 INNERBELT BUSINESS CENTER DRIVE ST. LOUIS, MO 63114 314-423-8000			

01111 000 (20							uge .
Part VII	Compensation of Officers,	Directors, Trustee	s, Key Employees,	Highest	Compensated	Employees,	and
	Independent Contractors						

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

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

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

Check this box if neither the organization no	r any related	orga	nıza	tion	CO	mpen	sate	ed any current offic	er, director, or trus	stee
(A) Name and Title	(B) Average hours per week (list any	box,	unle: er an	Pos heck ss pe	erson	e than cost sorteness	an tee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	related organizations below dotted line)	1 14 15	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1)MAXINE CLARK	0.									
CHAIRMAN, DIRECTOR	0.	Х		Х		ĺ		0.	0.	0.
(2)DARLENE ELDER	0.									
SECRETARY, DIRECTOR	40.00	Х		Х				0.	397,670.	95,990.
(3)MARSHA FUCHS	0.									
DIRECTOR	40.00	X						0.	206,497.	16,845.
(4)ERIC FENCL	0.								-	
DIRECTOR	40.00	X			X			0.	473,084.	119,176.
(5)VOIN TODOROVIC	0.	Γ^{-}								· · · · · · · · · · · · · · · · · · ·
PRESIDENT, DIRECTOR	40.00	X	<u> </u>	X	<u>.</u>		_	0.	463,087.	34,976.
(6)ANN GRIMMET	0.									
DIRECTOR	40.00	Х	L			<u> </u>		0.	262,610.	7,339.
(7)RAY MUELLER	0.									
TREASURER, DIRECTOR	40.00	Х		Х			<u>L</u> .	0.	233,207.	7,457.
(8)ELIZABETH BELTRAN	0.									
DIRECTOR	40.00	- <u>x</u>			<u> </u>			0.	138,788.	7,304.
(9)MIKE EARLY	0.									
DIRECTOR	40.00	<u> </u>			Χ_			0.	275,534.	13,156.
(10)GINA COLLINS	0.									
DIRECTOR	40.00	<u> </u>		X		<u> </u>	<u>L</u>	0.	429,846.	33,432.
(11)JENNIFER MCKINNEY	0.									
DIRECTOR	40.00	X	<u>L.</u>			<u> </u>	<u> </u>	0.	46,683.	52,704.
(12)		}								
(13)	 		lacksquare	-	-					
(14)	+									
				Ь	<u> </u>	Ь	ــــــــــــــــــــــــــــــــــــــ		·	

Form **990** (2016)

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Part VII Section A. Officers, Directors, Tru	usices, Ne	, L	ipic	ye	es,	anu i	nıg	nest Compensat	ea Emplo	yees (continued)
, (A)	(B)			(6	C)			(D)	(E)	ı	(F)
Name and title	Average				sition			Reportable	Report		Estimated
•	hours per week (list any					e than c is both		compensation	compensat		amount of other
	hours for					or/trust		from the	relate		compensation
	related		$\overline{}$	_	$\overline{}$			organization	organiza (W-2/1099		from the
	organizations	a divid	1 2	Officer	e e	등등	Former	(W-2/1099-MISC)	(11-2/1030	-1411.00)	organization
	below dotted	dividual director	institutional	-	뤛	st o	۳	(and related
	line)	Individual trustee or director	i i		Key employee) A					organizations
	1	stee	trustee		") ěn		{	Į.		
	1		8		ļ	Highest compensated employee	1	l .	[1
	 		├	├-	┝	<u> </u>	├	 	ļ		
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	†	1	}				Ì				
1h Sub total	·	·	<u> </u>	'	·			0.	2,927	.006.	388,379
1b Sub-total	ootion A		• •	• •	• •			0.		0.	0
								0.	2,927	1	388,379
d Total (add lines 1b and 1c)											300,379
2 Total number of individuals (including but not		_		a	DOV	e) wn	o re	ceived more than	\$100,000	or	
reportable compensation from the organization		0	<u> </u>								
											Yes No
3 Did the organization list any former office											
employee on line 1a? If "Yes," complete Sched	ule J for suc	ch ind	livid	ual							3 X
4 For any individual listed on line 1a, is the	sum of rer	ortab	ole (com	ner	satio	n ai	nd other compens	sation from	the	
organization and related organizations gro											
individual											4 X
5 Did any person listed on line 1a receive or											72 0 3
for_services_rendered-to-the-organization?-/f-"Yo											5 X
Section B. Independent Contractors	, oompro				. ,		, 00,		· · · · · ·	· · · · ·	1 - 1 - 1 - 1
Complete this table for your five highest com	pensated u	ndene	nde	ant		tracto	vre t	hat received more	than \$100	0000	
compensation from the organization Report of											
year	.сролюца					, -				G,	
										,	<u>_</u>
(A) Name and business add	trace							(B) Description of se	DACCC.	_	(C)
							4-	Description of SE		<u> </u>	ompensation
NONE							+			 	
				_			1			<u> </u>	· · · · · · · · · · · · · · · · · · ·
	`						\perp				
							\top				
2 Total number of independent contractors (iii	ncludina bi	ut no	t lın	nite	d to	thos	se I	isted above) who	received		10 10 10 10 10 10 10 10 10 10 10 10 10 1
more than \$100,000 in compensation from th				_).	•	,			

