As Filed Data efile GRAPHIC print - DO NOT PROCESS DLN: 93492110006141 Short Form OMB No. 1545-1150 Form 990EZ Return of Organization Exempt From Income Tax 2020 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Open to ▶ Do not enter social security numbers on this form as it may be made public. Department of the **Public** Treasury ► Go to www.irs.gov/Form990EZ for instructions and the latest information. Inspection Internal Revenue Service A For the 2020 calendar year, or tax year beginning 01-01-2020, and ending 12-31-2020 **B** Check if applicable: D Employer identification number C Name of organization COMMERCIAL REAL ESTATE WOMEN TAMPA ☐ Address change BAY INC ☐ Name change Number and street (or P. O. box, if mail is not delivered to street address) Room/suite E Telephone number ☐ Initial return 1201 WAKARUSA DRIVE SUITE D ☐ Final return/terminated (813) 892-3829 City or town, state or province, country, and ZIP or foreign postal code ☐ Amended return F Group Exemption LAWRENCE, KS 660493889 ☐ Application pending Number Check ▶ ☑ if the organization is **not G** Accounting Method: □ Cash ☑ Accrual Other (specify) ▶ required to attach Schedule B (Form 990, 990-EZ, or 990-PF). I Website: ►www.crewtampabay.org **J Tax-exempt status** (check only one) - ☐ 501(c)(3) ☑ 501(c)(6) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527 **K** Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Part I Check if the organization used Schedule O to respond to any question in this Part I 1 96,500 2 31,088 2 Program service revenue including government fees and contracts 3 3 4 4 2,918 5a Gross amount from sale of assets other than inventory h Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . 5c C 6 Gaming and fundraising events Revenue Gross income from gaming (attach Schedule G if greater than \$15,000) а of contributions from Gross income from fundraising events (not including \$ fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) Less: direct expenses from gaming and fundraising events 60 Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) d 6d7a Gross sales of inventory, less returns and allowances . b Less: cost of goods sold Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . 7с c 8 Other revenue (describe in Schedule O) . . 8 348 9 9 **Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 . . 130,854 10 10 47,052 Grants and similar amounts paid (list in Schedule O) . 11 11 Benefits paid to or for members 12 12 Salaries, other compensation, and employee benefits . Expenses 13 13 49,852 Professional fees and other payments to independent contractors 14 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping. 15 24 16 16 47,772 Other expenses (describe in Schedule O) 17 Total expenses. Add lines 10 through 16 17 144,700 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 -13,846 Net Assets 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 229,165 20 Other changes in net assets or fund balances (explain in Schedule O) 21 Net assets or fund balances at end of year. Combine lines 18 through 20 21 215,319 For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 10642I Form **990-EZ** (2020)

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Part II	Balance Sheets (see the instructions Check if the organization used Schedule		uestion in this	Part II			
	Check if the organization about behicular	o to respond to any t	14001101111110		eginning of year		(B) End of year
22 Cash sa	vings, and investments			(A) E	245,727	22	283,166
	d buildings				243,727	23	203,100
	sets (describe in Schedule O)				37,791		33,876
	sets				283,518		317,042
	ibilities (describe in Schedule O)				54,353		101,723
	` ,		· ·		229,165		
Part III	ets or fund balances (line 27 of column	<u> </u>	· · · · · · · · · · · · · · · · · · ·	f D.		1 T	215,319 Expanses
Part III	Statement of Program Service A Check if the organization used Schedule				rt III) • • ☑	(F	Expenses Required for section 501(c)
What is the	organization's primary exempt purpose?	o to respond to any t	question in tims	I dit III		- (3	3) and 501(c)(4)
EDUCATES A	A FORUM FOR WOMEN IN COMMERCIAL R			THER AN	D EDUCATE AND		rganizations; optional for
	UR MEMBERS TO BE RECOGNIZED AS TH					_ °¹	thers.)
	organization's program service accompli						
	y expenses. In a clear and concise manne nd other relevant information for each pro		s provided, the	number	or persons		
28		9, 4, 11, 11, 11, 11, 11, 11, 11, 11, 11,				1	
See Additior	al Data Table						
(Grants \$)	If this amoun	t includes foreign grar	nts, check here		. ▶ □	28	a a
29			,			29	
							-
(C===+= + \	T6 this sussess	t includes foreign grar			. ▶ □		
(Grants \$)	If this amoun	t includes foreign graf	its, check here	• •	. • 🗆		
30						30	a
(Grants \$)	If this amoun	t includes foreign grar	nts, check here		. ▶ 🗆		
31 Other pr	ogram services (describe in Schedule O)						
(Grants \$)	-	t includes foreign grar	nts check here		. ▶ □	31	
	ogram service expenses (add lines 28a				<u> ▶</u>	32	
Part IV	List of Officers, Directors, Trustees,						
. 4.4.14	Check if the organization used Schedule						
		1	1		1		1
	(a) Name and title	(b) Average hours per week	(c) Repor		(d) Health ben		(e) Estimated amount ee of other compensation
		devoted to position	compensa (Forms W-2		benefit plans,		veel of other compensation
		i i	MISC) (if no		deferred comper		n
			enter -0	D-)			
See Addition	al Data Table						
occ / ladicioi	an Bata Table						
							i

