

AGENDA

ST. PETERSBURG COLLEGE BOARD OF TRUSTEES October 17, 2017

Bay Pines STEM Center
4723 Bay Pines Terr.
St. Petersburg, FL

SPECIAL MEETING: 9:00 A.M.

I. CALL TO ORDER

- A. Invocation
- B. Pledge of Allegiance

II. RECOGNITIONS

- A. Presentation of Retirement Resolutions and Motion for Adoption
 - 1. Mark McHugh (*Not Attending*)
- B. Announcements
 - 1. JP Morgan New Skills at Work – Ms. Frances Neu, Vice President, Institutional Advancement, Foundation Director and Mr. Clayton Schnelker, Executive Director, JP Morgan
 - 2. 2017 Outstanding Impact by an Organization from Quality Matters – Dr. Susan Colaric, Associate Vice President, Online Learning Services

III. COMMENTS

- A. Board Chair
- B. Board Members
- C. President
- D. Public Comment pursuant to §286.0105 FS

IV. REVIEW AND APPROVAL OF MINUTES

Board of Trustees' Meeting of September 19, 2017 (*Action*)

V. MONTHLY REPORTS

- A. Board Attorney
- B. General Counsel
- C. Faculty Governance Organization – Dr. Shannon Ulrich, President (*Presentation*)
- D. Career Service Steering Committee – Ms. Jeanne Trimble, Chair (*Presentation*)

VI. STRATEGIC FOCUS AND PLANNING

A. STUDENT SUCCESS AND ACADEMIC ACHIEVEMENT

- 1. Pathways Update – Dr. Anne Cooper, Senior Vice President, Instruction and Academic Programs (*Presentation/Action*)

2. Online Success Rates – Dr. Susan Colaric, Associate Vice President, Online Learning Services (*Presentation*)
3. Learning Beyond the Classroom – Civic Engagement – Dr. Tara Newsom, Faculty, Social and Behavioral Science and Mr. Davie Gill, Student Life and Leadership Coordinator (*Presentation*)

B. BUDGET AND FINANCE

1. Monthly Financial Report –Mr. Brian Miles, Vice President, Administrative/Business Services and Information Technology and Ms. Janette Hunt, Acting Associate Vice President, Budget and Compliance (*Presentation*)

C. ADMINISTRATIVE MATTERS

1. Human Resources
 - a. Personnel Report (*Action*)
 - b. Employee Health Insurance – Mr. Brian Miles and Ms. Michelle Manteiga, Interim Senior Manager, Benefits and Wellness (*Presentation*)
2. Construction
 - a. Guaranteed Maximum Price (GMP) for Phase II Construction, Student Success Center, St. Petersburg/Gibbs Campus – Mr. Jim Waechter, Associate Vice President, Facilities, Planning and Institutional Services (*Presentation/Action*)

VII. CONSENT AGENDA

A. OLD BUSINESS (**items previously considered but not finalized**) - None

B. NEW BUSINESS

1. Workforce and Professional Development Curriculum Changes (*Action*)*
2. GRANTS/RESTRICTED FUNDS CONTRACTS
 - a. Office of the Attorney General, Division of Victim Services, Victim of Crime (VOCA) Program (*Action*)

VIII. DIRECT SUPPORT ORGANIZATIONS

A. Direct Support Organizations

1. AUDITS AND OTHER STATUTORY REQUIREMENTS OF DIRECT SUPPORT ORGANIZATIONS, APRIL 1, 2016, THROUGH MARCH 31, 2017
 - a. St. Petersburg Foundation, Inc. (*Action*)
 - b. Leepa-Rattner Museum of Art (LRMA) (*Action*)
 - c. Institute for Strategic Policy Solutions (*Action*)

IX. INFORMATIONAL REPORTS

- A. Quarterly Informational Report on Contract Items (*Information*)
- B. Quarterly Information Report of Dell Financial Agreements (*Information*)

X. PROPOSED CHANGES TO BOT RULES MANUAL – Public Hearing – None

XI. PRESIDENT’S REPORT

XII. NEXT MEETING DATE AND SITE

November 14, 2017, Tarpon Springs Campus

XIII. ADJOURNMENT

ST. PETERSBURG COLLEGIATE HIGH SCHOOL GOVERNING BOARD MEETING TO IMMEDIATELY FOLLOW – Presenter: Principal Starla Metz (see separate agenda)

If any person wishes to appeal a decision made with respect to any matter considered by the Board at its meeting October 17, 2017, he or she will need a record of the proceedings. It is the obligation of such person to ensure a verbatim record of the proceedings is made, §286.0105, Florida Statutes.

Items summarized on the Agenda may not contain full information regarding the matter being considered. Further information regarding these items may be obtained by calling the Board Clerk at (727) 341-3241.

***No packet enclosure**

Date Advertised: October 6, 2017

Confirmation of Publication

FGO Update

Presented by Shannon Ulrich

TOPICS

- 🟢 **Introduction – FGO Goals**
- 🟢 **Classroom Experience – Update**
- 🟢 **Faculty Highlights – Connections**



Introduction



TASK LIST:

(Get caught up from Irma)

FGO website

Campus Visits

Identify Goals

Classroom Experience

- 💧 **Committee**

- 💧 Deans and Faculty

- 💧 **Collaborative Lab Meeting**

- 💧 November 17th, 2017

- 💧 Define mission statement and goals



Faculty Highlights: Classroom, Community & Collaboration



Kelli Stickrath (TS) hosts “Owls in the Classroom” with Clearwater Audubon Society

Faculty Highlights: Classroom, Community & Collaboration



SPC Baccalaureate Biology faculty, Michelle Osovitz and Linae Boehme, partnered with SPC's College of Marine Science, PureMolecular LLC, and Florida Wildlife Conservation (FWC) to coordinate a Harmful Algal Bloom NASBA training.

Questions or Comments?

SPC St. Petersburg College

CAREER SERVICE EMPLOYEE COUNCIL



2017-2018

CSEC

EXECUTIVE BOARD MEMBERS

Jeanne Trimble	Chair
Kimberly R. Williams	Vice-chair
Shirell Essix	Secretary
Karen Nadeau	Treasurer
Mary Jo Golley	Past Chair



2017-2018



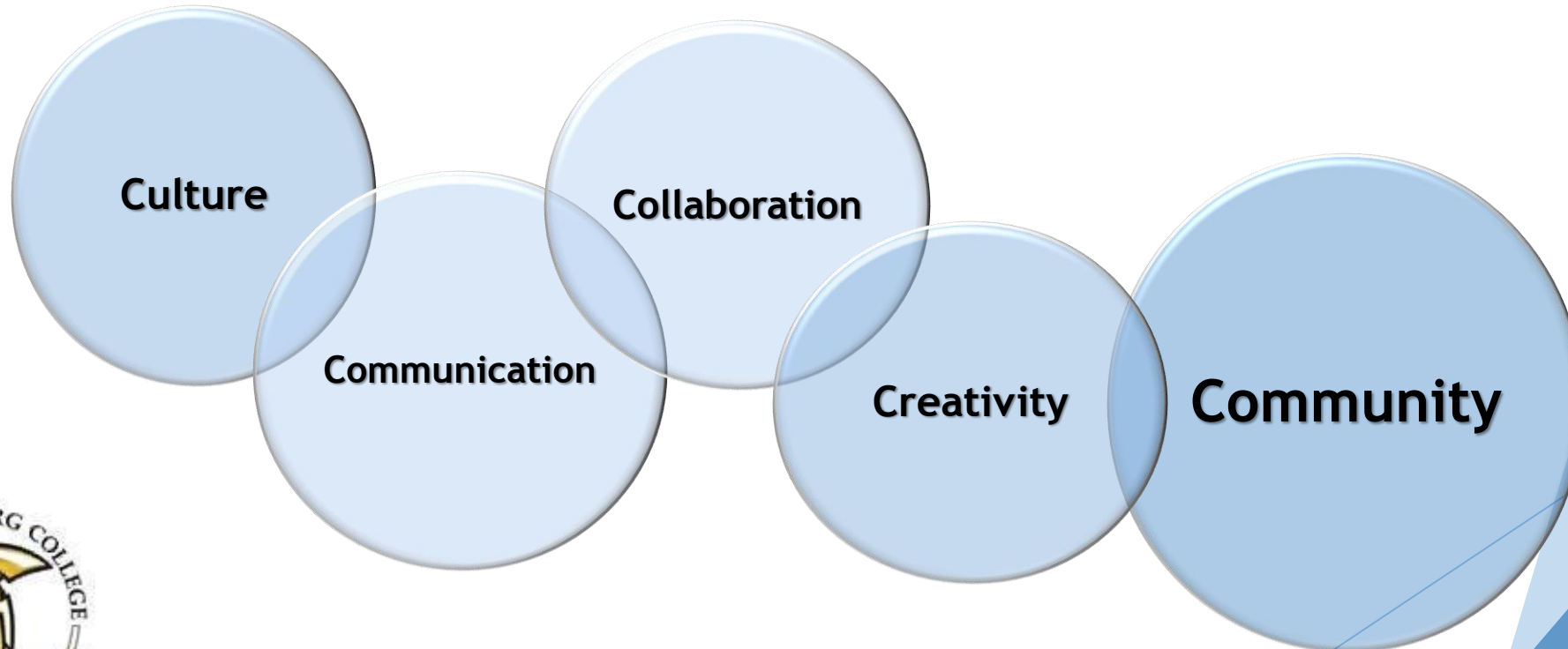
CSEEC

Steering Committee

- Our 2017-2018 nominations filled 23 of the 24 Campus Representatives in the service areas of Administration, Facilities, and Student Support

CSEC...

is engaging in the Four C's and Community campaign





CSEEC

SPC Discovery Day

CSEEC 101: It's a new day for Career Service Employees! Two informational and fun sessions.

Speaker: Henry Johnson 10 a.m.

CSEC

Goals...



- Brand CSEC to create a meaningful, relevant council
- Have CSEC leadership visits to campuses
- Engage and enrich the lives of Career Service employees

October 17, 2017

MEMORANDUM

TO: Board of Trustees, St. Petersburg College

FROM: Tonjua Williams, President



SUBJECT: Guided Pathways Assessment

Confirmation is sought to approve the Institutional Policies to support Guided Pathways Assessment.

This is one of the documents to be submitted before the American Association of Community Colleges Pathways Project taking place in Seattle October 26 – 28, 2017. The purpose is to document how the college has addressed various policies in support of Guided Pathways as they relate to the four main goals in the Pathways Project. These goals are: clarify the student pathway to employment or transfer, help students choose and enter a pathway, keep students on their path, and ensure students are learning along their path. As you can see, St. Petersburg College has kept pace in addressing policy changes before and during the Pathways Project timeframe.

Attachment

Pathways Institute #6 Homework



**INSTITUTIONAL POLICIES TO SUPPORT GUIDED PATHWAYS
POLICY SELF-ASSESSMENT FOR GOVERNING BOARDS**

INSTRUCTIONS: PLEASE COMPLETE THE FOLLOWING ASSESSMENT WITH MEMBERS OF YOUR GOVERNING BOARD, IF POSSIBLE, AND SUBMIT TO CORAL NOONAN-TERRY BY OCTOBER 13TH. (NOONAN@CCCSE.ORG).

INSTITUTION NAME: St. Petersburg College

Policy	Adopted/ Date	If adopted prior to pathways work, has policy been revisited/ revised?	If not adopted, steps toward adoption?
Clarify the Pathways			
Has your governing board officially endorsed the institution's work to develop and implement guided pathways at scale – <i>for all students</i> in the college?	BOT October 13, 2015	Presented to BOT when we first applied for AACC Ongoing updates on implementation	
Has your institution mandated redesign of developmental math and English, with the goal of ensuring students complete college-level gateway courses during the first academic year?	BOT January 17, 2017	Mandated that students must take Composition I within first 6 credit hours and begin math sequence within the first 12 credit hours.	
Has your institution mandated focus on and monitoring of equity, inclusion, and diversity in program design and review?	NA – required by state		Equity Report submitted to state of FL annually – 2017 SPC received high marks on work being done.

