

Return of Organization Exempt From Income Tax

2006

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Form header section A-M containing organization details like name (Big Brothers Big Sisters of America), address (230 North 13th Street, Philadelphia, PA 19107), and financial information (Gross receipts: 27,926,736).

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Main table with 21 rows detailing revenue (Total revenue: 27,926,736), expenses (Total expenses: 27,143,693), and net assets (Net assets at end of year: 18,412,109).

**Part II Statement of Functional Expenses** All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach sch) (cash \$ 0. non-cash \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	22a	0.	0.		
22b Other grants and allocations (att sch) (cash \$ 13,421,702. non-cash \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	22b	13,421,702.	13,421,702.		
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25a Compensation of current officers, directors, key employees, etc listed in Part V-A (attach sch) <b>See L-25a Stmt</b>	25a	665,977.	601,312.	21,544.	43,121.
b Compensation of former officers, directors, key employees, etc listed in Part V-B (attach sch)	25b	0.	0.	0.	0.
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	25c	0.	0.	0.	0.
26 Salaries and wages of employees not included on lines 25a, b, and c	26	5,094,630.	4,215,132.	205,424.	674,074.
27 Pension plan contributions not included on lines 25a, b, and c	27	297,435.	248,685.	11,719.	37,031.
28 Employee benefits not included on lines 25a - 27	28	625,243.	522,766.	24,635.	77,842.
29 Payroll taxes	29	439,938.	367,647.	17,590.	54,701.
30 Professional fundraising fees	30				
31 Accounting fees	31				
32 Legal fees	32				
33 Supplies	33				
34 Telephone	34	267,949.	224,025.	10,567.	33,357.
35 Postage and shipping	35				
36 Occupancy	36	228,218.	206,081.	7,303.	14,834.
37 Equipment rental and maintenance	37	586,312.	474,926.	24,819.	86,567.
38 Printing and publications	38	305,680.	255,571.	12,055.	38,054.
39 Travel	39	812,464.	507,472.	188,978.	116,014.
40 Conferences, conventions, and meetings	40	743,333.	743,333.	0.	0.
41 Interest	41				
42 Depreciation, depletion, etc (attach schedule)	42	106,750.	89,254.	4,206.	13,290.
43 Other expenses not covered above (itemize):					
a Insurance	43a	291,891.	244,043.	11,511.	36,337.
b Leases	43b	80,688.	67,461.	3,182.	10,045.
c Prof Services	43c	3,175,483.	2,316,798.	324,695.	533,990.
d	43d				
e	43e				
f	43f				
g	43g				
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44	27,143,693.	24,506,208.	868,228.	1,769,257.

**Joint Costs.** Check  if you are following SOP 98-2.  
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If 'Yes,' enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_; (ii) the amount allocated to Program services \$ \_\_\_\_\_; (iii) the amount allocated to Management and general \$ \_\_\_\_\_; and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_.

**Part III Statement of Program Service Accomplishments**

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ▶ <u>One to One Mentoring</u> All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others.)
a <u>The mission of BBBSA is to support and promote a network of local affiliates throughout the United States in order to help children reach their potential through professionally supported, one-to-one relationships with measurable impact.</u> (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
b <u>Program Development: BBBSA works with agencies to develop programs and tools for agency use. This category also includes a training and education function.</u> (Grants and allocations \$ <u>5,368,681.</u> ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	<b>9,083,298.</b>
c <u>Field Services: This category includes grants to agencies. Also includes field-based staff that are engaged in direct support to agencies.</u> (Grants and allocations \$ <u>8,053,021.</u> ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	<b>12,407,086.</b>
d <u>Member Communications: Includes the information delivered to agencies via conferences, meetings, and training sessions, to support staff and board development, and further BBBSA visibility and impact.</u> (Grants and allocations \$ <u>0.</u> ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	<b>3,015,824.</b>
e Other program services ..... (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
<b>f Total of Program Service Expenses</b> (should equal line 44, column (B), Program services) ..... ▶	<b>24,506,208.</b>