Par	t VIII						
I W		Check if Schedule O contains a respon	nse or note to ar	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514
Contributions, Giffs, Grants and Other Similar Amounts	1a	Federated campaigns 1a					
Gr.	b	Membership dues					
ifts,	С	Fundraising events 1c					
s, G	d	Related organizations 1d					
Sign	е	Government grants (contributions) 1e					
but	f	All other contributions, gifts grants, and similar amounts not included above . 1f	564,112.				
d O			304,112.				
သိ ဧ	h	Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f		564,112.			
ne			Business Code	1.2			
Program Service Revenue	2a						hander of the second second second second second second second second second second second second second second
e Re	b						
۸ić	С						
Sei	d						
ram	e		<u></u>	 			
rogi	f	All other program service revenue				726 18.2 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7	801 th
	g	Total. Add lines 2a-2f		0.			<u> </u>
	3	Investment income (including dividen and other similar amounts). ATTACHMENT	ds, interest,	3,860.		l	
	4	Income from investment of tax-exempt bond		0.			
	5	Royalties		0.			
		(i) Real	(ii) Personal	19.00			
	6a	Gross rents					
	ь	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)	>	0.			
	7a	Gross amount from sales of (i) Securities	(II) Other				
	l	assets other than inventory		E to the first			
	b	Less cost or other basis					
		and sales expenses					
	C	Gain or (loss)		0.			
	d	Net gain or (loss)	·····				
nue	8a	events (not including \$	1				
eve		of contributions reported on line 1c)					
٦.		See Part IV, line 18 a	0.				
Other Revenue	b	Less direct expenses b	ľ				
	С	Net income or (loss) from fundraising events.	<u> ▶</u>	υ.		- Cook	
	9a	Gross income from gaming activities					
		See Part IV, line 19 , a	S				
		Less direct expenses b		0.			
	C	Net income or (loss) from gaming activities.	·····	0.			
	10a	Gross sales of inventory, less returns and allowances	٥.				
	, h	Less cost of goods sold b					
	c	Net income or (loss) from sales of inventory.		0.		Carried Livering Conference, 1965 is an Still Conference Conferenc	William and and the William to the St. and a st.
		Miscellaneous Revenue	Business Code				
	11a					 	
	b			 	<u> </u>		
	С		<u> </u>				
	đ	All other revenue	L			Michael M. M. Mark - Mark	MC 21 36 5 2 36 36 40
	e	Total Add lines 11a-11d		0.	200 5 552 (05.4) - 2 - 200 5 7 5 70 - 200 5 7		
JSA	12	Total revenue. See instructions	· · · · · • •	567,972.	L	<u> </u>	orm 990 (2016)
6E105	1 1 000						(2010)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) (organizations must complete all columns 🧳	All other organizations must complete column (A)
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Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (B) Do not include amounts reported on lines 6b, 7b, Program service Management and Fundraising 8b, 9b, and 10b of Part VIII. expenses general expenses expenses 1 Grants and other assistance to domestic organizations 600,501 600,501 and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic 0 individuals See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign 15,389 individuals See Part IV, lines 15 and 16 15,389 4 Benefits paid to or for members 0 Compensation of current officers, directors, 0 trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and 0 persons described in section 4958(c)(3)(B) 0. 7 Other salaries and wages Pension plan accruals and contributions (include 0 section 401(k) and 403(b) employer contributions) 0 Other employee benefits ō. Fees for services (non-employees) 0 a Management 18,531 18,531 13,500. 13,500. 0. d Lobbying 0. e Professional fundraising services See Part IV, line 17. Ō. f Investment management fees 9 Other (If line 11g amount exceeds 10% of line 25, column 45,251 45,251 (A) amount, list line 11g expenses on Schedule O). 0. 12 Advertising and promotion 1,747. 1,747 0 Information technology 0 Royalties. 0 Payments of travel or entertainment expenses 0 for any federal, state, or local public officials 0 Conferences, conventions, and meetings 0 0 Payments to affiliates....... 0 Depreciation, depletion, and amortization 0 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) 2,400 2,400 FEE FOR SCHOLARSHIPS DOTHER PROFESSIONAL SERVICES 8,953 8,953 e All other expenses 706,272. 615,890. 90,382 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here following SOP 98-2 (ASC 958-720) . .

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Form 990 (2016)

Form 990 (2016)

Balance Sheet Part X Beginning of year End of year 0. Ō. Cash - non-interest-bearing 1,791,636. 1,705,149. 2 Savings and temporary cash investments 2 18,744. 3,957. Pledges and grants receivable, net Accounts receivable, net 0. 0. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 0 5 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 0 0. organizations (see instructions) Complete Part II of Schedule L Notes and loans receivable, net _______ 0 7 0. 7 0. 0. Ō. 0. 9 10a Land, buildings, and equipment cost or ś 10a other basis Complete Part VI of Schedule D 0 0. 10c 0. 0. 11 11 Ō. 0. 12 12 Investments - other securities See Part IV, line 11 0. 13 Ō. 13 Ō. 14 0.1 14 0. 15 0. 15 1,810,380. 16 1,709,106. Total assets. Add lines 1 through 15 (must equal line 34) 16 18,000. 17 2,727. 17 36,081. 0.1 18 18 Grants payable 0. 0.1 19 19 Deferred revenue 0. 0. 20 20 Tax-exempt bond liabilities ō.I ō. Escrow or custodial account liability Complete Part IV of Schedule D 21 21 22 Loans and other payables to current and former officers, directors, **Liabilities** trustees, key employees, highest compensated employees, and 0 0. 22 0. 0. Secured mortgages and notes payable to unrelated third parties 23 23 Ω. 0. Unsecured notes and loans payable to unrelated third parties...... 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 53,279 69,497. 25 71,279. 108,305. 26 26 Organizations that follow SFAS 117 (ASC 958), check here | X | and complete lines 27 through 29, and lines 33 and 34. Balances 863,147. 1,050,952. 27 875,954. 549,849. 28 28 n. Fund 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. 5 Capital stock or trust principal, or current funds g 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 32 횾 Total net assets or fund balances 1,739,101.33 1,600,801. 33 1,810,380.34

1,709,106. Form 990 (2016)

Total liabilities and net assets/fund balances.......