<p>Does your governing board explicitly support institutional partnerships with K-12, transfer institutions, and regional employers to ensure alignment of pathways across sectors?</p>	<p>NA – required by statute</p>		<p>2+2 articulation – state mandated</p> <p>K12 - BOT approves annually</p> <p>Advisory Boards for programs - updated at BOT meetings during Workforce reports</p> <p>Institutional specific articulations such as FUSE, IGNITE are brought before the BOT</p>
<p>Help Students Choose and Enter Pathways</p>			
<p>Has your institution mandated multiple measures assessment for all students, to identify the level and type of support needed for success in college-level courses?</p>		<p>SB1720 removed the ability of institutions to test for developmental needs</p> <p>We use multiple measures within our prediction model to let students know whether or not we would recommend developmental courses as an option.</p>	
<p>Has your institution mandated orientation for all entering students prior to registration?</p>		<p>SPC uses a 4-week Smart Start orientation required for all FTIC students.</p>	
<p>Does your institution prohibit late registration?</p>	<p>Internal policy set in place for Fall 2014</p>	<p>Recent changes prohibit students from registering after the first class meeting, including online courses.</p>	

<p>Has your institution mandated a student success course for all students in their first semester (or summer prior)?</p>	<p>New Student Orientation White Paper 2012</p>	<p>Students who test into two developmental areas must take the College Experience, our student success course. First Time at SPC students receive much of the same information through Smart Start</p>	
<p>Help Students Stay on Their Path</p>			
<p>Has your institution mandated early advising and career exploration for all students, leading to development of an education plan?</p>		<p>This is conducted during the Smart Start Orientation and continues through their involvement in Career and Academic Communities</p>	
<p>Has your institution implemented and scaled systems enabling students and their advisors to monitor progress and milestone accomplishments along the chosen pathway?</p>		<p>Case management by advisors and the registration tool that measures progress towards completion supports this process.</p>	
<p>Has your institution implemented and scaled systems for identifying students who are struggling and intervening with timely support (i.e., early alert)?</p>		<p>An early alert system was used for several years but has been recently transitioned towards a faculty early notification system within the Course Management System.</p>	

Ensure Students are Learning			
<p>Does your governing board have a policy statement mandating periodic review of student learning outcomes and their appropriate alignment with transfer and employment options upon completion?</p>			<p>SPC three year program review and assessment processes, along with curriculum development and pathway review include the analysis of learning outcomes. Annual Program Viability Reports include transfer and employment information.</p> <p>Advisory Boards discuss the appropriateness of student learning outcomes in regards to final program outcomes but intent to align the two has not been made obvious.</p>
<p>Does your institution mandate and fund professional development programs that focus on improving student success, including cultural competency and effective practices of teaching and learning?</p>	<p>Faculty Handbook</p>	<ul style="list-style-type: none"> • The Center for Excellence in Teaching and Learning (CETL) provides onboarding of new faculty and adjuncts as well as various sponsored trainings • Staff Professional Development for faculty • Ongoing internal professional development opportunities • Regular Online Services trainings • College Hosted Conferences 	

Has your institution revised minimum qualifications and hiring practices for faculty to ensure effective teaching skills?	BOT Procedure 2.21 4/15/14	<ul style="list-style-type: none"> • Teaching demo, review of teaching experience, discipline specific credentialing • Peer, dean, provost, chief academic officer and president interviews 	
Has your institution revised evaluation, promotion, and tenure guidelines for faculty to ensure effective teaching skills?	BOT Procedure 2.21 4/15/14	Revised evaluations as well as promotion and continuing contract guidelines	
Essential Conditions			
Has your governing board adopted a resolution to increase completion rates?		The college has been monitoring and sharing student demographic and success data with the BOT every semester.	
Has your governing board adopted a resolution committing the institution to achievement of equity in student outcomes?		The data above is disaggregated during the presentation.	
Does your institution ensure that the strategic plan centers on student success and completion (as opposed to buildings, bonds, and budgets)?		The BOT annual strategic priorities center on student success and completion and aligned to the college budget during its developmental phase.	
Does the governing board agenda include at least one item on student success for every board meeting?	YES – not policy	The BOT agenda has at least one item under Student Success and Achievement area.	
Does the governing board have regular updates on the institution's progress toward scaled guided pathways implementation?		Yes, the BOT has had regular updates.	

Does your institution require regular presentation and use of disaggregated cohort tracking data, including student progress and completion?		Yes we track cohort transfer, and our performance based funding uses cohort based tracking.	
Has your institution mandated development of a comprehensive evaluation design, both formative and summative, for college processes and programs?		Yes, it is applied to academic programs, administrative areas, academic services, and community services per SACSCOC.	
Has the governing board devoted sufficient time to understand the work of guided pathways reform and the related demands upon the CEO in leading large-scale institutional change?		Yes, through ongoing updates. It is also included in the orientation for new BOT members.	



JOBS FOR THE FUTURE

THE POLICY LEADERSHIP TRUST FOR STUDENT SUCCESS

PURPOSE OF THE TRUST & OVERVIEW OF THE STATE POLICY FRAMEWORK

AUGUST 22, 2017

CALL TO ACTION

After a decade of college completion reform, compelling evidence has emerged on what works to help the most students persist and succeed, especially those who are low-income or underserved. Leading stakeholders from community colleges, state systems, and policy, research, and advocacy organizations have shifted from piloting isolated interventions to designing and implementing unified, connected solutions within and across institutions and systems.

They have embraced guided pathways as a coherent approach to achieving the institutional transformation needed to improve student outcomes. As one of the leading pathway initiatives nationally, the American Association of Community Colleges Pathways Project describes guided pathways in the following way:

The Pathways Model is an *integrated, institution-wide* approach to student success based on intentionally designed, clear, coherent and structured educational experiences, informed by available evidence, that guide each student effectively and efficiently from her/his point of entry through to attainment of high-quality postsecondary credentials and careers with value in the labor market.

Evidence is emerging on the impact of pathway interventions. Policymakers are beginning to take notice, resulting in a flurry of legislative proposals to codify reform efforts. In this period of rapid innovation and transformation, the question remains, “how can policy *help* institutions and state systems in the efforts to scale guided pathways?”

MISSION OF THE TRUST

Jobs for the Future (JFF) convenes the Policy Leadership Trust for Student Success (the Trust) to create a more deliberate environment for culling institutional knowledge and evidence to inform policy solutions for improving college completion rates and accelerating achievement for underrepresented students. Intentionally designed to bring together professional staff in system offices and higher education agencies with college leaders, the Trust seeks to ensure community colleges are more effective and efficient by intentionally inserting the experiences of practitioners into state and federal policy dialogues on postsecondary completion. Their perspectives are often missing in the policymaking process.

The mission of the Trust is to advance evidenced-based, practitioner-informed policy approaches that can strengthen pathways to postsecondary credentials of value in the labor market. The Trust develops state and federal policy recommendations and advocates for adoption of these recommendations through (1) strategic outreach to state and federal policymakers, (2) consultation with practitioners in JFF's 17-state Postsecondary State Policy Network, (3) dialog with the field of practitioners, and (4) thought leadership through the media.

2017 LISTENING TOUR

In winter and spring 2017, Jobs for the Future embarked on a listening tour to gather the perspectives of individual Trust members on how state policy can *help* support institutional implementation and scaling of guided pathways. Interviews were conducted with 24 current and former Trust members, representing 10 institutions and 14 systems-level organizations across 13 states with differing governance structures and higher education policy priorities. Several common themes emerged through the listening tour, reflected in the following set of policy design principles and major elements of the state policy framework.

EIGHT DESIGN PRINCIPLES FOR GOOD POLICY

The policy recommendations of the Trust are based on the following six design principles for how state and federal policy can be most helpful to institutions and state systems in scaling guided pathways and improving student success.

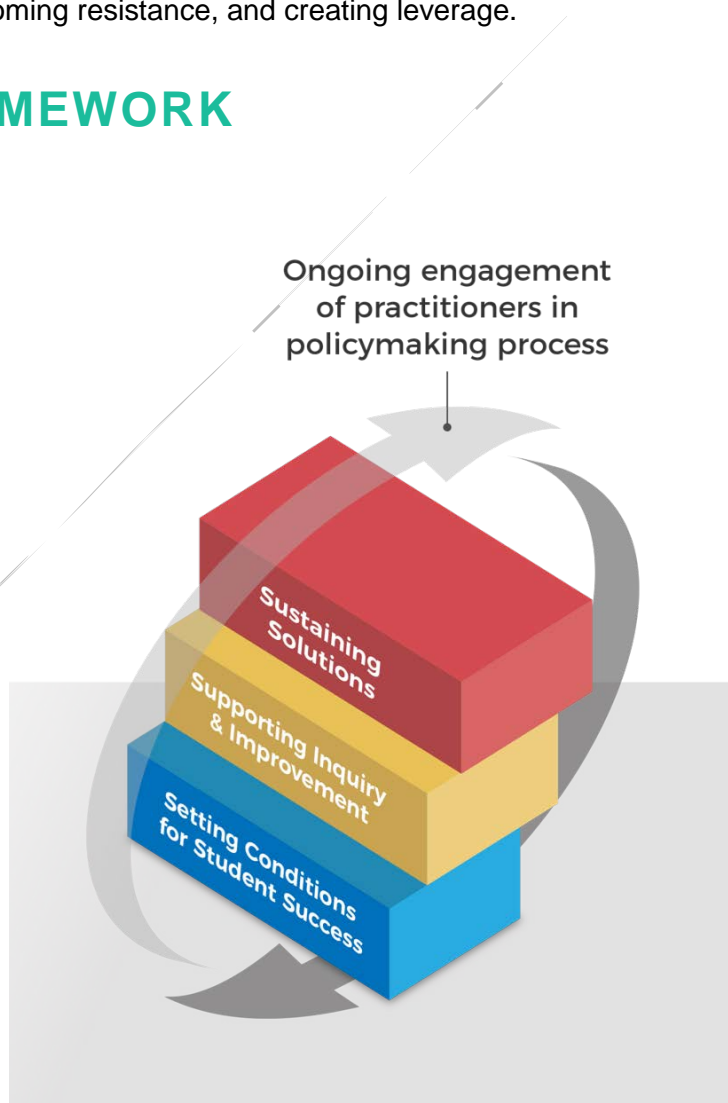
1. There are **no silver bullets**. No single policy intervention will move the needle.
2. State **context matters** when designing policy
 - > Political landscape
 - > Priorities
 - > Governance
 - > Capacity
 - > Collaboration
 - > Current and past reforms

WORKING DRAFT

3. Policy should **flow from practice**. Not the inverse.
4. Policy is most likely to be implemented with fidelity when practitioners have informed the policy process and have a **sense of ownership**.
5. Good policy creates **incentives** and structures to catalyze change within institutions and among systems.
6. Good policy **respects the autonomy** of institutions over academic and student affairs.
7. Good policy **does not prescribe rigid implementation** of practices and models.
8. **High-level directives can be useful** at times in steering the direction of reform, deepening commitment, overcoming resistance, and creating leverage.

STATE POLICY FRAMEWORK

As an essential first step, policymakers should establish key metrics, funding incentives, and set expectations for systems integration and employer engagement. With these essential incentive structure in place, the Trust recommends that policymakers should build state and institutional capacity to identify key barriers to student success and implement key solutions, related to guided pathways. This is represented in the middle block “supporting inquiry & improvement.” Only after institutions and state systems have sufficiently scaled pathway reforms would the Trust recommend codifying practices into policy may be appropriate. Doing so would help to sustain and scale momentum. In each of the three phases, the Trust recommends that policymakers actively engage practitioners in the design of policy to ensure that policy is informed and supportive of good practice on the ground



See below for detailed policy recommendations for each phase of the framework.

SETTING CONDITIONS FOR STUDENT SUCCESS

- ✓ **Establish statewide goal** for increasing attainment rates of credentials of value.
- ✓ **Establish key performance indicators** to track momentum, completion, transfer, and employment outcomes.
- ✓ **Reward institutions and systems for student success.**
 - > Align funding to key metrics and strategic priorities
 - > Emphasize equity and economic mobility in funding decisions
 - > Incentivize systems change and alignment
- ✓ **Foster cross-sector collaboration between K-12, community colleges, and universities in designing clearer paths to postsecondary credentials and employment.** Establish process, roles and responsibilities, and deadlines for institutions and systems to develop:
 - > Statewide transfer pathways and policies
 - > Differentiated math pathways
 - > Align to dual enrollment course offerings and other on-ramps (e.g. adult education and development education) to guided pathways, especially transfer-bound programs of study.
- ✓ **Foster cross-sector collaboration to bolster financial stability of students** to alleviate their financial hurdles to completion.
 - > Incentivize local partnerships among institutions and health and human services agencies
 - > Braid federal and state funding of health and human services with postsecondary resources for non-academic supports (e.g. emergency aid, wraparound services)
 - > Streamline access to public benefits
 - > Preserve need-based financial aid
 - > Create financial incentives for completion (e.g. transfer grants)
- ✓ **Deepen engagement and responsiveness to business and industry needs.**
 - > Meaningful engagement of employers to inform decision-making (e.g. Industry-led sector partnerships)
 - > Use of real-time and traditional labor market information to inform decision-making

- > Investment and alignment with work-based learning

SUPPORTING INQUIRY AND IMPROVEMENT

✓ **Invest in data capacity**

- > Support a culture of inquiry by enhancing data capacity and encouraging use of data to identify barriers to student success and inform decision-making on implementation of solutions.
- > Establish/enhance state-level longitudinal data systems to track student progress across K-12, workforce, and higher education systems and institutions
- > Ensure data is disaggregated by readiness, race, and socioeconomic status to safeguard equity

✓ **Invest in statewide infrastructure for scale.** Develop state-level capacity to:

- > Convene institutions to facilitate peer exchange and buy-in of evidence-based solutions to barriers
- > Deploy expert practitioners to provide guidance to institutions undertaking reforms
- > Help practitioners understand the implications and opportunities of policies in place
- > Broker technical assistance from national organizations to support institutions in strategic planning, design, and implementation of solutions

✓ **Enhance institutional capacity** to identify barriers to student success and implement needed reforms through additional resources to:

- > Defray upfront costs of implementing guided pathway practices (e.g., hiring additional advisors)
- > Purchase and integrate technology tools
- > Enhance institutional capacity for data analysis
- > Support campus planning and implementation of pathway reforms
- > Provide professional development for faculty and advisors in support of student success efforts

✓ **Remove policy barriers** to implementing guided pathway practices.