BAA

**Part IV Balance Sheets** (See the instructions.)

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
ASSETS	45 Cash – non-interest-bearing .....	12,287,371.	45	5,267,111.
	46 Savings and temporary cash investments .....		46	
	47a Accounts receivable .....	47a 332,683.		
	b Less: allowance for doubtful accounts .....	47b 50,000.	321,176.	47c 282,683.
	48a Pledges receivable .....	48a 13,836,875.		
	b Less: allowance for doubtful accounts .....	48b 0.	9,207,465.	48c 13,836,875.
	49 Grants receivable .....		49	
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule) .....			50a
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule) .....			50b
	51a Other notes and loans receivable (attach schedule) .....	51a 4,521.		
	b Less: allowance for doubtful accounts .....	51b 0.	3,276.	51c 4,521.
	52 Inventories for sale or use .....		52	
	53 Prepaid expenses and deferred charges .....		219,793.	53 212,759.
	54a Investments – publicly-traded securities ... L-54a Stmt <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		0.	54a 2,213,762.
	b Investments – other securities (attach sch) ... <input type="checkbox"/> Cost <input type="checkbox"/> FMV			54b
	55a Investments – land, buildings, & equipment: basis ...	55a		
	b Less: accumulated depreciation (attach schedule) .....	55b		55c
	56 Investments – other (attach schedule) .....			56
	57a Land, buildings, and equipment: basis .....	57a 1,584,939.		
b Less: accumulated depreciation (attach schedule) ... L-57. Stmt	57b 1,105,224.	483,992.	57c 479,715.	
58 Other assets, including program-related investments (describe ...)			58	
59 <b>Total assets</b> (must equal line 74). Add lines 45 through 58 .....		22,523,073.	59 22,297,426.	
LIABILITIES	60 Accounts payable and accrued expenses .....	778,281.	60	236,219.
	61 Grants payable .....	4,042,785.	61	3,583,060.
	62 Deferred revenue .....	15,050.	62	10,000.
	63 Loans from officers, directors, trustees, and key employees (attach schedule) .....			63
	64a Tax-exempt bond liabilities (attach schedule) .....			64a
	b Mortgages and other notes payable (attach schedule) .....			64b
	65 Other liabilities (describe ... See Line 65 Stmt)		57,891.	65 56,038.
	66 <b>Total liabilities.</b> Add lines 60 through 65 .....		4,894,007.	66 3,885,317.
NET ASSETS OR FUND BALANCES	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted .....	9,676,646.	67	5,497,940.
	68 Temporarily restricted .....	7,729,031.	68	12,682,321.
	69 Permanently restricted .....	223,389.	69	231,848.
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds .....		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund .....		71	
	72 Retained earnings, endowment, accumulated income, or other funds .....		72	
	73 <b>Total net assets or fund balances.</b> Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21) .....		17,629,066.	73 18,412,109.
	74 <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73 .....		22,523,073.	74 22,297,426.

**Part V-A Current Officers, Directors, Trustees, and Key Employees** (continued)

	Yes	No
<b>75 a</b> Enter the total number of officers, directors, and trustees permitted to vote on organization business as board meetings ... <u>22</u>		
<b>b</b> Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If 'Yes,' attach a statement that identifies the individuals and explains the relationship(s) .....	<b>75 b</b>	<b>X</b>
<b>c</b> Do any officers, directors, trustees, or key employees listed in form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of 'related organization' .....	<b>75 c</b>	<b>X</b>
If 'Yes,' attach a statement that includes the information described in the instructions.		
<b>d</b> Does the organization have a written conflict of interest policy? .....	<b>75 d</b>	<b>X</b>

**Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other**

**Benefits** (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances
N/A				

**Part VI Other Information** (See the instructions.)

	Yes	No
<b>76</b> Did the organization make a change in its activities or methods of conducting activities? If 'Yes,' attach a detailed statement of each change .....	<b>76</b>	<b>X</b>
<b>77</b> Were any changes made in the organizing or governing documents but not reported to the IRS? .....	<b>77</b>	<b>X</b>
If 'Yes,' attach a conformed copy of the changes.		
<b>78 a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? .....	<b>78 a</b>	<b>X</b>
<b>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year? .....	<b>78 b</b>	
<b>79</b> Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement .....	<b>79</b>	<b>X</b>
<b>80 a</b> Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc, to any other exempt or nonexempt organization? .....	<b>80 a</b>	<b>X</b>
<b>b</b> If 'Yes,' enter the name of the organization ▶ _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
<b>81 a</b> Enter direct and indirect political expenditures. (See line 81 instructions.) .....	<b>81 a</b>	0.
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year? .....	<b>81 b</b>	<b>X</b>

**Part VI Other Information** (continued)

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c

Yes	No
	X

  
 If 'Yes,' enter the name of the foreign country \_\_\_\_\_  
 92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here   
 and enter the amount of tax-exempt interest received or accrued during the tax year 92

**Part VII Analysis of Income-Producing Activities** (See the instructions.)

**Note:** Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments			02	2,905,185.	
95 Interest on savings & temporary cash invmnts			02	269,958.	
96 Dividends & interest from securities			02	213,762.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from pers prop					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory			02		
103 Other revenue: a _____					
b Nat Conference Registration			02	171,842.	
c IT Fees from affiliates			02	153,116.	
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				3,713,863.	
105 Total (add line 104, columns (B), (D), and (E))					3,713,863.