Form 990 (2016)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

Open to Public

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

Inspection

OMB No 1545-0047

Name of the organization Employer identification number BUILD-A-BEAR FOUNDATION 33-1007188 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is. (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university An organization that normally receives: (1) more than 331/3 % of its support from contributions, membership fees, and gross 10 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 acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with. its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Provide the following information about the supported organization(s) (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 support (see isted in your governing other support (see above (see instructions)) instructions) document? instructions) Yes (A) (B) (C) (D) (E) Total

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

Schedule A (Form 990 or 990-EZ) 2016

ochedule // (i oilli o	330 01 330-122) 2010	
Part II Sup	oport Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)	
(Cor	implete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify und	er
Part	t III If the organization fails to qualify under the tests listed below, please complete Part III.)	

Sec	Section A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,756,328.	1,646,491.	529,171.	541,850.	564,112.	5,037,952.	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf			\ \ 			0.	
3	The value of services or facilities furnished by a governmental unit to the organization without charge ,						0.	
4	Total. Add lines 1 through 3	1,756,328.	1,646,491.	529,171.	541,850.	564,112.	5,037,952.	
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).						0.	
6	Public support. Subtract line 5 from line 4	*	<u>*</u>	`		× 4 4 5 5	5,037,952.	
Sec	tion B. Total Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total	
7	Amounts from line 4	1,756,328.	1,646,491.	529,171.	541,850.	564,112.	5,037,952.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	2,643.	1,464.	1,768.	1,889.	3,860.	11,624.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.	
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						0.	
11	Total support. Add lines 7 through 10				3 7 8 3 1	<u> </u>	5,049,576.	
12	Gross receipts from related activities, etc. (see instructions) .				12		
13	First five years. If the Form 990 is f organization, check this box and stop here	<u></u>	<u></u>					
Sec	tion C. Computation of Public Sup						00 77	
14	Public support percentage for 2016 (li						99.77% 99.83%	
15	Public support percentage from 2015					15		
16a	331/3% support test - 2016. If the c	_						
	this box and stop here . The organizati	· ·		_			•• —	
Б	331/3% support test - 2015. If the content this box and stop here. The org	-						
172	10%-facts-and-circumstances test		•					
	10%-or more, and if-the-organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization					upported ► □ and line op here.		
18	Explain in Part VI how the organization supported organization Private foundation. If the organization	did not check	a box on line 13		a, or 17b, check	this box and see		
	instructions	<u> </u>					· · P	

Part III

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

<u>Sec</u>	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants ")		<u> </u>				
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the	!					
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513.	İ					
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf	1			•		
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge]					
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
þ	Amounts included on lines 2 and 3						
	received from other than disqualified	·					
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	1					
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from					* * * \$ >	
	line 6)		4 4 4 4		* * * * * * * *		
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from similar					[
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses					ļ	
	acquired after June 30, 1975		L				
C	Add lines 10a and 10b						
11	Net income from unrelated business	,					
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income Do not include gain or	ļ					
	loss from the sale of capital assets	ļ				į	
	(Explain in Part VI)				 		
13	Total support. (Add lines 9, 10c, 11,						
	_and_12.) ,						
14	First five years. If the Form 990 is f	or the organization	tion's first, seco	nd, third, fourth,	, or fifth tax ye	ear as a section	501(c)(3)
	organization, check this box and stop here						<u></u>
	tion C. Computation of Public Sup						
15	Public support percentage for 2016 (line 8					15	<u>%</u>
16	Public support percentage from 2015 Sche				<u></u>	16	%_
	tion D. Computation of Investmen			10			
17	Investment income percentage for 2016 (li						<u>%</u>
18	Investment income percentage from 2015						<u></u> %
19 a	33 1/3 % support tests - 2016. If the org	-					
	17 is not more than 331/3 %, check th					_	
D	33 1/3% support tests - 2015. If the orga						
20	line 18 is not more than 331/3%, check		-	•	, ,	• • • •	F
JSA	Private foundation. If the organization	did not thete	a box on mie	17, 18a, OI 19D		chedule A (Form 9	
RE 177	1 1 000						-,

Part IV Supporting Organizations

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

Section A. All Supporting Organiza	ations
------------------------------------	--------

ecu	on A. All Supporting Organizations		Voc	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain	1	*; \$	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2	. `	.5 3
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a	,	. 1.3
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b	. }	*.*\^
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	** ,	* *
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	∛ 4a	`.	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	د ^{کی} ر 4b	. /	
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		* **
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		*
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	´	»« '
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	ļ .	
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	, * ,	, `	* .
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited	* .		,
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	¾. 6		, Ì.
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7	*	* * :
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? —If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	- * <u>}_</u> 8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a	``	^
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	 9b	, ,	à. :
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
10 a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below	10a	, ,	` .
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

Schedule A (Form 990 or 990-EZ) 2016

trustees of each of the supported organizations? Provide details in Part VI.

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

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Pao	e	0

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ			
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organization.			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6	1	
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see	7,		2 %
instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other	2.8		3 3 30 5 60 5
factors (explain in detail in Part VI)	2.9%		
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4	<u> </u>	
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2	<u> </u>	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
5 Income tax imposed in prior year	5	** /	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionally instructions)	/ Inte	grated Type III supporting	organization (see