- > Ensure sufficient flexibility for institutions to experiment with implementing evidence-based solutions (e.g., accelerating developmental education, using multiple measures for placement, or instituting an integrated approach to academic advising and career counseling)

SUSTAINING SOLUTIONS

- ✓ **Conduct formative and summative evaluations of implemented practices, especially *before* considering codifying practices in policy**
- ✓ **Establish formal opportunities for practitioners to inform policy design and rule making.**
- ✓ **Strive for continuous improvement.**
 - > Over time, evaluate impact of goals, metrics, incentives, capacity building, engagement strategies, and policy adoption. Make appropriate adjustments to bolster scaling of guided pathways.

APPENDIX

CURRENT MEMBERS OF THE TRUST

Co-Chairs

- > **Scott Ralls**, Northern Virginia Community College
- > **Marcia Ballinger**, Lorain County Community College

Members

- > **Julie Alexander**, Miami Dade College
- > **Michael Baston**, Rockland Community College
- > **Peter Blake**, State Council of Higher Education for Virginia
- > **Lisa Chapman**, North Carolina Community College System
- > **Tamara Clunis**, Amarillo College
- > **Tristan Denley**, University System of Georgia
- > **Johanna Duncan-Poitier**, State University of New York
- > **Maria Harper-Marinick**, Maricopa Community Colleges
- > **Maria Hesse**, Arizona State University
- > **Jack Hershey**, Ohio Association of Community Colleges
- > **Jon Kerr**, Washington State Board for Community and Technical Colleges
- > **Kenneth Klucznik**, Connecticut State Colleges & Universities
- > **Mike Leach**, Arkansas Community Colleges
- > **Sharon Morrissey**, Virginia Community College System
- > **John Morton**, University of Hawai'i Community Colleges
- > **Lawrence Nespoli**, New Jersey Council of County Colleges
- > **Peter Quigley**, University of Hawai'i Community Colleges
- > **Richard Rhodes**, Austin Community College District
- > **Mary Rittling**, Davidson County Community College
- > **Karen Stout**, Achieving the Dream
- > **Debra Stuart**, Oklahoma State Regents for Higher Education
- > **Tonjua Williams**, St. Petersburg College
- > **Jan Yoshiwara**, Washington State Board for Community and Technical Colleges

EVOLVING LIST OF ADVISORS

- > **Michelle Cooper**, Institute for Higher Education Policy
- > **Nikki Edgecombe**, Community College Research Center
- > **Melissa Henderson**, Educate Texas
- > **Robert Johnstone**, National Center for Inquiry & Improvement
- > **Hana Lahr**, Community College Research Center
- > **Mary Alice McCarthy**, New America Foundation
- > **Kay McClenney**, American Association of Community Colleges
- > **Tia McNair**, Association of American Colleges & Universities
- > **Christopher Nellum**, Policy & Research Director, Young Invincibles
- > **Lashawn Richburg-Hayes**, formerly with MDRC
- > **Douglas Shapiro**, National Student Clearinghouse Research Center
- > **Martha Snyder**, HCM Strategists
- > **Uri Treisman**, Charles A. Dana Center

FOR MORE INFORMATION

Contact

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Opening Town Hall Questions

Institution Name: _____

The Opening Plenary Session at Institute 6 will be a Town Hall format. Community college state leaders and system heads will field questions from the Pathways institutions about the current state policy environment for community college reform, funding models, funding incentives for institutional change, transfer, and other state policies. Please submit at least **three** questions your team would like to be considered during the Town Hall.

1.

2.

3.

4.

5.

Institutional Policies to Support Guided Pathways

Anne Cooper, PhD – SVP, Instruction and Academic Programs

SPC Board of Trustees – October 17, 2017

SPC Endorsed implementation of guided pathways

BOT - October 13, 2015

Redesign of developmental Mathematics and English -response to SB 1720 (2013)

BOT - January 17, 2017

- Composition I within first 6 college level credits attempted
- Mathematics sequence begins within the first 12 college level credits attempted

Focus on and monitoring of equity, inclusion, and diversity

BOT – April 18, 2017

Partnerships with K-12, transfer institutions, and employers

- 2+2 articulation – state articulation
- Annual K-12 articulation agreement - BOT approves annually
- Program Advisory Committees meet 2-3 times per year – regular update to BOT
- Specific Institutional articulations such as FUSE & IGNITE are monitored and updated regularly and BOT approved

SB 1720 – limited testing to HS graduates prior to 2007

Prediction model uses multiple measures to identify students who are likely college ready

Mandated Orientation

All new to SPC students attend a 4 week Smart Start Orientation

Late Registration

- Students cannot register for on campus classes after the first meeting date has occurred
- Students cannot register for online classes after the Sunday before classes begin

Student Success Courses

- Students who test into two developmental areas take The College Experience
- Smart Start orientation provides students access to the many success resources

Early advising and career exploration embedded in Smart Start orientation continues through Career and Academic Communities

Milestone Monitoring

- Case management by advisors
- Students have visual of progress to graduation

Early Alert System transitioning to a faculty notification system in My Courses.

Periodic review of student learning outcomes and successful transfer or employment

- 3 year Program reviews
- Annual Program Viability Reports
- Advisory Committee Input
- Regular Curriculum and Pathways reviews

Professional development to improve student success

- The Center for Excellence in Teaching and Learning (CETL) provides onboarding of new faculty and adjuncts as well as various sponsored training
- Staff Professional Development for faculty
- Ongoing internal professional development opportunities
- Regular Online Services trainings
- College Hosted Conferences

Minimum qualification for hiring faculty

- Teaching demo, review of teaching experience, discipline specific credentialing
- Peer, dean, provost, chief academic officer and president interviews
- Revised evaluations as well as promotion and continuing contract guidelines
(Revised 2013)

Questions?



Online Learning & Services

OCTOBER 17, 2017



Student Readiness

Confidence in academic ability
Technology use
Self-efficacy
Motivation
Time management
Environment

SPC St. Petersburg College

Student Readiness

Student Readiness Assessment

Many students worry about whether they are ready to take college classes -- should they work and how much? How much help will faculty members give? How hard will it be? This quick survey uses information from previous students' transition to college and helps you gauge where you "fit" on a readiness scale. We'll start with a few basic questions to figure out your strengths and areas for improvement and then present some options to learn more. Since it's a personal assessment everyone's answers will be different so just answer each questions as truthfully as possible.

There are only 25 questions and it should take approximately 10-15 minutes to complete.

I am pursuing a career that really interests me.

Strongly Disagree Disagree Agree Strongly Agree

School work is not easy for me.

Strongly Disagree Disagree Agree Strongly Agree

If I have computer problems I get frustrated and give up.

Strongly Disagree Disagree Agree Strongly Agree

I tend to leave tasks to the last minute.

Strongly Disagree Disagree Agree Strongly Agree



Christopher Harvey

Children 2 children

Preferred classes 4 classes; Online; Weekday Mornings & Afternoons

Career path Technology

Work hours 11-30 hours

Goal Advance my career

Motivation "Be miserable or motivate yourself. Whatever has to be done, it's always your choice" Wayne Dyer

Student Message

(What students see)




Attending college is hard work and transition to the collegiate level. The helping you succeed, Christopher. The work on to give yourself the best of

You'll need strong computer skills for already enrolled, we suggest you take away. Your advisor can help determine Online classes require strong computer technology confidence through taking as taking advantage of the free resources before taking an online class.

Online classes require regular and assignments or tests will need to be times. You should not enroll in an online course until you are sure you will have easy, continuous internet access.

Working and taking classes is often necessary. If you can't control the number of hours per week that you work you should plan your course schedule to fit your work schedule. Generally speaking, in a 16-week term, for each 3 credit class you will spend 3 hours per week in the classroom and you will be expected to spend 6 hours in preparation and studying per week. So 9 hours for 1 course.

8-week courses are the same amount of work in half the time! A 3 credit course will require 18 hours per week dedicated to school work.

There are some areas that you should work on to improve your chances for success: Technology, Ready to learn, Motivation, and Time management. Click on the Red Dot  to learn more about areas of improvement and how you can be Green-to-Go . If you have time, you might also want to follow up on the ones designated with Caution .

You'll need strong computer skills for all of your classes. If you're not already enrolled, we suggest you take CGS1070 or CGS1100 right away. Your advisor can help determine which one will be best for you. Online classes require strong computer skills. You should build your technology confidence through taking CGS1070 or CGS1100 as well as taking advantage of the free resources in the Technology section before taking an online class.

Online classes require regular and reliable internet access. Some assignments or tests will need to be completed on particular days or times. You should not enroll in an online course until you are sure you will have easy, continuous internet access.

Time management

[View Resources](#)

Support and Space

[View Resources](#)

CGS1100:

Subject: Your upcoming CGS1100 online

Hi! I noticed that you're enrolled in an online section of CGS1100. We've seen some patterns of students struggling at the start of these classes so I wanted to check in with you before the class starts to give you some tips.

- This course requires the use of a computer. Although smart phones are pretty amazing in their capabilities there are tasks involved in this course that you will need a computer for.
- If you aren't comfortable using a computer at all this class might be difficult online. Keep in mind that you won't have an instructor available to look over your shoulder and see if you're executing commands correctly. Although your instructor will help as much as possible, if you like to ask questions as you watch someone demonstrate something, or have someone watch as you work on the computer, you might want to take this in a classroom instead.
- There are still open sections available on campus – 3 on Clearwater, 2 each on Seminole, St. Pete Gibbs and Tarpon Springs and 1 Downtown. You can speak to an advisor to discuss your options; call **727-341-4772**

If you decide to stay in the online section that's great! Remember to contact your instructor if you have any questions. And don't forget that we have free academic support and tutoring available to you on campus or

online: <https://go.spcollege.edu/tutoring/>

Hope you have a very successful and rewarding experience!