**Note:** Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	N/A

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See the instructions.) N/A

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See the instructions.)

a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No  
 b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

**Note:** If 'Yes' to (b), file Form 8870 and Form 4720 (see instructions).

**Part XI** Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

N/A  
Yes No

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity .....

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	-----			
b	-----			
c	-----			
<b>Totals</b>				

Yes No

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity .....

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	-----			
b	-----			
c	-----			
<b>Totals</b>				

Yes No

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above? .....

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

**Please Sign Here**

Signature of officer: *Judith N. Vredenburg* Date: *5/10/07*

Type or print name and title: **President/CEO Judith VREDBENBURGH**

**Paid Preparer's Use Only**

Preparer's signature: *Steve Oulou* Date: *5-10-2007* Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: **BBBSA  
230 N 13TH ST  
PHILADELPHIA PA 19107-1538**

Preparer's SSN or PTIN (See General Instruction W): \_\_\_\_\_ EIN: \_\_\_\_\_ Phone no.: \_\_\_\_\_

**Part III** Statements About Activities (See instructions.)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities . . . . ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) . . . . .	1	X
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property? . . . . .	2a	X
b Lending of money or other extension of credit? . . . . .	2b	X
c Furnishing of goods, services, or facilities? . . . . .	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? . . . . .	2d	X
e Transfer of any part of its income or assets? . . . . .	2e	X
3a Did the organization make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an explanation of how the organization determines that recipients qualify to receive payments.) . . . . .	3a	X
b Did the organization have a section 403(b) annuity plan for its employees? . . . . .	3b	X
c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' attach a detailed statement . . . . .	3c	X
d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? . . . . .	3d	X
4a Did the organization maintain any donor advised funds? If 'Yes,' complete lines 4b through 4g. If 'No,' complete lines 4f and 4g . . . . .	4a	X
b Did the organization make any taxable distributions under section 4966? . . . . .	4b	X
c Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .	4c	X
d Enter the total number of donor advised funds owned at the end of the tax year . . . . . ▶ _____		
e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year . . . . . ▶ _____		
f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4c) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts . . . . . ▶ _____		0
g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year . . . . ▶ _____		0.

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.*

**Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) .....	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
<b>15</b> Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) .....	21,532,652.	17,466,809.	14,695,292.	13,308,135.	67,002,888.
<b>16</b> Membership fees received .....	2,775,227.	2,081,159.	2,672,470.	2,648,399.	10,177,255.
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose .....	0.	8,542.	29,807.	35,005.	73,354.
<b>18</b> Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 .....	189,005.	39,071.	27,601.	72,372.	328,049.
<b>19</b> Net income from unrelated business activities not included in line 18 .....					
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf .....					
<b>21</b> The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge .....					
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets .....	202,615.				202,615.
<b>23</b> Total of lines 15 through 22 .....	24,699,499.	19,595,581.	17,425,170.	16,063,911.	77,784,161.
<b>24</b> Line 23 minus line 17 .....	24,699,499.	19,587,039.	17,395,363.	16,028,906.	77,710,807.
<b>25</b> Enter 1% of line 23 .....	246,995.	195,956.	174,252.	160,639.	
<b>26 Organizations described on lines 10 or 11:</b>					
<b>a</b> Enter 2% of amount in column (e), line 24 .....					<b>26a</b> 1,554,216.
<b>b</b> Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts .....					<b>26b</b> 19,203,488.
<b>c</b> Total support for section 509(a)(1) test: Enter line 24, column (e) .....					<b>26c</b> 77,710,807.
<b>d</b> Add: Amounts from column (e) for lines: 18 328,049. 19 22 202,615. 26b 19,203,488. ....					<b>26d</b> 19,734,152.
<b>e</b> Public support (line 26c minus line 26d total) .....					<b>26e</b> 57,976,655.
<b>f</b> Public support percentage (line 26e (numerator) divided by line 26c (denominator)) .....					<b>26f</b> 74.61 %
<b>27 Organizations described on line 12:</b>					
<b>a</b> For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year: (2005) _____ (2004) _____ (2003) _____ (2002) _____					
<b>b</b> For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2005) _____ (2004) _____ (2003) _____ (2002) _____					
<b>c</b> Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					<b>27c</b> _____
<b>d</b> Add: Line 27a total _____ and line 27b total _____					<b>27d</b> _____
<b>e</b> Public support (line 27c total minus line 27d total) .....					<b>27e</b> _____
<b>f</b> Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ....					<b>27f</b> _____
<b>g</b> Public support percentage (line 27e (numerator) divided by line 27f (denominator)) .....					<b>27g</b> _____ %
<b>h</b> Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) .....					<b>27h</b> _____ %
<b>28 Unusual Grants:</b> For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