Schedule A (Form 990 or 990-EZ) 2016

Part Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ex	empt purposes		
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo	zations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in Part VI) See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
;	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1_	Distributable amount for 2016 from Section C, line 6			
	Underdistributions, if any, for years prior to 2016			
2	(reasonable cause required-explain in Part VI) See			
	instructions.	* * 1 4 * 5		,
3_	Excess distributions carryover, if any, to 2016		\$ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	
a				* * * * *
b				
С	From 2013			\$ \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
d	From 2014		<u> </u>	
e	From 2015	* * * * * * * * * *		
f	Total of lines 3a through e			<u> </u>
9	Applied to underdistributions of prior years			<u> </u>
h	Applied to 2016 distributable amount		* * *	
i	Carryover from 2011 not applied (see instructions)		<u> </u>	* / // * .
<u>j</u> _	Remainder Subtract lines 3g, 3h, and 3i from 3f	<u></u>	<u> </u>	
4	Distributions for 2016 from			
	Section D, line 7 \$			
a	Applied to underdistributions of prior years	**		
b	Applied to 2016 distributable amount	<u> </u>		ļ
С	Remainder Subtract lines 4a and 4b from 4		*	
5	Remaining underdistributions for years prior to 2016, if			
	any Subtract lines 3g and 4a from line 2 For result			
	greater than zero, explain in Part VI See instructions		* · · · ·	******
6	Remaining underdistributions for 2016 Subtract lines 3h			
	and 4b from line 1 For result greater than zero, explain in			
	Part VI See instructions			 _ , _ , _ ,
7	Excess distributions carryover to 2017 Add lines 3j			
	and 4c		<u> </u>	
8	Breakdown-of-line-7			
a				<u> </u>
b	Excess from 2013 ,			<u> </u>
_c	Excess from 2014,			,
d	Excess from 2015			
۵	Excess from 2016	3 7 7 %	1 & & ` `	I

Schedule A (Form 990 or 990-EZ) 2016

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

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No 1545-0047

Open to Public Inspection

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 1 Total number at end of year	BUI	LD-A-BEAR FOUNDATION		33-1007188
Complete if the organization answered "Yes" on Form 990, Part IV, line 6 1 Total number at end of year			ised Funds or Other Similar Funds or	
(a) Denor advised funds (b) Funds and other accounts Aggregate value of contributions to (during year) Aggregate value of or of other from (aumg year) Aggregate value of or of year. Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's properly, subject to the organization's exclusive legal contro?				7.0004.1101
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b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year > Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year > Soes each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement	а			2a
c Number of conservation easements on a certified historic structure included in (a)				
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	-	- · · · · · · · · · · · · · · · · · · ·		
historic structure listed in the National Register. 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(iii) and section 170(• •	
Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year	_			2d
tax year ▶	3	_		nated by the organization during the
Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?				, ,
Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	4	Number of states where property subject to conse	rvation easement is located >	
Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	5			ion, handling of
Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year S		violations, and enforcement of the conservation ea	sements it holds?	Yes No
Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year S	6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing con	servation easements during the year
Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(iii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included in Form 990, Part X b Assets included in Form 990, Part X b Assets included in Form 990, Part X c Assets included in Form 990, Part X c Assets included in Form 990, Part X c Assets included in Form 990, Part X c Assets included in Form 990, Part X		-		
Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 Ia If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part X	7	Amount of expenses incurred in monitoring, inspec	ting, handling of violations, and enforcing co	onservation easements during the year
and section 170(h)(4)(B)(ii)?		> \$		
In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part VIII, line 1 (iii) Assets included in Form 990, Part VIII, line 1 Assets included in Form 990, Part XIII, line 1 Assets included in Form 990, Part XIII, line 1 Assets included in Form 990, Part XIII, line 1	8	Does each conservation easement reported on line 2	2(d) above satisfy the requirements of section	on 170(h)(4)(B)(ı)
balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part X		and section 170(h)(4)(B)(ii)?		Yes No
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X.	9			
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1		· · · · · · · · · · · · · · · · · · ·		ial statements that describes the
Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X.				
If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1	Pa			r Similar Assets.
works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1				
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1	1a	If the organization elected, as permitted under Shapers of art historical treasures or other similar	FAS 116 (ASC 958), not to report in its i	revenue statement and balance sheet
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1		public service, provide, in Part XIII, the text of the fo	potnote to its financial statements that des	cribes these items
public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1	b			
(ii) Revenue included in Form 990, Part VIII, line 1				cation, or research in furtherance of
(ii) Assets included in Form 990, Part X				A •
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included in Form 990, Part VIII, line 1				
following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included in Form 990, Part VIII, line 1				
a Revenue included in Form 990, Part VIII, line 1	2			- •
b Assets included in Form 990, Part X		- · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	_			
				Schedule D (Form 990) 2046

Schedule D (Form 990) 2016

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c).....

Part VII	Investments - Other Securities.	L"Vec" on Form 000), Part IV, line 11b See Form 990, Part X, line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financia	al derivatives		
	-held equity interests		
		<u> </u>	
(A) (B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)	4.		
	n (b) must equal Form 990, Part X, col (B) line 12)	l	
Part VIII	Complete if the organization answered), Part IV, line 11c. See Form 990, Part X, line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		ļi	
(2)			
(3) (4)			
(5)			
(6)			
(7)			
(8)			
(9)	n (b) must equal Form 990, Part X, col (B) line 13)		
Part IX		I "Yes" on Form 990 scription), Part IV, line 11d. See Form 990, Part X, line 15 (b) Book value
(2)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	(1)	(m a 4F)	
	umn (b) must equal Form 990, Part X, col (B) !	ine 15),	
Part X	Other Liabilities. Complete if the organization answered line 25	d "Yes" on Form 990	D, Part IV, line 11e or 11f See Form 990, Part X,
1.	(a) Description of liability	(b) Book valu	ue , , , , , , , , , , , , , , , , , , ,
	ral income taxes		
(2) DUE	TO RELATED PARTY	69,	497.
(3)			
(4)			
(5) (6)			
(7)			
(8)		-	
(9)			
	nn (b) must equal Form 990, Part X, col (B) line 25)	▶ 69,	497.
			the organization's financial statements that reports the e if the text of the footnote has been provided in Part XIII
JSA 6E1270 1 000	88S 764N 7/13/2017 2:08:34 P		Schedule D (Form 990) 2 PAGE