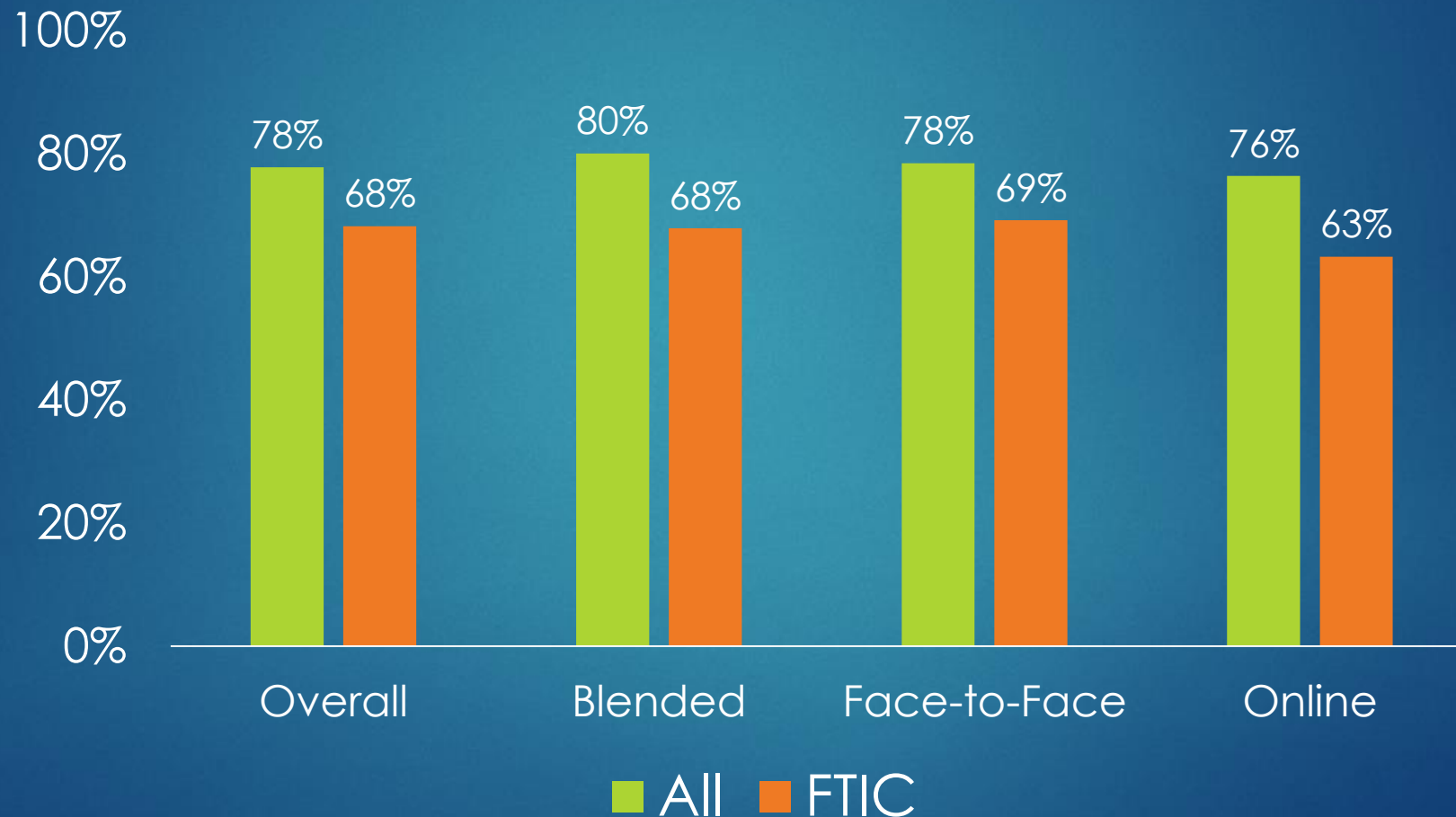
Dr. Colaric

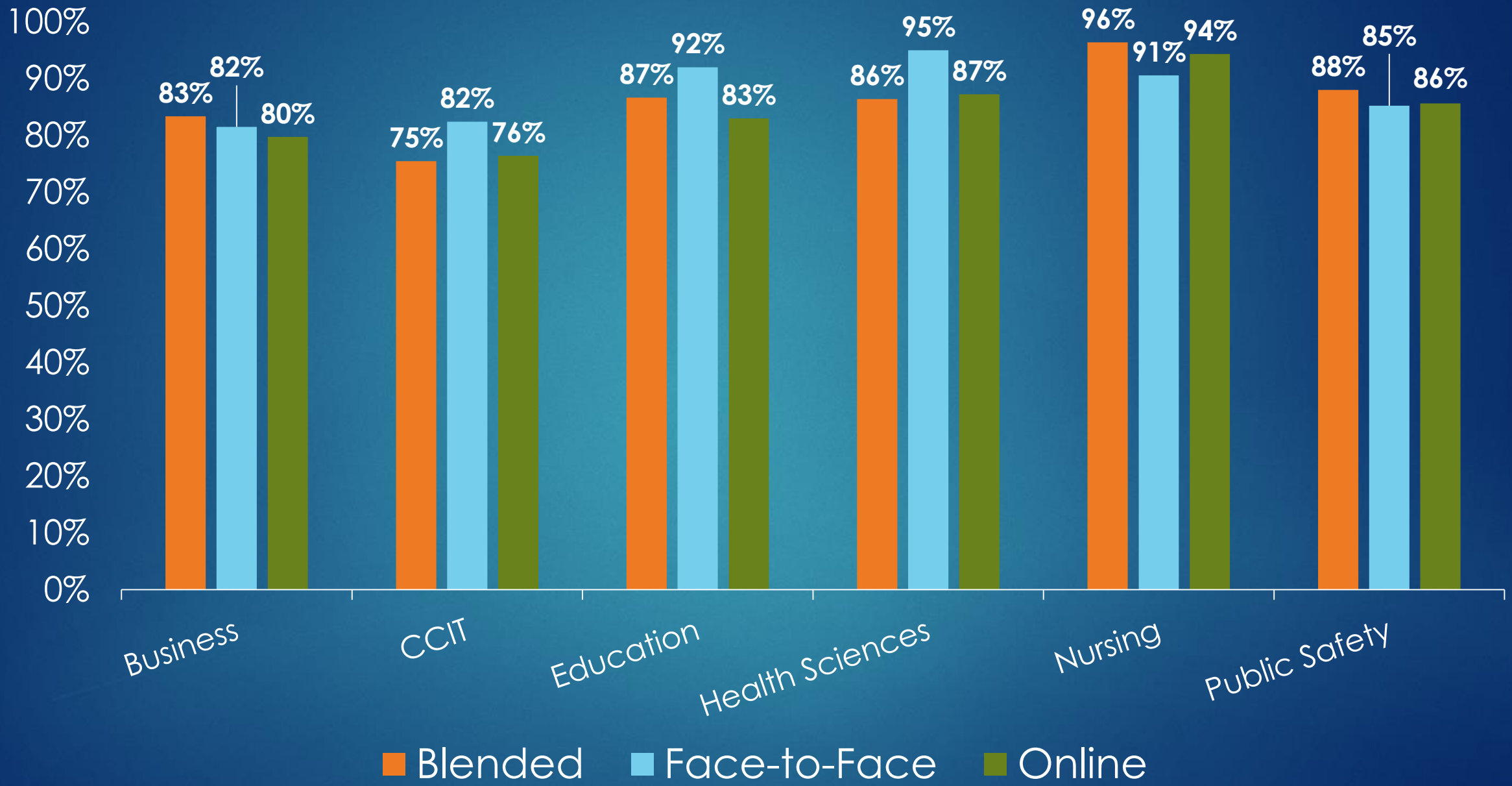
Associate VP

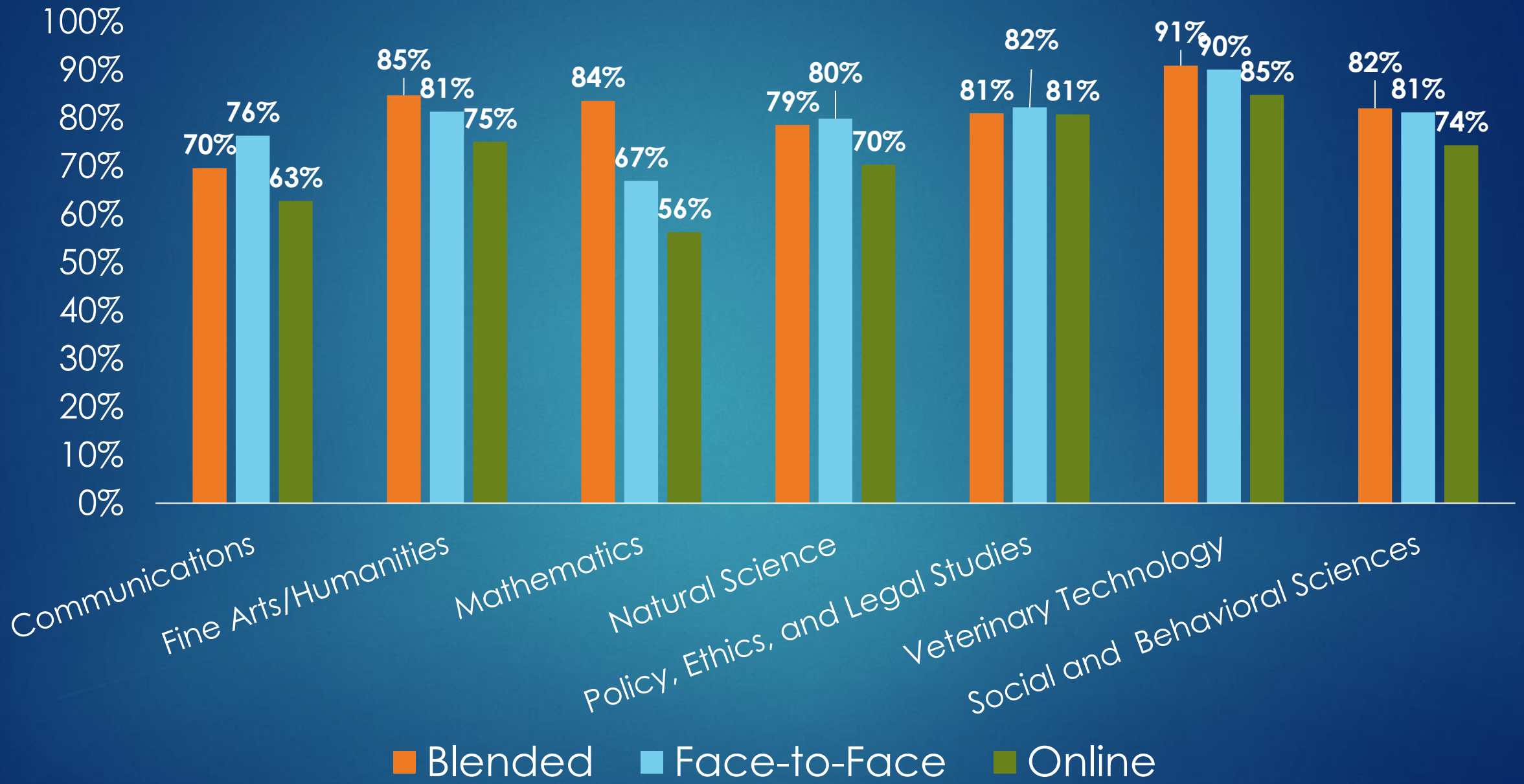
Online Learning & Services

St. Petersburg College

Success Rate by Modality







CGS1100 Success Rates

	Spring 2014		Spring 2017	
	Count	Percentage	Count	Percentage
Face to face	98	58.2%	333	75.7%
Blended	412	72.8%	311	72.3%
Online	946	68.8%	1011	72.4%

	Age										Ethnicity					
	<18		19-21		22-25		26-35		36+		Black		Hispanic		White	
	2014	2016	2014	2016	2014	2016	2014	2016	2014	2016	2014	2016	2014	2016	2014	2016
F2F	80.0	89.6	70.0	77.5	53.3	68.2	42.1	76.4	45.8	66.2	51.6	63.5	82.2	74.4	76.1	75.7
Blended	81.7	70.6	69.8	69.2	65.2	67.7	75.0	75.4	75.7	80.0	48.9	57.6	63.6	76.6	68.8	81.5
Online	80.0	75.4	65.5	68.7	66.7	73.6	69.6	72.3	67.3	75.3	51.6	60.3	64.3	73.9	72.5	74.5

CGS1100 Success Rates

	Spring 2014		Spring 2017	
	Count	Percentage	Count	Percentage
Face to face	98	58.2%	333	75.7%
Blended	412	72.8%	311	72.3%
Online	946	68.8%	1011	72.4%

	Age										Ethnicity					
	<18		19-21		22-25		26-35		36+		Black		Hispanic		White	
	2014	2016	2014	2016	2014	2016	2014	2016	2014	2016	2014	2016	2014	2016	2014	2016
F2F	80.0	89.6	70.0	77.5	53.3	68.2	42.1	76.4	45.8	66.2	51.6	63.5	82.2	74.4	76.1	75.7
Blended	81.7	70.6	69.8	69.2	65.2	67.7	75.0	75.4	75.7	80.0	48.9	57.6	63.6	76.6	68.8	81.5
Online	80.0	75.4	65.5	68.7	66.7	73.6	69.6	72.3	67.3	75.3	51.6	60.3	64.3	73.9	72.5	74.5

Fall 2017

Full-time Faculty

Part-time Faculty

SSH

Percentage

SSH

Percentage

Face-to-face

71,190

58%

51,182

42%

Online

61,211

57%

45,595

43%

Blended

10,011

62%

6,072

38%

	SSH	Percentage	SSH	Percentage
Face-to-face	71,190	58%	51,182	42%
Online	61,211	57%	45,595	43%
Blended	10,011	62%	6,072	38%

St. Petersburg College

Student Engagement = Student Success



***“Community...a word that defines who we are,
what we do and why we do it.”***

Dr. Tonjua Williams, President, SPC

Davie Gill
Coordinator Student Life & Leadership-SP/G and SPC Athletic Director

Tara Newsom, JD, LLM
Center for Civic Learning & Community Engagement

Snapshot of Student Engagement

The Center for Civic Learning & Community Engagement



The CCLCE has had a successful 2016-2017 year (fall and spring) in strengthening civic engagement opportunities college wide. This snapshot provides a glimpse into some of the pathways we are building between students, the classroom, and the community.



Service Learning Classes
102



Participants
2798



Volunteer Hours
27,242



Classes with a civic engagement component achieved a 7% greater success rate compared to college wide classes.



Estimated Economic Impact
\$ 627,473

"I have learned that it is not about how much you can do. It is about what you can do."

-Wallace Tillman Jr
SPC Sophomore

The Center for Civic Learning & Community Engagement

* These numbers are a result of student & faculty self reporting

SPC Outreach x Student Engagement = Student Success

- Student Life and Leadership, the Center for Civic Learning and Community Engagement, SPC Athletics and College Programs participates in activities and events that establish connections and enhances a sense of belonging within the communities we serve.
- College-wide event sponsored by Student Life and the CCLCE such as the MLK Day of Service, Habitat for Humanity,
- St. Petersburg College Athletics participated in 16 Community Service events in 2016-2017



**TITANS FOR TEXANS
DONATION
DRIVE**

SPC GIVES.

HELP THE SURVIVORS OF HURRICANE HARVEY BY DONATING TO THE RED CROSS AND SALVATION ARMY.

DROP OFF ITEMS at STUDENT LIFE OFFICES:

BOTTLED WATER, NON PERISHABLE FOOD, TOILETRIES, CLOTHES, BEDDING AND OTHER NECESSITIES.