-orm	990-E2 (2020)			Page 3
Pai	Other Information (Note the Schedule A and personal benefit contract statement requirement instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V.			
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V.	• • •	Yes	N
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a		res	No
	detailed description of each activity in Schedule O	33		No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions.	34		No
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		No
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		No
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a			
b	Did the organization file Form 1120-POL for this year?	37b		No
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . 38b			
39	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on line 9			
	Gross receipts, included on line 9, for public use of club facilities	-		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
_	section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		No
41	List the states with which a copy of this return is filed. ► The organization's books are in care of ► NANCY EMERSON Telephone	no. ⊳ <u>(78</u>	35) 856-	B276
42a	Located at ▶ 1201 WAKARUSA DR SUITE D LAWRENCE . KS ZIP + 4 ▶	66049	1	
	211 1 P	00013	<u> </u>	
			Yes	No
b	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)?	42b		No
	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial			
c	Accounts (FBAR). At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		No
-	If "Yes," enter the name of the foreign country: ▶			
43 (Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here		▶ □	
	and enter the amount of tax-exempt interest received or accrued during the tax year		-	
	<u> </u>		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	res	No
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		No
C	Did the organization receive any payments for indoor tanning services during the year?	44c		No
d	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an	773		
1F~	explanation in Schedule O	44d 45a		No
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?			INO
JU	of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		No