**Part IV Reason for Non-Private Foundation Status** (See instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5  A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6  A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7  A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8  A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ▶ -----
- 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11 a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11 b  A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12  An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc, functions – subject to certain exceptions, and (2) no more than 33-1/3% 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). (Also complete the **Support Schedule** in Part IV-A.)
- 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization: ▶  
 Type I     Type II     Type III-Functionally Integrated     Type III-Other

**Provide the following information about the supported organizations.** (See instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
<b>Total</b> .....					

- 14  An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)



Form 990, Page 4, Part IV, Line 54a

**Investments - Publicly-Traded Securities Statement**

<b>Line 54a – Investments - Publicly-Traded Securities:</b>	<b>Beginning of Year</b>	<b>End of Year</b>
US Large Cap Core Equity	0.	962,986.
US Large Cap Growth Equity	0.	553,440.
US All Cap Growth Equity	0.	367,484.
US Large Cap Value Equity	0.	329,852.
<b>Total</b>	<b>0.</b>	<b>2,213,762.</b>

Form 990, Page 4, Part IV, Lines 57a &amp; 57b

**Land, Buildings and Equipment Statement**

	<b>(a) Cost/Other Basis</b>	<b>(b) Accumulated Depreciation</b>	<b>(c) Book Value</b>
Furniture and Equipment	1,224,547.	1,021,147.	203,400.
Building Improvements	360,392.	84,077.	276,315.
<b>Total</b>	<b>1,584,939.</b>	<b>1,105,224.</b>	<b>479,715.</b>

Form 990, Page 4, Part IV, Line 65

**Other Liabilities Statement**

<b>Line 65 - Other Liabilities:</b>	<b>Beginning of Year</b>	<b>End of Year</b>
Due to Local Agencies Cars for Kids Sake	57,891.	56,038.
<b>Total</b>	<b>57,891.</b>	<b>56,038.</b>

## Supporting Statement of:

Form 990 p 1/Line 1e - Noncash

Description	Amount
	0.
Total	<u>0.</u>

## Supporting Statement of:

Form 990 p 2/Line 22b cash

Description	Amount
Various Grants to agencies See attached schedule.	13,421,702.
Total	<u>13,421,702.</u>

## Supporting Statement of:

Form 990 p 4/Line 45, column (A)

Description	Amount
Operating Cash and Investments	12,063,982.
Endowments	223,389.
Total	<u>12,287,371.</u>

## Supporting Statement of:

Form 990 p 4/Line 45, column (B)

Description	Amount
Cash and Money Markets	5,035,263.
Endowment Cash	231,848.
Total	<u>5,267,111.</u>

## Supporting Statement of:

Form 990 p 4/Line 47a

Description	Amount
BBBS Agency Fees	332,683.

Continued

**Supporting Statement of:**

Form 990 p 4/Line 51a

Description	Amount
Total	<u>4,521.</u>

**Supporting Statement of:**

Form 990 p 4/Line 51c, column (A)

Description	Amount
Accrued Interest Receivable	3,276.
Total	<u>3,276.</u>

**Supporting Statement of:**

Form 990 p 4/Line 53, column (A)

Description	Amount
Prepaid Rent	4,472.
Prepaid Insurance	189,777.
Prepaid Expense-Web Hosting	25,544.
Total	<u>219,793.</u>

**Supporting Statement of:**

Form 990 p 4/Line 53, column (B)

Description	Amount
2007 Prepaid Insurance	159,823.
Cobra Premiums	3,025.
Due from Foundation for BBBSA	25,105.
2007 Prepaid Expense	20,334.
Security Rent Deposit	4,472.
Total	<u>212,759.</u>

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**Supporting Statement of:**

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Form 990 p 4/Line 60, column (A)

Description	Amount
Accrued Expense	548,445.
Accounts Payable	162,727.
Accrued Salaries	57,729.
Accrued Regional Conference	9,380.
Total	<u>778,281.</u>

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**Supporting Statement of:**

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Form 990 p 4/Line 62, column (A)

Description	Amount
Deferred Revenue Fees	15,050.
Total	<u>15,050.</u>

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**Supporting Statement of:**

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Form 990 p 4/Line 62, column (B)

Description	Amount
Deferred AIM System Reveune	10,000.
Total	<u>10,000.</u>