For more information, please contact:

The Center for Civic Learning & Community Engagement

ccfce@spcollege.edu

#theSPCdifference

FLORIDA CHALLENGER JAMBOREE

2016

**volunteers for Special Need Athletes:
St Pete College Baseball & Softball**

**LITTLE LEAGUE
CHALLENGER**

**"The most persistent and urgent question is:
What are you doing for others?"**

SPC Second Annual
MLK Day of Service

Campus Events and
Volunteer Opportunities
January 13-17

To serve, please sign up at:
<http://web.spcollege.edu/survey/23042>

For additional information, please visit or contact the Center
for Civic Learning and Community Engagement at
<http://blog.spcollege.edu/civiclearning>

**SPC St. Petersburg
College**

www.spcollege.edu

Academic Communities x Student Engagement = Student Success

SPC St. Petersburg
College

The Center for Civic Learning & Community Engagement

Academic Community and courses offering Service Learning & Civic/Community Engagement



Arts, Humanities and Design
HUM1020 Introduction to Humanity
HUM2210 Western Humanities



Business
GEB3213 Business Communication



Communications
LIT2110 World Lit I Ancient-Ren
SPC1017 Intro Speech Communication



Education
DEP3305 Psychology of Adolescence
EDF1005 Introduction to Education
EDF2085 Diverse Populations
EME2040 Intro Educational Technology



Health Sciences and Veterinary Technology
PHT2820L Physical Therapy Clinical Practice III



Public Safety, Public Policy, and Legal Studies
CCJ1020 Intro to Criminal Justice
CCJ2509 Introduction to Gangs and Crime
CCJ2704 Research Methods in Criminal Justice

CJE1202 Crime and Delinquency
CJE3263 International Organized Crime
CJ0300 Introduction to Corrections
CJ0320 Intake/Reception and Release
FES3833 Emerging Issues in Environmental Disaster Management

FFP1505 Fire Prevention
FFP1540 Private Fire Protection
FFP2810 Firefighting Tactics and Strategy I
FFP2811 Firefighting Tactics and Strategy II
IDH2634H Honors Service Learning
MAN3301 Public Personnel Management
PAD3311 Program Planning & Evaluation
PAD3820 Foundations of Public Safety Administration

PAD4046 Managing Conflict in Public Organizations
PAD4232 Grant Admin & Resource
PAD4393 Critical Incident Management
PAD4603 Administrative Law
PHI1600 Studies in Applied Ethics
PHI1600H Honors Studies Applied
PUP3033 Policy Leadership



Science and Mathematics
BSC1005C Biological Sciences with Lab
BSC2010 Biology I Cellular Processes
BSC2362 Tropical Ecology
EVR1001C Introduction to Environmental Science
STA2023 Elementary Statistics
ZOO3733C Human Anatomy with Lab



Social and Behavioral Sciences and Human Services

AMH2070 Florida History
DEP2004 Dev Psych of the Life Span
ECO2013 Principles of Macroeconomics
ECO2023 Principles of Microeconomics
HUS1001 Principles and Strategies for Human Services

HUS1111 Introduction to Intra and Inter-Personal Processes
HUS1318 Domestic Abuse and Family Violence
HUS1320 Theories/Foundations Crisis
HUS1431 Issues in Addiction Prevention
HUS1480 HIV/AIDS & Drug Crisis
HUS2200 Dynamics of Groups and Group Counseling

HUS2315 Studies in Behavioral Modification
HUS2428 Treatment and Resources in Substance Abuse
HUS2540 Building Stronger Families
HUS2550 Social Services and the Disenfranchised

HUS2949 Co-op Work Experience in Human Services
POS2041 American National Government
POS2112 State & Local Government
POS2949 Co-op Work Experience in American Government

PSY1012 General Psychology
PSY2949 Co-op Work Experience in Psychology

SLS1101 The College Experience
SYG2000 Introductory Sociology
SYG2324 Principles of Substance Abuse
SYG2949 Co-op Work Experience in Sociology

The Center for Civic Learning & Community Engagement creates meaningful experiences that professionally and personally prepare students for civic leadership while strengthening the community.

For more information contact the Center at cclce@spcollege.edu

#theSPCdifference

Diversity of Student Engagement Coursework



Best Practices of student engagement in course work includes City Internships, Nationally Recognized Model UN Team, Reef Restoration Projects & PCSB Service Learning Projects

Community Investment x Student Engagement = Student Success

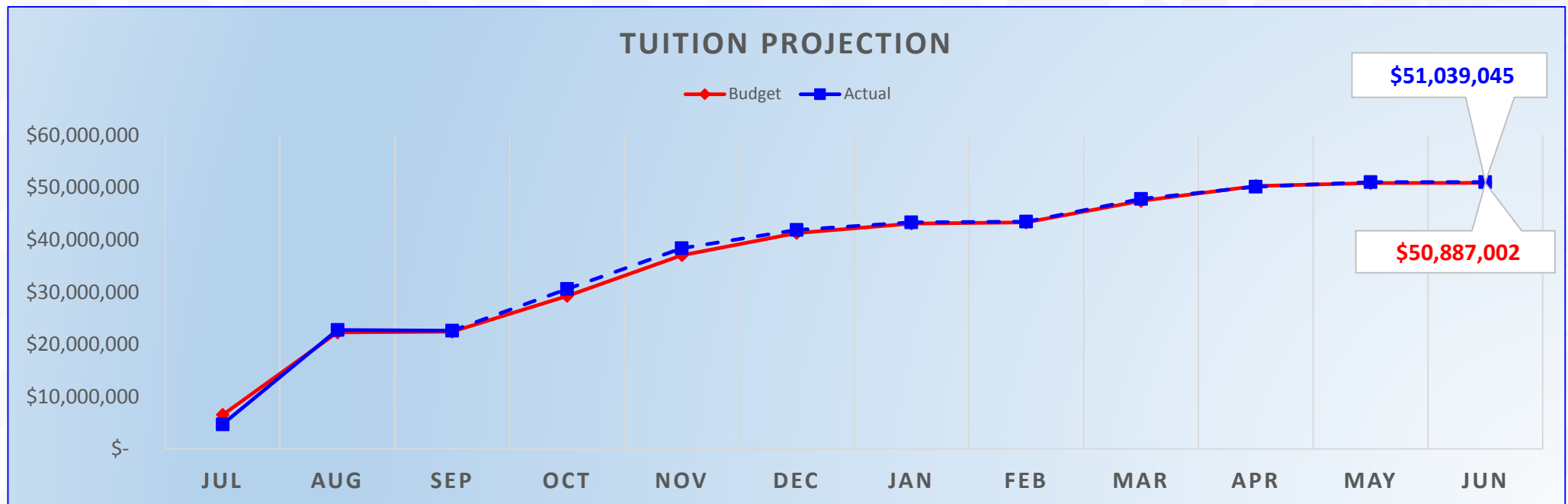


St. Petersburg College
Board of Trustees
Budget Report as of September 30, 2017

Janette Hunt
October 17, 2017

Report as of September 30, 2017

	PY Budget	PY Actual	PY %	Budget	Actual	% of YTD
Revenue						
Student Tuition & Fees	\$ 68,364,047	\$ 27,682,673	40.5%	\$ 61,246,719	\$ 26,721,441	43.6%
State Funding	\$ 72,320,423	\$ 13,906,727	19.2%	\$ 71,793,706	\$ 14,265,662	19.9%
Other Revenues	\$ 5,397,200	\$ 1,310,749	24.3%	\$ 5,609,289	\$ 1,260,615	22.5%
Fund Transfers In	\$ 3,556,839	\$ -	0.0%	\$ 3,782,619	\$ -	0.0%
Reserves	\$ 4,464,452	\$ -	0.0%	\$ 1,825,000	\$ -	0.0%
Total Revenue	\$ 154,102,961	\$ 42,900,149	27.8%	\$ 144,257,333	\$ 42,247,717	29.3%

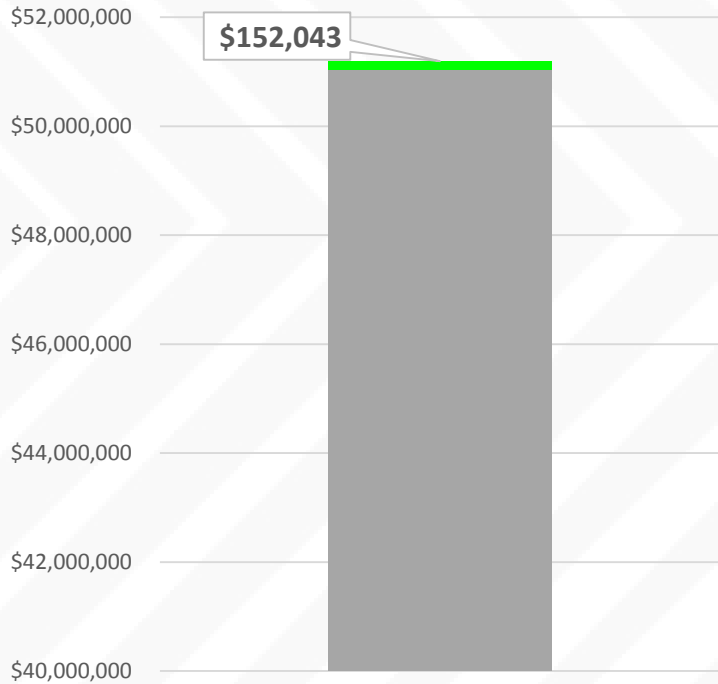


Report as of September 30, 2017

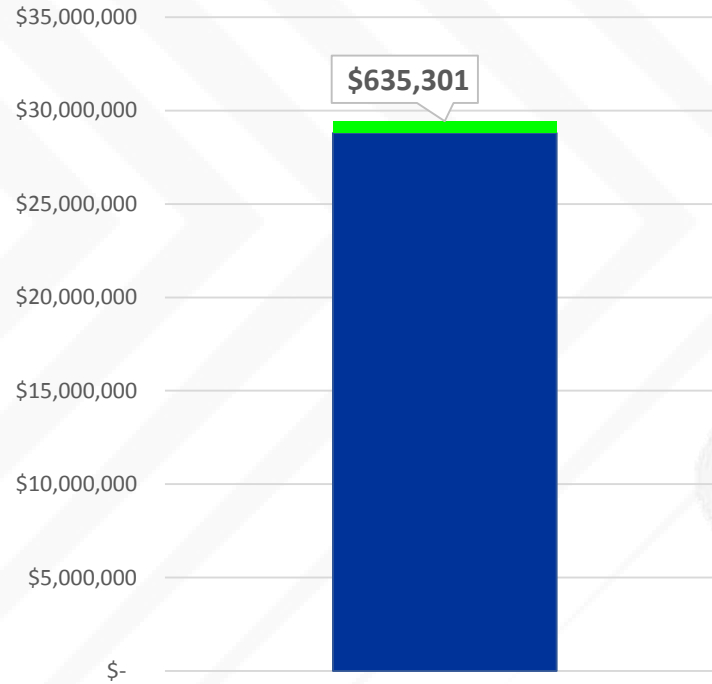
	PY Budget	PY Actual	PY %	Budget	Actual	% of YTD
Personnel & Benefits						
Faculty	\$ 28,980,411	\$ 7,893,045	27.2%	\$ 26,776,489	\$ 7,441,670	27.8%
Administrative & Professional	\$ 26,069,342	\$ 6,270,829	24.1%	\$ 24,251,689	\$ 6,108,387	25.2%
Career Service (includes OT)	\$ 22,059,113	\$ 4,924,469	22.3%	\$ 19,951,011	\$ 4,652,595	23.3%
Adjunct/Supplemental	\$ 14,341,325	\$ 2,310,161	16.1%	\$ 13,549,064	\$ 2,173,582	16.0%
Other Personal Services (OPS)	\$ 2,896,867	\$ 584,772	20.2%	\$ 2,041,007	\$ 425,477	20.8%
Student Assistants	\$ 428,000	\$ 64,782	15.1%	\$ 428,000	\$ 129,003	30.1%
Health Insurance	\$ 11,854,771	\$ 3,401,052	28.7%	\$ 14,931,773	\$ 4,010,132	26.9%
Other Benefits	\$ 11,700,630	\$ 3,344,114	28.6%	\$ 11,280,323	\$ 3,217,078	28.5%
Total Personnel & Benefits	\$ 118,330,460	\$ 28,793,224	24.3%	\$ 113,209,356	\$ 28,157,923	24.9%
Current Expense						
Total Current Expense	\$ 32,341,920	\$ 7,724,933	23.9%	\$ 28,278,499	\$ 7,000,034	24.8%
Capital						
Total Capital	\$ 3,430,581	\$ 787,254	22.9%	\$ 2,769,478	\$ 737,781	26.6%
Total Operating	\$ 154,102,961	\$ 37,305,410	24.2%	\$ 144,257,333	\$ 35,895,738	24.9%
Balance	\$ -	\$ 5,594,738		\$ -	\$ 6,351,979	

Budget Highlights

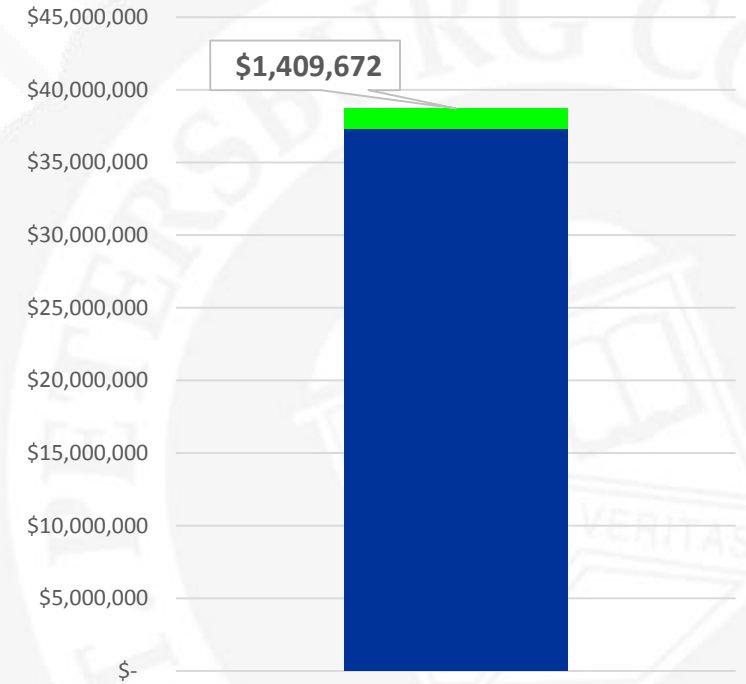
Tuition Revenue



Personnel Expense



Total Operating Expense



Questions?