	(2020)							37	
	e organization engage, directly or indire							Yes	No
	ates for public office? If "Yes," complet						46		No
	Section 501(c)(3) Organization All section 501(c)(3) organizations Check if the organization used Schedule	must answer question	ons 47- 49b and	52, and o	complete the	tables	for lin	nes 50	and 5
<u> </u>	check if the organization used Schedul	s o to respond to any qu	Jestion III tills Fait	VI			· · ·	Yes	No
	e organization engage in lobbying activi ," complete Schedule C, Part II	ties or have a section 5	01(h) election in ef	fect during	the tax year?		47		
8 Is the	organization a school as described in se	ection 170(b)(1)(A)(ii)?	If "Yes," complete :	Schedule E			48		
9a Did the	e organization make any transfers to ar	າ exempt non-charitable	related organizatio	on?			49a		
b If "Yes	," was the related organization a sectio	n 527 organization? .					49b		
	ete this table for the organization's five					ıstees a	nd key	employ	ees)
	ach received more than \$100,000 of co Name and title of each employee	(b) Average hours per week	(c) Reportable compensation	e (d) Health bene ibutions to em	ployee		timated er comp	
		devoted to position	(Forms W-2/109 MISC)		enefit plans, a erred compens				
compe	nsation from the organization. If there (a) Name and business address of	·	actor	(b) T	pe of service	(c)	Compe	ensation	_
_									_
									_
									_
d Total	number of other independent contract	ors each receiving over	\$100.000.			<u> </u>			
	number of other independent contract	-				<u> </u>			_ _ _
2 Did 1	number of other independent contract the organization complete Schedule A? pleted Schedule A	NOTE. All section 501(c)(3) organizations	must attac	(· _	∵ □ Ye	s 🗆 l	
2 Did to com	the organization complete Schedule A? pleted Schedule A	NOTE. All section 501(c)(3) organizations ding accompanying	must attac	and statemer	nts, and	to the	best of	my
2 Did to com	the organization complete Schedule A? pleted Schedule A	NOTE. All section 501(c)(3) organizations ding accompanying	must attac	and statemer ed on all inforr 2021-04-15	nts, and	to the	best of	my
2 Did toom der penaltit owledge art s any know	the organization complete Schedule A? pleted Schedule A	NOTE. All section 501(c)(3) organizations ding accompanying	must attac	and statemer	nts, and	to the	best of	my
2 Did toom der penaltit owledge art s any know	the organization complete Schedule A? pleted Schedule A	NOTE. All section 501(c)(3) organizations ding accompanying	must attac	and statemer ed on all inforr 2021-04-15	nts, and	to the	best of	my
2 Did toom der penalti owledge ar s any know gn ere	the organization complete Schedule A? pleted Schedule A	NOTE. All section 501(c)(3) organizations ding accompanying rer (other than office	must attac	and statemer ed on all inforr 2021-04-15	nts, and	to the	best of	my
2 Did to com Ider penalti owledge ar sany know gn ere	the organization complete Schedule A? pleted Schedule A	NOTE. All section 501(control of the section 501) when the section of preparation	c)(3) organizations ding accompanying rer (other than office	must attac	and statemered on all information 2021-04-15 Date Check if	PTIN P00624	to the of which	best of	my
2 Did to com	the organization complete Schedule A? pleted Schedule A	NOTE. All section 501(committee of the committee of the c	c)(3) organizations ding accompanying rer (other than office	must attac	and statemered on all information 2021-04-15 Date Check if self-employed	PTIN P00624	to the pf which	best of	my

Additional Data

Software ID:

Software Version:

EIN: 59-3450478

Name: COMMERCIAL REAL ESTATE WOMEN TAMPA

BAY INC

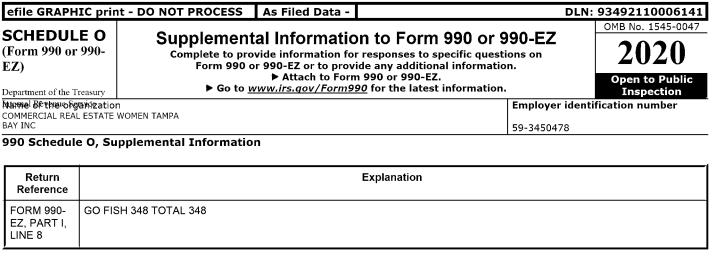
AV INC

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.	`(c	Expenses quired for section 501)(3) and 501(c)(4) anizations; optional for others.)
CREW TAMPA BAY IS THE LEADING ORGANIZATION FOR WOMEN IN THE TAMPA BAY REAL ESTATE INDUSTRY. AS PART OF CREW NETWORK, THE INDUSTRY'S PREMIER NETWORKING COALITION, CREW TAMPA BAY IS DEDICATED TO TRANSFORMING THE COMMERCIAL REAL ESTATE INDUSTRY BY ADVANCING WOMEN GLOBALLY. CREW NETWORK'S MEMBERSHIP OF MORE THAN 10,000 PROFESSIONALS IN 70+ MAJOR GLOBAL MARKETS REPRESENTS ALL ASPECTS OF COMMERCIAL REAL ESTATE-PROVIDING OUR MEMBERS WITH DIRECT ACCESS TO REAL ESTATE PROFESSIONALS ACROSS ALL GEOGRAPHIES AND DISCIPLINES. SINCE 1996, CREW TAMPA BAY HAS CONNECTED COMMERCIAL REAL ESTATE PROFESSIONALS IN THE TAMPA BAY AREA, WORKING TOGETHER TO: CREATE A DYNAMIC AND SUPPORTIVE ENVIRONMENT THAT PROMOTES ADVANCEMENT THROUGH KNOWLEDGE SHARING AND NETWORKING; PUSH THE BOUNDARIES IN EVERY FACET OF COMMERCIAL REAL ESTATE THROUGH PROVOCATIVE DIALOGUE AMONG PEERS DRAWN FROM EVERY DISCIPLINE IN THE INDUSTRY; PROVIDE EDUCATION PROGRAMS WHICH DIRECTLY AFFECT DAY-TO-DAY WORK AND PROMOTE REAL CHANGE; ENCOURAGE OUR MEMBERS TO BE A FORCE FOR ACTIVISM AND INVOLVEMENT IN OUR COMMUNITIES; PROVIDE OPPORTUNITIES FOR MEMBERS TO BUILD RELATIONSHIPS WHICH EXPAND THEIR PROFESSIONAL CONNECTIONS AND HELP THEM BUILD BUSINESS. CREW TAMPA BAY MEMBERS ARE EMPOWERED BY SHARING THEIR KNOWLEDGE AND EXPERIENCE WITH OTHERS IN OUR COMMUNITY WHILE ALSO LEARNING FROM THE INSIGHT AND KNOW-HOW OF OTHERS. THAT'S WHY WE FOCUS OUR EFFORTS ON NETWORKING PROGRAMS SUCH AS GO FISH, ECONOMIC SUMMIT, MONTHLY LUNCHEONS, MEMBERS ONLY EVENTS, AND HOST THE ANNUAL EXCELLENCE AWARDS HONORING TOP TALENT IN THE INDUSTRY. BY GROWING AND STRENGTHENING OUR NETWORK, WE AIM TO CREATE MORE OPPORTUNITIES FOR WOMEN IN COMMERCIAL REAL ESTATE. (Grants \$) If this amount includes foreign grants, check here	28a	

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV) (a) Name and title (b) Average (c) Reportable (d) Health benefits, (e)Estimated hours per week compensation contributions to amount of devoted to (Forms W-2/1099employee benefit other compensation position MISC) plans, and (If not paid, deferred compensation enter -0-) 2.00 JULIN BURDINE PRESIDENT 0 2.00 LASHAWN BATES PRESIDENT EL 0 2.00 JODI WILKESON[™] SECRETARY 0 2.00 KRONE WEIDLER TREASURER 0 1.00 BRENNA HOOKER DIRECTOR 0 1.00 ALICIA TANNER DIRECTOR 0 1.00 ERIKA THOMPSON DIRECTOR 0 1.00 ASHLEY MCRAE PAST PRESIDE 0 1.00 BLAKE WILLIAMS DIRECTOR 0 2.00 ROBYN COPPOLA NATIONAL DEL 0 1.00 ASHLEY JACKSON DIRECTOR 0 1.00 DIANNE COHRS DIRECTOR 0 1.00 ANNE POLLACK DIRECTOR 0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93492110006141	
TY 2020 Compensation Explanation				
Name:	COMMERCIAL	REAL ESTA	ATE WOMEN TAMPA	
	BAY INC			
FIN:	59-3450478			
2111	33 3 130 170			
Person Name			Explanation	
JULIN BURDINE				
LASHAWN BATES				
JODI WILKESON				
KRONE WEIDLER				
BRENNA HOOKER				
ALICIA TANNER				
ERIKA THOMPSON				
ASHLEY MCRAE				
BLAKE WILLIAMS				
ROBYN COPPOLA				
ASHLEY JACKSON				
DIANNE COHRS				
ANNE POLLACK		_		



Return Explanation
Reference

FORM 990-EZ, PART I, LINE 10

990 Schedule O, Supplemental Information Return Explanation Reference FORM 990-CASH CONTRIBUTION: 6,723 EZ, PART I, LINE 10

Return Explanation

FORM 990-EZ, PART I, 5,449 PROGRAM EXPENSE 20,564 EXECUTIVE COUNCIL 534 SPONSORSHIP EXPENSE 4,239 BOARD EXPENSE LINE 16 5.621 GO FISH 2.280 TOTAL 47.772