Dooo	A

Part X	Reconciliation of Revenue per Audited Financial Statements With Revenue per Retur Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	n.	
1	Total revenue, gains, and other support per audited financial statements	1	584,651.
	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
	Net unrealized gains (losses) on investments	2	
	Donated services and use of facilities	1 . 1	
	Recoveries of prior year grants	'	
d (Other (Describe in Part XIII)		
	Add lines 2a through 2d	7 1	16,679.
	Subtract line 2e from line 1	3	567,972.
4	Amounts included on Form 990 Part VIII, line 12, but not on line 1	3 3	
a i	nvestment expenses not included on Form 990, Part VIII, line 7b 4a	, , , , , , , , , , , , , , , , , , ,	
	Other (Describe in Part XIII)	* د ش	
C	Add lines 4a and 4b	4c	
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	567,972.
Part X	Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ırn.	
1	Total expenses and losses per audited financial statements	1	722,951.
	Amounts included on line 1 but not on Form 990, Part IX, line 25	3	
	Donated services and use of facilities	1	
	Prior year adjustments		
	Other losses	E .	
d (Other (Describe in Part XIII.)	" \ 3	
	Add lines 2a through 2d	2e	16,679.
	Subtract line 2e from line 1	3	706,272.
	Amounts included on Form 990, Part IX, line 25, but not on line 1	,	
a l	nvestment expenses not included on Form 990, Part VIII, line 7b 4a		
b (Other (Describe in Part XIII).................. <mark>_4b</mark>	,· .<	
	Add lines 4a and 4b	4c	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	706,272.
Part X	Supplemental Information.		
2 Part	the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, PaxII, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	iπ V, line 4, nation	, Paπ X, line
		ration	
BOILD	-A-BEAR FOUNDATION NAME CHANGE		
ON DE	CEMBER 31,2015 BUILD-A-BEAR WORKSHOP FOUNDATION, INC. CHANGED ITS		
NAME	TO BUILD-A-BEAR FOUNDATION. THE ARTICLES OF MERGER WERE FILED WITH		
THE M	ISSOURI SECRETARY OF STATE, THE STATE OF INCORPORATION, ON DECEMBER		
			
17, 2	015.		
			_
	·		

Part XIII Supplemental Information (continued)

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 15. or 16. ► Attach to Form 990. ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990,

Name of the organization Employer identification number BUILD-A-BEAR FOUNDATION 33-1007188 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (b) Number of (c) Number of (a) Region (d) Activities conducted in the (e) If activity listed in (d) is (f) Total a program service, offices in the employees, region (by type) (such as, expenditures for fundraising, program services, describe specific type of region agents, and and investments investments, grants to recipients located in the region) independent service(s) in the region in the region contractors in the region GRANTMAKING (1) NORTH AMERICA N/A (2) (3) _(4) _ (5)_ (6) _(7) (8) _(9) (10)(11)(12)_(13)__ --- - --- --- --- --- ---(14)(15) (16) (17)3a Sub-total....... Total from continuation sheets to Part I

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

Totals (add lines 3a and 3b)

Schedule F (Form 990) 2016

BUILD-A-BEAR FOUNDATION

Schedule F (Form 990) 2016

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part II

	Part IV, line 15, for any rec	for any recipient who received more	than \$5,000.	art II can be du	Part II can be duplicated if additional space	ional space i	is needed	•	
-	me of zation	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(0)			NORTH AMERICA	GENERAL SUPP	5,389.	СНЕСК		NONE	NONE
(2)			NORTH AMERICA	DISASTER REL	10,000.	СНЕСК		NONE	NONE
(3)	(6)								
(4)									
(9)									
(9)									
ω)									
(8)								:	-
(0)									
(ap)									
(41)									
(12)									
(13)				i					
(44)									
(45)								i	
(16)									

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ~

Enter total number of other organizations or entities.

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Schedule F (Form 990) 2016

Page 3 Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed Schedule F (Form 990) 2016

Part III Grants an

	Part III can be duplicated if additional space is needed	additional space is needed						•
	(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)		,						
(9)								
(9)								
(7)								
(8)								
(6)								
(10)								
(11)								
(12)								
(13)			-					
(14)								
(15)						;		
(16)								
(17)								
(18)								
							Sched	Schedule F (Form 990) 2016

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"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)

Schedule F (Form 990) 2016

X

No

Yes

Part V Supplemen

Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method, amounts of investments vs expenditures per region), Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable Also complete this part to provide any additional information (see instructions)

FOREIGN GRANTS

CHARITIES APPLY FOR A GRANT ONLINE. A CONTRIBUTIONS COMMITTEE MEETS TO REVIEW THE APPLICATION. THE BOARD OF DIRECTORS THEN APPROVE THE PROPOSED GRANTS. AFTER APPROVAL FROM THE BOARD OF DIRECTORS, THE GRANT IS GIVEN TO RECIPIENTS WHICH WERE LOCATED IN CANADA.

SCHEDULE I (Form 990)

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

2016

OMB No 1545-0047

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

Open to Public Inspection

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

Employer identification number 33-1007188

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Grants
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BUILD-A-BEAR FOUNDATION

Department of the Treasury Internal Revenue Service Name of the organization

- X Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and
 - Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