St. Petersburg College
Budget Report
As of September 30, 2017

	PY Budget	PY Actual	PY % of YTD	Budget	Actual	% of YTD
Revenue						
Student Tuition & Out-of-State Fees	\$ 56,560,516	\$ 23,321,993	41.2%	\$ 50,887,002	\$ 22,421,691	44.1%
State Appropriation - FCS	\$ 51,695,712	\$ 12,993,534	25.1%	\$ 53,548,581	\$ 13,387,145	25.0%
State Appropriation - Lottery	\$ 16,693,508	\$ -	0.0%	\$ 14,231,049	\$ -	0.0%
Performance Funding	\$ 3,652,774	\$ 913,193	25.0%	\$ 3,514,076	\$ 878,517	25.0%
Operating Cost for New Facilities	\$ 128,429		0.0%	\$ -	\$ -	0.0%
Learning Support Access Fee	\$ 1,834,042	\$ 725,680	39.6%	\$ 1,639,890	\$ 685,882	41.8%
Distance Learning Fee	\$ 3,814,485	\$ 1,516,614	39.8%	\$ 3,526,830	\$ 1,536,583	43.6%
Technology Fee	\$ 2,818,596	\$ 1,131,165	40.1%	\$ 2,508,569	\$ 1,075,271	42.9%
Lab Revenue Fees	\$ 1,714,401	\$ 770,477	44.9%	\$ 1,592,067	\$ 793,154	49.8%
Industry Certifications	\$ 150,000	\$ -	0.0%	\$ 500,000	\$ -	0.0%
Other Revenues	\$ 5,397,200	\$ 1,310,749	24.3%	\$ 5,609,289	\$ 1,260,615	22.5%
Other Student Fees	\$ 1,622,007	\$ 216,743	13.4%	\$ 1,092,361	\$ 208,860	19.1%
Fund Transfers In	\$ 3,556,839	\$ -	0.0%	\$ 3,782,619	\$ -	0.0%
Reserve	\$ 4,464,452	\$ -	0.0%	\$ 1,825,000	\$ -	0.0%
Total Revenue	\$ 154,102,961	\$ 42,900,149	27.8%	\$ 144,257,333	\$ 42,247,717	29.3%
	Budget	Actual	% of YTD	Budget	Actual	% of YTD
Personnel & Benefits						
Instructional/Faculty-Full time	\$ 28,980,411	\$ 7,893,045	27.2%	\$ 26,776,489	\$ 7,441,670	27.8%
Administrative & Professional	\$ 26,069,342	\$ 6,270,829	24.1%	\$ 24,251,689	\$ 6,108,387	25.2%
Career Service (includes OT)	\$ 22,059,113	\$ 4,924,469	22.3%	\$ 19,951,011	\$ 4,652,595	23.3%
Adjunct/Supplemental	\$ 14,341,325	\$ 2,310,161	16.1%	\$ 13,549,064	\$ 2,173,582	16.0%
Other Personal Services (OPS)	\$ 2,896,867	\$ 584,772	20.2%	\$ 2,041,007	\$ 425,477	20.8%
Student Assistants	\$ 428,000	\$ 64,782	15.1%	\$ 428,000	\$ 129,003	30.1%
Health Insurance	\$ 11,854,771	\$ 3,401,052	28.7%	\$ 14,931,773	\$ 4,010,132	26.9%
Other Benefits	\$ 11,700,630	\$ 3,344,114	28.6%	\$ 11,280,323	\$ 3,217,078	28.5%
Total Personnel & Benefits	\$ 118,330,460	\$ 28,793,224	24.3%	\$ 113,209,356	\$ 28,157,923	24.9%
Current Expense						
Travel	\$ 629,676	\$ 164,943	26.2%	\$ 311,583	\$ 65,174	20.9%
Repairs & Maint	\$ 872,674	\$ 262,949	30.1%	\$ 886,195	\$ 206,860	23.3%
Rental/Leases	\$ 445,340	\$ 3,634	0.8%	\$ 140,050	\$ (8,769)	-6.3%
Insurance (Non Health)	\$ 1,708,272	\$ 1,096,123	64.2%	\$ 1,758,611	\$ 1,270,122	72.2%
Utilities	\$ 5,800,000	\$ 1,362,638	23.5%	\$ 5,260,407	\$ 1,282,249	24.4%
Services and Fees	\$ 7,734,988	\$ 1,337,145	17.3%	\$ 6,033,319	\$ 1,050,827	17.4%
Scholarships/Fee Waivers	\$ 1,559,895	\$ 989,845	63.5%	\$ 2,423,463	\$ 1,050,919	43.4%
Materials and Supplies	\$ 5,928,526	\$ 1,121,071	18.9%	\$ 4,476,333	\$ 712,269	15.9%
Tech Expense/Licensing	\$ 2,805,757	\$ 750,169	26.7%	\$ 2,594,386	\$ 652,113	25.1%
Bad Debt/Unemployment	\$ 1,147,782	\$ (50,081)	-4.4%	\$ 1,003,810	\$ (36,931)	-3.7%
Other Current Expense	\$ 3,709,010	\$ 686,498	18.5%	\$ 3,390,342	\$ 755,202	22.3%
Total Current Expense	\$ 32,341,920	\$ 7,724,933	23.9%	\$ 28,278,499	\$ 7,000,034	24.8%
Capital						
Computer Refresh Leases	\$ 2,904,221	\$ 720,749	24.8%	\$ 2,379,879	\$ 643,313	27.0%
Capital Purchases	\$ 526,360	\$ 66,505	12.6%	\$ 389,599	\$ 94,468	24.2%
Total Capital	\$ 3,430,581	\$ 787,254	22.9%	\$ 2,769,478	\$ 737,781	26.6%
Total Operating	\$ 154,102,961	\$ 37,305,410	24.2%	\$ 144,257,333	\$ 35,895,738	24.9%
Balance	\$ (0)	\$ 5,594,738		\$ -	\$ 6,351,979	

October 17, 2017

MEMORANDUM

TO: Board of Trustees, St. Petersburg College

FROM: Tonjua Williams, President 

SUBJECT: Personnel Report

Approval is sought for the following recommended personnel transactions:

HIRE Budgeted Administrative & Professional			
Name	Title	Department/Location	Effective Date

Unger, Courtney P	Instructional Tech Analyst	Academic & Student Affairs EPI	9/18/2017 - 6/30/2018
Huynh, Lieu D	Budget Specialist	Budgeting & Compliance DO	10/2/2017 - 6/30/2018

TRANSFER/PROMOTION Budgeted Administrative & Professional			
Name	Title	Department/Location	Effective Date

Graham, Shane L	Mgr, PeopleSoft Systems Admin	Administrative Information Sys DO	9/5/2017 - 6/30/2018
Turner, Hillary R	Research Specialist	Enrollment Management DO	9/5/2017 - 6/30/2018

HIRE Faculty			
Name	Title	Department/Location	Effective Date

Duff Jr, John A	Chair, College of Computer IT	College of Computer & InfoTech CL	10/9/2017 - 07/31/2018
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HIRE Budgeted Career Service			
Name	Title	Department/Location	Effective Date

Digsby, Chad E	Landscafer	Landscape Services DO	9/25/2017
Ho, Khang D	Landscafer	Landscape Services DO	8/28/2017
Tettenborn, Albert	Landscafer	Landscape Services SPG	10/2/2017

TRANSFER/PROMOTION Budgeted Career Service			
Name	Title	Department/Location	Effective Date

McHugh, Mark P	Sr Security Officer	Campus Security AC	8/30/2017
Rakoczi, Eduard	Sr Security Officer	Campus Security SPG	8/30/2017

HIRE Supplemental			
Name	Title	Department/Location	Effective Date

Thompson, Anna F	Professional Trainer	Emergency Medical Services HEC	9/22/2017
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HIRE Temporary			
Name	Title	Department/Location	Effective Date

Dell-Jones, Julie V	Adjunct Faculty	Communications CL	9/11/2017
Johnson, Stephanie D	Adjunct Faculty	Communications SPG	9/11/2017
Borghini, Hannah A	General Support	Student Activities CL	10/2/2017
Bache, Alyssa K	OPS Career Level 1	Athletics CL	9/19/2017
Sanchez, Kelsie A	OPS Career Level 1	Athletics CL	9/21/2017
Smith, Christopher M	OPS Career Level 1	Athletics CL	9/25/2017
Fitzpatrick, Ryder	OPS Career Level 1	Engineering Technology CL	8/21/2017
Triplett, Steven L	OPS Career Level 1	Engineering Technology CL	9/11/2017

Wittine, Paul W	OPS Career Level 1	Engineering Technology CL	9/25/2017
Detrinidad, Alyssa L	OPS Career Level 1	Learning Resources TS	9/5/2017
Gosselin, Jessica P	OPS Career Level 1	Learning Resources TS	8/30/2017
Pinckney, Matthew T	OPS Career Level 2	Academic & Student Affairs AC	9/9/2017
Hernandez Cruz, Osiris C	OPS Career Level 2	Associate Provost Office CL	9/21/2017
Bailey, Ronelle	OPS Career Level 5	Learning Resources CL	9/5/2017
Bush, Heather K	OPS Career Level 5	Learning Resources SPG	9/5/2017
Charleston, Kenneth E	OPS Career Level 5	New Initiative Program HEC	8/28/2017
Hall, Amy L	OPS Career Level 5	Veterinary Technology VT	9/5/2017
Sturdivant, Jacqueline	OPS Career Level 6	Academic & Student Affairs HEC	10/2/2017
Peters, Steven M	Professional Trainer	Fire Sciences AC	9/5/2017
Mello, Deana M	Professional Trainer	Workforce/Professnl Developmnt EPI	9/11/2017

TRAVEL OUTSIDE THE CONTINENTAL UNITED STATES			
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Name	Title	Department/Location	Effective Date
Tunceren, Lillian	Instructor	Communications	3/3/2018 - 3/11/2018

Destination: Munich, Germany

The purpose of this trip is to lead SPC students on a study abroad program to Munich, Germany. A total of ten (10) students are enrolled in the program and will receive credit in one of the following: ENC 1101, ENC 1102, ARH 1000, ART 1300C. The College will benefit by providing an educational opportunity for students to earn college credits while providing a cultural experience through the study abroad program.

Estimated cost to the College not to exceed \$4358.74.

Brian Miles, Vice President, Administrative/Business Services & Information Technology and the Strategic Issues Council Members bringing the actions forward, recommend approval.

ND10022017

HEALTH INSURANCE FOLLOW UP

Health Insurance Follow Up

October 17, 2017

Presented by Michelle Manteiga



HEALTH INSURANCE FOLLOW UP

Question: Voluntary plans – what additional voluntary plans can we offer employees so that we can ensure they are getting the most competitive rates?

Answer:

We're currently evaluating all of the benefits and perks offered to employees. When we go to market in the Spring, we'll be selecting vendors that offer the most competitive rates and reliable services to our employees.

Some additional benefits we're looking at rolling out to employees in 2018:

- Long Term Care Services.
- Roth retirement option.
- Legal Services.
- Pet Insurance.

HEALTH INSURANCE FOLLOW UP

Question: What types of medical plans are other college's offering?

Answer:

- 23 out of 28 Florida state colleges are members of the consortium.
- 17 out of 23 state colleges participating in the consortium are offering 100% college paid benefits for employee only coverage.
 - Employee plus plan rates vary.
- Non-consortium members are offering similar plan types as SPC.

HEALTH INSURANCE FOLLOW UP

Question: Consortium – Have we looked at joining the consortium? How might this be beneficial to SPC?

Answer:

Consortium Highlights:

- Consortium members are facing increases this year.
 - Rates are scheduled to be evaluated on a 3 year basis (subject to change).
- Average number of participants in the consortium is 510 members per college.
- SPC has an annual Wellness budget of \$200,000. Consortium members share a budget of \$100,000; approximately \$5,000 per college.

HEALTH INSURANCE FOLLOW UP

Question: Retirees – What is the percentage increase to the retirees contribution?

Answer:

Pre 65 Rate Increases			Post 65 Rate Increases		
	2016	2017		2016	2017
OA Select	10%	9%	OA Select	39%	12%
POS II	3%	9%	POS II	22%	12%

Annualized retiree spend for 2016 and 2017:

Annualized Retiree Spend	Calendar Year 2016	Calendar Year 2017
Spend:	\$1,295,444.00	\$1,128,804.00
Contributions:	\$522,000.00	\$544,830.00
Difference:	(\$773,444.0)	(\$583,974.00)

HEALTH INSURANCE FOLLOW UP

Question: ER – What types of ER claims are we seeing? Can we offer a tiered deductible?

Answer:

- Current approved 2018 ER deductible is \$150; no change from 2017 per Board feedback.
- 2016 ER usage report shows that 41.7% of ER visits were for non-urgent care visits.
- Tiered deductible:
 - Aetna does not have any clients that offer a tiered deductible.
 - This is usually used as a way to deter frequent users.
 - 87% of SPC members have less than 3 ER visits per year (not considered frequent users).
 - SPC ER cost share is at 17%; Aetna's average is 23%.

HEALTH INSURANCE FOLLOW UP

Question: Convenient Care – can we bring clinics on site?

Answer:

Adding onsite Wellness centers to SPC campuses could be part of the long term Wellness plan. Currently, the Wellness committee is in the process of investigating the cost, and potential return on investment for adding these clinics.

We're evaluating the following options:

- Wellness centers ran and maintained by SPC.
- Leasing space at SPC campuses to third party companies.
- Other Wellness center alternatives.

HEALTH INSURANCE FOLLOW UP

Question: Convenient Care – can we bring clinics on site?

Answer:

Currently 54% of large employers nationwide are offering on-site health centers.