Return Explanation

Reference	
FORM 990-	ACCOUNTS RECEIVABLE 32,391 30,312 PREPAID EXPENSES AND DEFERRED CHARGES 5,400 3,564 TOTAL 37,791
EZ, PART II,	33,876
LINE 24	

Return Explanation
Reference

LINE 26

FORM 990- ACCOUNTS PAYABLE AND ACCRUED EXPENSES 9,213 4,138 DEFERRED REVENUE 45,140 97,585 EZ, PART II,

990 Schedule O, Supplemental Information Return Evolunation

IXCLUITI	Explanation
Reference	·
FORM 990-	EDUCATES A FORUM FOR WOMEN IN COMMERCIAL REAL ESTATE TO DO BUSINESS TOGETHER AND EDUCATE A

lacktriangle EZ. PART III $\,lacktriangle$ ND ELEVATES OUR MEMBERS TO BE RECOGNIZED AS THE EXPERTS IN THE INDUSTRY.

Return Reference	Explanation
FORM 990- EZ, PART III, LINE 28	CREW TAMPA BAY IS THE LEADING ORGANIZATION FOR WOMEN IN THE TAMPA BAY REAL ESTATE INDUSTRY . AS PART OF CREW NETWORK, THE INDUSTRY'S PREMIER NETWORKING COALITION, CREW TAMPA BAY IS DEDICATED TO TRANSFORMING THE COMMERCIAL REAL ESTATE INDUSTRY BY ADVANCING WOMEN GLOBALLY. CREW NETWORK'S MEMBERSHIP OF MORE THAN 10,000 PROFESSIONALS IN 70+ MAJOR GLOBAL MARKETS R EPRESENTS ALL ASPECTS OF COMMERCIAL REAL ESTATE-PROVIDING OUR MEMBERS WITH DIRECT ACCESS T O REAL ESTATE PROFESSIONALS ACROSS ALL GEOGRAPHIES AND DISCIPLINES. SINCE 1996, CREW TAMPA BAY HAS CONNECTED COMMERCIAL REAL ESTATE PROFESSIONALS IN THE TAMPA BAY AREA, WORKING TOG ETHER TO: CREATE A DYNAMIC AND SUPPORTIVE ENVIRONMENT THAT PROMOTES ADVANCEMENT THROUGH KN OWLEDGE SHARING AND NETWORKING; PUSH THE BOUNDARIES IN EVERY FACET OF COMMERCIAL REAL ESTA TE THROUGH PROVOCATIVE DIALOGUE AMONG PEERS DRAWN FROM EVERY DISCIPLINE IN THE INDUSTRY; P ROVIDE EDUCATION PROGRAMS WHICH DIRECTLY AFFECT DAY-TO-DAY WORK AND PROMOTE REAL CHANGE; E NCOURAGE OUR MEMBERS TO BE A FORCE FOR ACTIVISM AND INVOLVEMENT IN OUR COMMUNITIES; PROVID E OPPORTUNITIES FOR MEMBERS TO BUILD RELATIONSHIPS WHICH EXPAND THEIR PROFESSIONAL CONNECT IONS AND HELP THEM BUILD BUSINESS. CREW TAMPA BAY MEMBERS ARE EMPOWERED BY SHARING THEIR K NOWLEDGE AND EXPERIENCE WITH OTHERS IN OUR COMMUNITY WHILE ALSO LEARNING FROM THE INSIGHT AND KNOW-HOW OF OTHERS. THAT'S WHY WE FOCUS OUR EFFORTS ON NETWORKING PROGRAMS SUCH AS GO FISH, ECONOMIC SUMMIT, MONTHLY LUNCHEONS, MEMBERS ONLY EVENTS, AND HOST THE ANNUAL EXCELLE NCE AWARDS HONORING TOP TALENT IN THE INDUSTRY. BY GROWING AND STRENGTHENING OUR NETWORK, WE AIM TO CREATE MORE OPPORTUNITIES FOR WOMEN IN COMMERCIAL REAL ESTATE.