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

(1) OTHER < \$5,000 (2) SAVE THE CHILDREN 501 KINGS HWY E FAIRFIELD, CT 06825 501 KINGS HWY E FAIRFIELD, CT 06825 501 KINGS HWY E FAIRFIELD, CT 06825 501 KINGS HWY E FAIRFIELD, CT 06825 501 KINGS HWY E FAIRFIELD, CT 06825 501 KINGS HWY E FAIRFIELD, CT 06825 501 (C) 3 502 WATT WAY LOS ANGELES, CA 90089 502 WATT WAY LOS ANGELES, CA 90089 503 WATT WAY LOS ANGELES, CA 90089 503 WATT WAY LOS ANGELES, CA 90089 504 CO SERBRAL PALSY OF WESTCHESTER 505 CERBRAL PALSY OF WESTCHESTER 506 CERBRAL PALSY OF WESTCHESTER 507 CO STREET RYE BROOK, NY 10573 508 CO STREET RYE BROOK, NY 10573 509 THE FAMILY PLACE 509 THE FAMILY PLAC	159,938. 100,000. 10,000.		CHARITABLE GRANTS GENERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT
6825 06-0726487 501 6825 06-0726487 501 6825 06-0726487 501 6825 6925 693 6826 693 6826 693 6826 693 6836 693 6836 693 6836 693 6836 693 6836 693 6836 693 6836 693 6836 693 6836 693 6836 693 6836 693 6836 693 6836 693 6836 693 6836 693 6836 693 6836 693 6837 693	100,000.		CHARITABLE GRANTS GENERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT
6825 06-0726487 501(C) MO 63101 43-0714167 501(C) 0089 84-0416503 501(C) 84-0416503 501(C) 10573 13-1690769 501(C) 3125 43-1827981 501(C) 101 41-2003333 501(C)	10,000.		GENERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT
6825 06-0726487 501(C) 089 84-0416503 501(C) 84-0416503 501(C) 84-0416503 501(C) 84-0416503 501(C) 84-0416503 501(C) 84-0416503 501(C) 10573 13-1690769 501(C) 10573 13-1620769 501(C) 101 41-2003333 501(C)	100,000.		GENERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT
MO 63101 43-0714167 501(C) 0089 84-0416503 501(C) 84-0416503 501(C) 10573 13-1690769 501(C) 3125 43-1827981 501(C) 101 41-2003333 501(C)	10,000.		GENERAL SUPPORT
, MO 63101 43-0714167 501(C) 0089 84-0416503 501(C) 84-0416503 501(C) 10573 13-1690769 501(C) 3125 43-1827981 501(C) 101 41-2003333 501(C)	10,000.		GENERAL SUPPORT
0089 84-0416503 501(C) 84-0416503 501(C) 10573 13-1690769 501(C) 3125 43-1827981 501(C) 101 41-2003333 501(C)	15,000.		GENERAL SUPPORT
0089 84-0416503 501(C) 84-0416503 501(C) 10573 13-1690769 501(C) 3125 43-1827981 501(C) 101 41-2003333 501(C)	15,000.		GENERAL SUPPORT
10573 13-1690769 501(C) 3125 43-1827981 501(C) 41-2003333 501(C)	70 00		
NY 10573 13-1690769 501(C) 63125 43-1827981 501(C) 55101 41-2003333 501(C)	000 01		
NY 10573 13-1690769 501(C) 63125 43-1827981 501(C) 55101 41-2003333 501(C)	10,000.		GENERAL SUPPORT
FROJECT ST. LOUIS, MO 63125 ST. LOUIS, MO 63125 A3-1827981 A1-2003333 SOI(C)			
FROJECT ST. LOUIS, MO 63125 43-1827981 501(C) INT PAUL, MN 55101 41-2003333 501(C)	7,500.		GENERAL SUPPORT
ST. LOUIS, MO 63125 43-1827981 501(C)			
INT PAUL, MN 55101 41-2003333 501(C)	6,300.		GENERAL SUPPORT
SAINT PAUL, MN 55101 41-2003333 501(C)			
(A) vine and and and	20,000.		GENERAL SUPPORT
(a) AIDS FOR FEACE			
1302 PINE AVE CARLSBAD, CA 92008 23-1564351 501(C) 3	10,000.		GENERAL SUPPORT
(10) ONLY MAKE BELLEVE			
121 W 27TH ST NEW YORK, NY 10001 13-4133410 501(C) 3	6,000.		GENERAL SUPPORT
(11) RISE ABOVE FOUNDATION			-
PO BOX 174 NORTHBRIDGE, MA 01534 27-1409946 501(C) 3	10,000.		GENERAL SUPPORT
(12) THE MAJIC HOUSE STL CHILD MUSEUM			
516 S KIRKWOOD RD ST. LOUIS, MO 63122 1,1-0138441 501(C) 3	7,500.		GENERAL SUPPORT

3 Enter total number of other organizations listed in the line 1 table. For Paperwork Reduction Act Notice, see the instructions for Form 990.

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Schedule I (Form 990) (2016)

Department of the Treasury

Internal Revenue Service Name of the organization

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

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

► Attach to Form 990.

OMB No 1545-0047

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

Employer identification number 33-1007188

		d Assistance
	7	on Grants an
	FOUNDATION	Information
,	-A-BEAR	General
	BUILD	Part

ž X Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) WILDERWOOD SERVICE DOGS							
1319 TUCHALEECHEE TRL MARYVILLE, TN 37803	26-2972086	501(C) 3	5, 600.				GENERAL SUPPORT
(2) GIRLS SCOUTS OF EASTERN MISSOURI							1
2300 BALL DR ST. LOUIS, MO 63146	43-0662471	501(C) 3	15,000.				GENERAL SUPPORT
(3) ALSAC ST. JUDE							
262 DANNY THOMAS PL MEMPHIS, TN 38105	62-0646012	501(C) 3	100,000.			 	GENERAL SUPPORT
(4) GIRLS ON THE RUN SAN DEIGO							
PO BOX 230544 ENCINITAS, CA 92023	20-3588183	501(C) 3	12,000.				GENERAL SUPPORT
(5) FRIENDSHIP CIRCLE OF NB & SPB							
7170 LOXAHATCHEE RD PARKLAND, FL 33067	26-2025179	501(C) 3	10,000.				GENERAL SUPPORT
(6) BOYS & GIRLS CLUB IN VALLEY							
1100 MARION ST. KNOXVILLE, TN 37921	62-0475743	501(C) 3	10,000.				GENERAL SUPPORT
(7) EAST BAY SPCA							
8323 BALDWIN ST OAKLAND, CA 94621	94-1322202	501(C) 3	10,000.				GENERAL SUPPORT
(8) MISSOURI HISTORY MUSEUM							
5700 LINDELL BLVD ST. LOUIS, MO 63112	43-0654866	501(C) 3	7,500.				GENERAL SUPPORT
(9) BOYS AND GIRLS CLUB OF AMERICA							
1275 PEACHTREE STREET NE ATLANTA, GA 30309	13-5562976	501(C) 3	31,081.				GENERAL SUPPORT
(10) BUILD-A-BEAR WORKSHOP, INC.							
1954 INNERBELT BUSINESS CENTER DRIVE	43-1883836			37,082.	COST	SKINS/STUFFI	PRODUCT PURCHASE AT
(11)							
(12)	1						
	d government o	organizations list	ted in the line 1 tab	le		•	20.
3 Enter total number of other organizations listed in the line 1 table.	sted in the line	1 table				•	
Con Danger of the Man And Market of the Contract of the Contra							