Top Treatment services offered at on-site health centers:

- Acute Care.
- Health Improvement Programs.
- Occupational Health.
- Primary Care.
- Chronic Care Management.

HEALTH INSURANCE FOLLOW UP

Question: What permanent changes can we make for long term impacts?

Answer:

We're evaluating potential long term permanent changes that will make an impact to our claims.

- Vendor contract changes.
- Spousal surcharges.
- Insurance waiver.

DRAFT 3 YEAR BENEFITS STRATEGIC PLAN TIMELINE

The following proposed timeline is to solicit review and feedback from the college community regarding the draft 3 year benefits strategic plan.

10/4/2017 – Insurance Committee

10/17/2017 – Executive Committee

10/17/2017 – Board of Trustees

11/2017-12/2017 – Other groups (as requested)*

1/16/2018 – Board of Trustees

2/20/2018 – Board of Trustees vote

Spring 2018 – Request for Proposals

*All employee types and established employee groups are already represented on Insurance Committee or Exec Committee during that time frame. Other groups can request presentations during the designated time frame.

HEALTH INSURANCE FOLLOW UP

QUESTIONS?



DRAFT SPC Benefits Strategic Planning

Introduction:

The purpose of this plan is to provide St. Petersburg College’s benefit objectives for the next 3 years.

SPC’s Mission, Vision and Values:

SPC’s prioritizes its benefit resources in accordance with its mission, vision and values. The College’s mission is to “*promote student success and enrich our communities through education, career development and self-discovery.*” Its vision is to be “a great college transforming the lives of our students, of our communities, of our employees.” Institutional values include student focus, academic excellence, outstanding service, diversity, ethics, culture of inquiry, partnerships, transparency, leadership and empowerment, global citizenship, innovation, mutual respect, and professional development.

Each year, the SPC Human Resources reviews the current and projected changes to the plan to align with our collective vision, mission and values and to focus on promoting *employee* success by providing them the resources to maintain a healthy life style.

SPC’s HR Mission & Vision Statements as proposed in September 2017, by the HR Change Committee of Excellence are as follows:

The Human Resources Department’s vision is to be recognized as a preferred employer and to recruit, develop, and retain high-performing and dedicated employees.

HR Mission: As a strategic partner of the St. Petersburg College Community, we commit to our employees a culture of respect and integrity, high-quality service, and continuous improvement through transparency and innovation.



Current Position:

SPC is experiencing a rise in claims to our self-funded health plan, as well as a decrease in employee participation in informational opportunities. There is a decline in on-site seminar participation, a decrease in utilization of other free resources such as the Nurse Hotline, Aetna.com, and the Employee Assistance Program (EAP). The college has experienced a rise in Family Medical Leave Act (FMLA) claims over the past 3 years. In response, the following objectives are suggested for the next 2-3 years to combat these issues. Please see pages 12-13 for a timeline of implementation.

Objectives:

- 1) Improve employee education
- 2) Increase Wellness participation
- 3) Reduce time/usage of FMLA
- 4) Offer competitive complete benefits package
- 5) Decrease high dollar claims
- 6) Develop a long term funding strategy
- 7) Automate files from PeopleSoft to carriers

Strategy:

- 1) Improve employee education

Between 2014-2016 the college has seen a steady decrease in employee participation in various resources. Our free (to employees) EAP service participation dropped by 28%. There is a lag in onsite wellness events in dropped participation by 20% from 2015 to 2016. There has been an increase in employee calls and emails regarding benefit features and eligibility. To address this, HR is proposing reintroducing the following programs:

- a. “Benefits at a glance”
 - i. The Benefits at a Glance will be a flyer available at all locations, handed out at New Employee Orientation, posted on the HR Hub, present during Wellness events, and mailed semiannually to employee home addresses.
 - ii. The Benefits at a Glance will be a high-level overview of benefit plans, group numbers, websites for resources, and calendar of upcoming events.
 - iii. Printed materials will provide condensed information from Benefits at a Glance flyer onto business cards and with the flyer sent as a packet to employee homes semiannually for employee’s convenience.
 - iv. Cost will be minimal; including Wellness information in the flyer and packet allows a majority of the cost to be allocated to the separate Wellness budget.
- b. New Employee Orientation Presentation
 - i. Currently all benefits materials are emailed and assigned to new employees. Employees will review the information independently prior to the New Employee Orientation. Feedback from new employees hired

between February and July 2017 indicates a need for more benefit information at the actual New Employee Orientation. Brief presentations of approximately 30 minutes on benefits and 30 minutes on Wellness to highlight/ compliment the on-line videos. Continue to use surveys to adjust the presentations to fit the feedback. No additional cost to the college.

- c. Periodic newsletter articles
 - i. Newsletter will highlight plan features or changes. Would also include information about Wellness program and EAP resources.
 - ii. During September and October newsletters will go out bi-weekly, then weekly to focus on plan options for 2018.
 - iii. Remainder of the year will focus on educating employees on existing benefits, wellness opportunities, and perks on a semi-monthly or monthly basis.
 - iv. Include “Did you know” section to highlight items like pharmacy programs (for example, Did you know that most antibiotics are filled at Publix at no cost to employees? For a comprehensive list of free antibiotics click here!)
 - v. Utilize the existing Blue and White with links back to the HR Hub and Wellness blog.
No additional cost to the college.
- 2) Increase Wellness participation

As mentioned previously, the college has seen a decrease in participation of on-site Wellness events by 20% over the last two years. Increased Wellness participation is linked to decreased claims, and increased employee satisfaction.

- a. Implement usage of existing Aetna resources, track usage of college website material, track usage of disease management resources and the insurance company hosted-nurse hotlines etc.
 - i. Using the Blue & White newsletter as a resource, push links and other pertinent material to make accessibility to employees easier.
- b. Add Wellness Committee members to each campus to be “Champions of Change”
 - i. Committee members will be responsible for publishing communications on each campus regarding Wellness events and incentives.
 - ii. Committees will provide feedback on what communication strategies are working and what does not work.
 - iii. Committee members will work with focus groups to determine what each campus is most interested in pursuing.
 - iv. Minimal cost to the Wellness budget for supplies.
- c. Implement long-term Wellness plan to use results of existing resources to target communication and program plans to reach more employees.
 - i. Focus groups and Committee members will be key players in the shaping of the Wellness plan.

3) Reduce time & usage of FMLA

On average, SPC has 107 FMLA claims per year. The college has seen an increase in the number of employees going on FMLA by 3% from 2014-2015, then a jump of 10% from 2015-2016. A recent SHRM study states that it cost employers 2.5 administrative hours per FMLA case, which means in 2016 SPC spent at least 290 hours on just the administration of FMLA cases. This in combination with the time lost to the college for the absent employees makes reducing the number and duration of FMLA claims a good priority. To contend with the increase of claims, the college has come up with the below strategy.

- a. Analyze previous claims and look for common features.
 - i. SPC will be looking specifically at Managers, departments, locations, and ailments to determine any common factors.
 - ii. Training and increased coaching will be provided to Managers and Departments that have higher than average claims.
- b. Use benefits communication to target ailments for people on leave.
 - i. The analysis on types of FMLA claims will be taken into consideration when making benefits communication materials.
- c. Work with data to determine repeat users and average time out.
- d. Managers to focus on employee performance management vs. health challenges.
 - i. Training will be provided to Managers and Departments that have repeat FMLA claims on how to effectively monitor employee performance.

4) Offer competitive complete benefits package

As SPC evaluates college budget strategies, it remains committed to competitive, diverse and sustainable benefits package to help the mission of recruiting and retaining top performing employees.

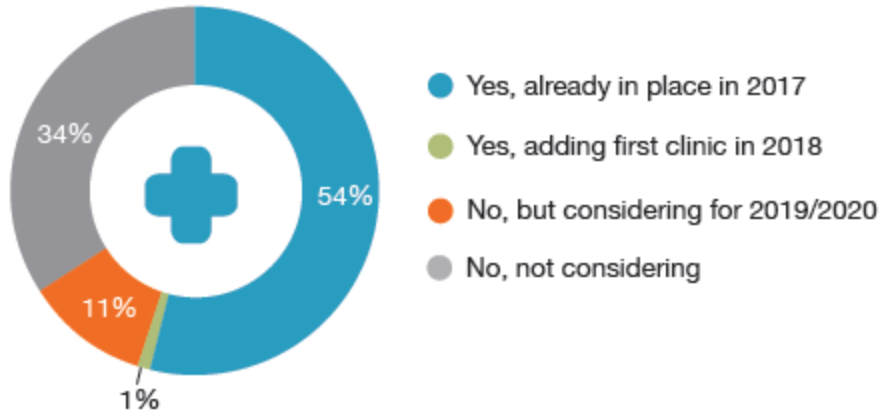
Keeping generational needs in mind is important as we analyze our current benefits programs and work to offer competitive, diverse, sustainable and complete, benefit packages all employees.

- a. Offer a variety of competitive, value add benefits to employees.
- b. Analyze what other colleges are offering in total benefits – including additional perks, compensation and leave benefits.
- c. Long term strategy to evaluate benefits that are not being utilized however take time to administer, cost the college excess time and/or money to a very low population of employees, and increase the focus on education and advertisement towards top benefits.
 - i. Develop metrics and evaluate current perks/benefits that are being administered through benefits and payroll.

- ii. Evaluate programs that are not offering special discounts, no employer match, or are not pre-tax deductions.
 - d. Consider unique low cost benefits.
 - i. “Free” programs for the college that offer minimal administrative hours and genuine benefits to the employees (such as real discounts on tickets, hotels, etc.).
 - e. Offer more programs that can legally advise and support employees in planning and preparing for retirement.
 - i. Seminars and webinars from financial institutions.
 - ii. One-on-one meetings with Financial Planners
- 5) Decrease high dollar claims
 - a. Using benefits communication, develop an education strategy to teach employees and family members about alternative/ cheaper Healthcare and Pharmaceutical options.
 - i. Nurse Hotline; free for employee’s and will help callers determine if they should go to a walk in clinic, urgent care, or ER.
 - 1. SPC had a 4% increase in ER visits from 2015 to 2016. 41.7% of ER visits were non-emergency claims and could have been treated at an Urgent Care or Walk-In clinic, saving the employee and the college money.
 - ii. Prescription savings education. Informational guides will be developed for employees to highlight cost differences between pharmacy’s, or mail orders vs. store pickup etc., or other prescription savings options.
 - iii. Explore Disease Management options. Aetna programs and additional programs will be evaluated to address high dollar claims.
 - b. Focus Wellness program to target large claims.
 - i. 2018 will primarily focus on growth of participation in our wellness initiatives.
 - ii. Focus groups and Committee members will drive the shape of the 2019 - Wellness program.
 - 1. The Wellness committee has met for planning for 2018. We’re currently recruiting additional members to ensure diversity and equal campus representation.
 - iii. Looking into on-site health centers for 2019.
 - 1. 54% of large employers are already offering on-site health centers. 1% are planning to open on-site centers in 2018, and 11% are planning to open in 2019.
 - 2. The Wellness Committee is tasked with determining the cost and potential return on investment for opening on site health centers.

- a. Additional options being considered is the opportunity to lease space to a third party medical provider, such

Large Employer On-Site Health Centers in 2018:



Source: 2018 Large Employers' Health Care Strategy and Plan Design Survey

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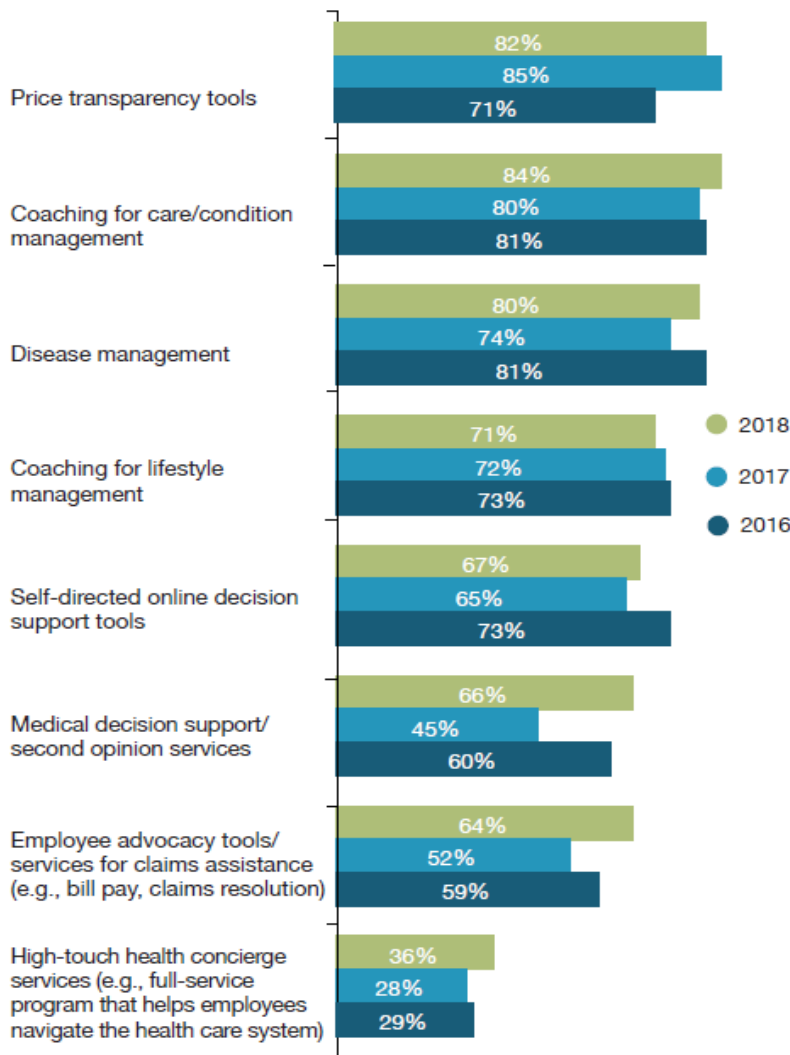
On-Site Health Center Services:



Source: 2018 Large Employers' Health Care Strategy and Plan Design Survey

- c. Use long term funding strategy to drive employee behavior.
 - i. Working with Brokers, create a running 3-year plan that incorporates estimated changes.
 - ii. Using change plan, provide transparent educational material regarding high dollar claims and therefore insurance premium/rate changes to encourage behavior in the plans best interest.
- d. Evaluate Stop-Loss Coverage
 - i. Currently SPC has stop-loss coverage that begins when a single member reaches over \$350,000 in medical claims in one year. We will evaluate the potential cost savings of lowering our stop-loss coverage.