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

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17188S 764N 7/13/2017

Schedule I (Form 990) (2016)

Page 2 (f) Description of non-cash assistance Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional (e) Method of valuation (book, FMV, appraisal, other) THE BOARD OF DIRECTORS THEN APPROVE THE PROPOSED THE BOARD OF DIRECTORS, THE GRANTS ARE GIVEN A CONTRIBUTIONS COMMITTEE MEETS TO (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients CHARITIES APPLY FOR A GRANT ONLINE. AFTER APPROVAL FROM (a) Type of grant or assistance REVIEWYTHE APPLICATION. information (Form 990) (2016) US GRANTS GRANTS. Part III Part IV 5 က 9

Schedule I (Form 990) (2016)

TO RECIPIENTS WHICH WERE LOCATED IN THE U.S.

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number BUILD-A-BEAR FOUNDATION 33-1007188 Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			4.8
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			10000 - 1000 P
	1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the	392	7.00	
•	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		4	
	X Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
•	organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		<u>X</u>
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	_X	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	X	
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
_	compensation contingent on the revenues of			
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III		潔、	
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	-mi		
	compensation contingent on the net earnings of			
а	The organization?	6a		X
b	Any related organization?	6b	X	
	If "Yes" on line 6a or 6b, describe in Part III			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
	-payments-not-described-on-lines-5-and-6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject		1	_
	to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe	}	}	
	ın Part III	8		X
9				
	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2016

Schedule J (Form 990) 2016

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

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

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that Individual

		(B) Breakdown of W-2 and/	W-2 and/or 1099-MIS	or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior
	-			compensation				088 E101
DARLENE ELDER	8	0	0	0				
SECRETARY, DIRECTOR	8	273,354.	124,316.	0	92,990.		493,660.	
MARSHA FUCHS	3	0	.0	0				
2DIRECTOR	€	171,520.	34,977.	0	16,845.		223,342.	
ERIC FENCI	ε	0	0	0				
3DIRECTOR	(324,892.	148,192.	0	119,176.		592,260.	
VOIN TODOROVIC	ε	0	0	0				
4PRESIDENT, DIRECTOR	E	343,308.	119,779.	0	34,976.		498,063.	
ANN GRIMMET	8	0	0	0				
5DIRECTOR	€	221,365.	31,985.	9,260.	7,339.		269,949.	
RAY MUELLER	Ξ	0	ı	0				
6TREASURER, DIRECTOR	€	199,060.	34,147.	0	7,457.		240,664.	
MIKE EARLY	3	0	0	0				
7DIRECTOR	€	225,460.	20,074.	0	13,156.		288, 690.	
GINA COLLINS	(2)	0	0	0				
BDIRECTOR	(8)	321,615.	108,231.	0	33,432.		463,278.	
	(3)							
6	(2)							
	€							
10	€							
	€							
11	€							
	ε							
12	€							
	ε							
13	€							
	ε							
14	•							
	8							
15	€							
	8							
16	▣							
							Sche	Schedule J (Form 990) 2016

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Schedule J (Form 990) 2016

Page 3

Part III Supplemental Information

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

STOCK OPTIONS

OFFICERS AND DIRECTORS OF BUILD-A-BEAR WORKSHOP FOUNDATION, INC. ARE

EMPLOYEES OF THE RELATED ORGANIZATION, BUILD-A-BEAR WORKSHOP, INC. AND

PARTICIPATE IN A STOCK OPTION PROGRAM.

BONUS PLAN

OFFICERS AND DIRECTORS OF BUILD-A-BEAR WORKSHOP FOUNDATION, INC. ARE

EMPLOYEES OF THE RELATED ORGANIZATION, BUILD-A-BEAR WORKSHOP, INC. AND

PARTICIPATES IN A BONUS PLAN.

Schedule J (Form 990) 2016

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.

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

OMB No 1545-0047

2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
BUILD-A-BEAR FOUNDATION

Employer identification number 33-1007188

OTHER PROGRAM SERVICES

MISCELLANEOUS GRANTS (LESS THAN \$5,000) WERE PAID TO CHARITABLE

ORGANIZATIONS THAT SUPPORT OUR MISSION OF DOMESTIC ANIMAL PROGRAMS;

ENDANGERED SPECIES PROGRAMS; DISASTER RELIEF PROGRAMS AND ENVIRONMENTAL

CONCERNS.

GOVERNING BODY AND MANAGEMENT

BUILD-A-BEAR FOUNDATION OFFICERS AND DIRECTORS ARE EMPLOYEES OF

BUILD-A-BEAR WORKSHOP, INC., A RELATED PARTY. BUILD-A-BEAR FOUNDATION

OFFICERS AND DIRECTORS ARE VOLUNTEERS.

GOVERNING BODY AND MANAGEMENT

THE FORM 990 IS REVIEWED BY THE FINANCE COMMITTEE AND IS DISTRIBUTED TO THE BOARD OF DIRECTORS FOR THEIR REVIEW.

GOVERNING BODY AND MANAGEMENT

BUILD-A-BEAR FOUNDATION ANNUALLY REQUIRES EACH OFFICER AND DIRECTOR TO COMPLY AND SIGN A WRITTEN CONFLICT OF INTEREST POLICY. IN ADDITION, WE REQUIRE MEMBERS OF THE CONTRIBUTIONS COMMITTEE TO DISCLOSE ANY CONFLICTS PRIOR TO DISCUSSING ANY GRANT REQUESTS. IF THERE IS SUCH A CONFLICT, THE CONTRIBUTIONS COMMITTEE AND/OR BOARD MEMBER MUST RECUSE THEMSELVES FROM THE DISCUSSION AND APPROVAL OF ANY GRANT.

GOVERNING BODY AND MANAGEMENT

BUILD-A-BEAR FOUNDATION ANNUALLY POSTS THEIR FORM 990 ON THE RELATED

Name of the organization BUILD-A-BEAR FOUNDATION Employer identification number 33-1007188

PARTY, BUILD-A-BEAR WORKSHOP, INC'S WEBSITE. WE WILL ALSO PROVIDE COPIES

UPON REQUEST. THE DOCUMENTS ARE ALSO AVAILABLE TO BE INSPECTED AT OUR

OFFICE.

ATTACHMENT 1

FORM 990, PART VI, LINE 17 - STATES

AL, AZ, AR, CA, CO, CT, DE,

DC, FL, GA, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI,

MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, PR,

RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

ATTACHMENT 2

FORM 990, PART VIII - INVESTMENT INCOME

(A)

(B)

(C)

(D)

DESCRIPTION

TOTAL

RELATED OR REVENUE EXEMPT REVENUE

UNRELATED BUSINESS REV. EXCLUDED REVENUE

INTEREST INCOME

3,860.

TOTALS

3,860.

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

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

33-1007188

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Part

2016 Inspection

OMB No 1545-0047

Employer identification number

33-1007188

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. BUILD-A-BEAR FOUNDATION

	Name, address, and EIN ((a) Name, address, and EIN (f applicable) of disregarded entry	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)							
(2)							
6							
6							
(4)							
(5)							
(9)							
	Identification of Belated Tax-Exempt Organizations	av. Evemot Organizations Complex	Complete if the organization answered "Yes" on Form 990 Part IV line 34 heraise it had	Swered "Yes" on Fo	rm 990 Part IV	line 34 herause	ped +
Part	one or more related tax-exempt organizations during	empt organizations during the tax year.	ar.				3
	(-)		3	į	3	•	3

(g)	(9)	(2)	9	(e)	€		=
Name, address, and EIN of related organization	Prima	Legal domicile (state or foreign country)	Exempt	Public chanty status (if section 501(c)(3))	Direct controlling entity	Section 512(b)(13) controlled entity?	12(b)(13 olled ty?
						Yes	å
(1)							
(3)							
(4)							
		-					
(5)							
		_					
(9)							
	1						
(7)							
				_			
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	for Form 990.						

Schedule R (Form 990) 2016

Schedule R (Form 990) 2016

Percentage Section ownership controlled entity Yes Schedule R (Form 990) 2016 (k) Percentage ownership General or managing partner 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. Yes No Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 (g)
Share of end-of-year assets amount in box 20 of Schedule K-1 (i) Code V - UBI (Form 1065) (f) Share of total (h) Dieproportonate allocations? ŝ псоте Yes (g) Share of end-of-(C copp. S corp. or trust) year assets C CORP (f) Share of total income (d)
Direct controlling
entity because it had one or more related organizations treated as a partnership during the tax year N/A (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) (c) Legal domicile (state or foreign country) 핌 Primary activity RETAIL SALES (d)
Direct controlling lentity 43-1883836 (c) Legal domicile (state or foreign country) 63114 S LOUIS, (a)
Name, address, and EIN of related organization (b) Primary activity 1954 INNERBELT BUSINESS CENTER DRIVE ST. (1) BUILD-A-BEAR WORKSHOP, INC. (a)
Name, address, and EIN of related organization JSA 6E1308 1 000 Part IV Part III Ξ 3 € 9 3 3 **10** (7) 4 (5) 9 3 (9)

Schedule R (Form 990) 2016 Yes No Method of determining If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds 2 19 **4** Ε 무 9 1p ÷ 2 4 79 <u>e</u> # ŧ ÷ = Performance of services or membership or fundraising solicitations for related organization(s) Lease of facilities, equipment, or other assels to related organization(s). Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36 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? Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity. (b) Transaction type (a-s) Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule V 16-5.4F BUILD-A-BEAR WORKSHOP, INC ARE VOLUNTEERS FOR SHARES FACILITIES AND EMPLOYEES WITH BUILD-A-BUILD-A-BEAR WORKSHOP, INC. A RELATED PARTY, Other transfer of cash or property from related organization(s). (a)
Name of related organization Gift, grant, or capital contribution to related organization(s) Exchange of assets with related organization(s). BEAR FOUNDATION. EMPLOYEES OF Dividends from related organization(s), THE ORGNAIZATION JSA 6E1309 1 000 Part V Ε **=** 0 ~ ٩ **م** 0 되 3 **3** 2 (2) 9

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37 Part VI Provide the following information for each entity faxed 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

(1)		(state or foreign country)	Predominant income (related, unrelated, excluded from tax under	Are all partners section 501(c)(3) organizations?	Share of total income	Share of end-of-year assets	(n) Disproportionate affocations?		Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?		(k) Percentage ownership
(2)				Yes No			Yes	°N ON		Yes	ŝ	
(2)												
7.4												
(3)							+-	+			+-	
(4)								-			-	
(5)												
											-	
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(13)											 	
(14)											<u> </u>	
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(15)												
(16)							-	-				
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Schedule R (Form 990) 2016

Part VII Supplemental Information
Provide additional information for responses to questions on Schedule R. See instructions.

Schedule R (Form 990) 2016