Employer Tools and Programs to Manage Health and Health Care



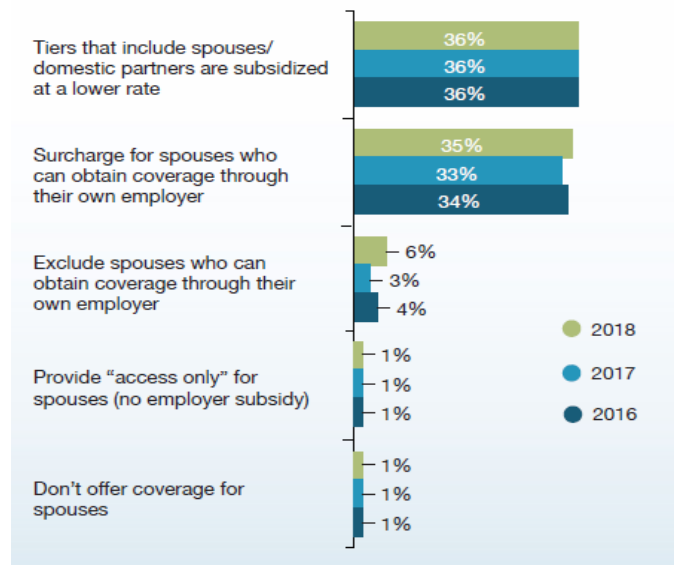
Source: 2018 Large Employers' Health Care Strategy and Plan Design Survey

6) Develop a Long-Term Funding Strategy

- a. Work with Broker to determine impact of removing certain plans (such as impact of eliminating OA Select and/or POS). All changes would require additional long term phasing out plans.
 - i. Nationwide, 39% of large employers will be offering only High Deductible Health Plans in 2018, an increase of 11% from 2017.
 - ii. The 2016 SHRM Employee Benefits Survey reports that only 20% of employers continue to offer a retiree health plan.
 1. In 2016 the total cost per utilizing retiree member was \$8,247. Due to increasing premiums and shifts in membership, there's a 32% decrease in the retiree claims cost for 2017.
 - iii. Use benefits communication to educate employees well in advance on any plan changes.
- b. Work with claims data to project, forecast long-term (3 yrs) potential claims, and plan college and employee contributions to rebuild account balance.
 - i. Large Employees Health Care Strategy and Plan Design Survey projects medical costs will increase by an average of 5% in 2018 (this would be the 5th year in a row medical costs are projected to continue to increase at this rate).
 - ii. Work with College to have funding plans approved ahead of time to balance out increases over years instead of single plan years taking large hits or not having funds available.
 1. Current projections with 0 plan changes show the college would be under funded by nine-million by the end of the 2020 plan year.
- c. Develop a 3-year health plan design change strategy.
 - i. Working with Brokers, create a running 3-year plan that incorporates estimated changes.
 - ii. Using change plan, have educational material and rate changes encourage behavior in the plans best interest.
- d. Review HSA funding/ seed money plan and determine best approach for motivating employee behavior.
 - i. Compare against other state colleges for best practice on funding.
 1. National average shows employer HSA contributions at \$650 for Employee Only, and \$1,070 for employee+. With SPC's current funding model, the college is funding over national averages.
 - ii. Explore alternative methods of matching, such as through payroll contributions, or quarterly matches.
- e. Provide incentives to employees or spouses for waiving insurance.
 - i. Over a third of employers are currently using surcharges for spouses that can obtain coverage through their own employer.
 1. Median surcharge for 2017 is \$100/month

- ii. Explore cost effectiveness of offering a one-time annual payment to employees for waiving insurance coverage for either themselves and/or their spouse.

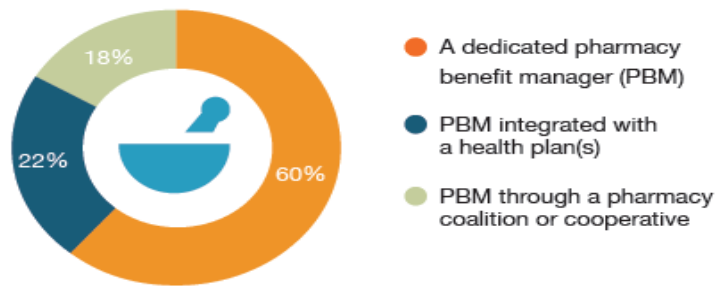
Spousal Coverage



Source: 2018 Large Employers' Health Care Strategy and Plan Design Survey

- f. Consider adding a Pharmacy Benefit Manager (PBM) as a way to control pharmacy claims.
 - i. Claims Manager would be through a third party auditor that specifically monitors pharmacy claims.
 - ii. 60% of large employers are currently contracted with a dedicated Pharmacy Benefit Manager.
 - iii. SPC is currently in the 22% bracket of large employers, as our PBM is in partnership with Aetna (not a third party manager).
 - iv. Specialty Pharmacy claims are currently the second highest driver of claims in the Large Employers Health Care Strategy and Plan Design Survey.

Pharmacy Benefit Manager



Source: 2018 Large Employers' Health Care Strategy and Plan Design Survey

- g. Additional options that have potential for significant savings in SPC's employer health care costs include:
 - i. Auditing family-member eligibility and other aspects of the plan.
 - 1. National average shows 5-15% of medical plan enrollees to include workers' ex-spouses, grown children, grandchildren, or others not typically covered by the benefits.
 - ii. Establishing tiered health insurance plans.
 - 1. SPC currently has tiers in place for Employee Only, Employee Plus Spouse, Employee Plus Children, or Employee Plus Family. There is no cap on the number of "children", which may be an opportunity for SPC to add an additional tier to Employee's with more than 3 children on the plan.
 - iii. Negotiating better benefits contracts with vendors.
 - 1. SPC is going to bid for all benefit plans in 2018 to ensure we're getting the most competitive rate.
- 7) Automation of file from PeopleSoft to carriers
 - a. Work with insurance carriers and vendors to determine requirements for sending electronic files as way to control risk and reduce labor.
 - i. Currently all data is manually touched. This costs the college money in terms of labor, and leaves the college open to errors and increased risk management.
 - ii. Majority of vendors offer file feed setup and testing for either a nominal fee, or free.

Timeline:

Strategic Plan review and approval:

- 10/4/2017 – Insurance Committee
- 10/11/2017 – Executive Committee
- 10/17/2017 – Board of Trustees
- 11/2017-12/2017 – Other Groups (as requested)
- 12/12/2017 – Board of Trustees Workshop
- 1/16/2018 – Board of Trustees Vote
- Spring 2018 – Request for Proposals – all benefits plans

Implementation of Strategic Plan suggestions:

2017

- Benefits at a Glance flyer to be created/ approved/ distributed
- New Employee Orientation in person presentation to be reinitiated
- Newsletter featuring benefit changes and information to be created and distributed
- Track usage of Aetna resources (Nurse Hotline, website clicks, etc.)
- Track usage of EAP resources (calls, website clicks, etc.)
- Wellness committee members initiated
- Review and analyze prior years FMLA cases
- Compare SPC benefits and perks against other state colleges and local employers
- Long term funding strategy planning to begin
- Long term medical plan design changes to be developed
- Biometric screenings on Clearwater, St.Pete/Gibbs, EPI, Seminole, Allstate, Downtown, HEC, and Tarpon
- Seminars: How Stress Affects Your Overall Health, Work out Smarter, Not Harder, and a behavior health program to be determined.
- Ultimate Loser program
- Holiday Stress Management series in late November/ December.

2018

- Direct mail flyers and business cards to employees homes with benefits and wellness details for 2018
- Analyze usage of Aetna resources and work on targeting communication to raise participation
- Analyze usage of EAP resources and work on targeting communication to raise participation
- Wellness committees to work on providing feedback on different campuses needs and communication style


- Wellness committees to draft and work with Wellness Coordinator to create 2019/2020 wellness plans
- Use FMLA claims data to coach managers and provide on campus seminars for managing FMLA
- Work with managers on performance management for employees on FMLA
- Transition away from nonperforming voluntary benefits and perks, and focus on educating employees on value add benefits and perks
- Utilizing the Wellness Committee, focus wellness initiatives around high volume claims, focusing around themes for each quarter of the year
- Review HSA funding model and create process for any changes
- Research incentives for employees to waive spouse coverage
- Go to market for a pharmacy benefits manager for 2019
- Work with vendors to automate files from PeopleSoft to vendors to reduce labor and control risk. Starting in early 2018 to be completed/ tested prior to 2019 open enrollment.
- Initiate Wellness Champions program
- Analyze \$100 incentive to determine ways to increase long term participation in Wellness events

2019

- Analyze 2017 and 2018 Wellness event participation to see what events and communication style are yielding the best results.
- Review 2018 FMLA claims and compare results of coaching and training in areas that were previously lacking that support.
- Introduce well rounded perks and benefits packages
- Work with senior leadership to project next 2-3 years tentative funding strategy to further develop medical plan changes
- Dependent upon HSA enrollment variances, implement potential changes to HSA seed and match policy
- Potentially implement incentives to employees for waiving spouse coverage
- Review options for opening on site health centers for employees

October 17, 2017

MEMORANDUM

TO: Board of Trustees, St. Petersburg College
FROM: Tonjua Williams, President 
SUBJECT: Student Success Center, St. Petersburg/Gibbs Campus.

Approval is requested for Guaranteed Maximum Price (GMP) for Phase II construction, Project 301-D-17-3, Student Success Center, St. Petersburg/Gibbs campus.

LEMA Construction, Inc., in conjunction with Wannemacher Jensen Architects, have submitted the GMP for Phase II construction for Project # 301-D-17-3, Student Success Center, St. Petersburg/Gibbs Campus. This scope consists of the foundation and structural steel portions of the building.

The Guaranteed Maximum Price (GMP) for Phase II is \$4,776,444.00 and the total current budget for this project is \$19,500,000. This GMP is subject to mandatory reviews for building codes, safety-to-life, the Americans with Disabilities Act (ADA) and further refinements through the value engineering process.

The Board approved the Design-Build contract for this project in October, 2016, after which a purchase order was issued in the amount of \$1,297,000 for design and pre-construction services, and subsequently increased by \$1,566,517 in August, 2017, to include the Phase I construction. That purchase order will be increased by the amount of this Guaranteed Maximum Price to allow this Phase II construction to begin.

The College intends to utilize the Direct Purchase Program for this project in order to realize cost savings within the project. The savings realized will be reported to the Board at the time of final accounting for this project.

Tonjua Williams, President; Brian Miles, Vice President, Administrative/Business Services and Information Technology; Jim Waechter, Associate Vice President, Facilities Planning and Institutional Services, recommend approval.

**ST. PETERSBURG GIBBS
STUDENT SUCCESS CENTER
UPDATE**

Board of Trustees Meeting

October 17, 2017

Project Timeline for the St. Petersburg/Gibbs Student Success Center


TASK	START	FINISH	2016 MAY JUN	QTR. 3 2016 JUL AUG SEP	QTR. 4 2016 OCT NOV DEC	QTR. 1 2017 JAN FEB MAR	QTR. 2 2017 APR MAY JUN	QTR. 3 2017 JUL AUG SEP	QTR. 4 2017 OCT NOV DEC	QTR. 1 2018 JAN FEB MAR	QTR. 2 2018 APR MAY JUN	QTR. 3 2018 JUL AUG SEP	QTR. 4 2018 - 2019 OCT NOV DEC JAN
Board approval to advertise for Design-Build firm	Tue 5/17/16	Tue 5/17/16	█										
First Appropriation signed into law	Thu 6/30/16	Thu 6/30/16		█									
Selection of Design-Build Firm	Tue 8/16/16	Tue 8/16/16		█									
Board Approval of Design-Build Contract	Fri 10/21/16	Fri 10/21/16			█								
Prepare new spaces for staff	Fri 7/1/16	Wed 11/30/16		█	█								
Asbestos removal	Thu 9/1/16	Fri 12/30/16		█	█	█							
Utility relocations	Mon 10/3/16	Wed 11/30/16		█	█								
Demolition of buildings	Thu 12/1/16	Fri 3/31/17			█	█							
Stakeholder input with architects	Mon 1/2/17	Fri 4/28/17			█	█							
Schematic design development and review	Mon 4/3/17	Mon 7/31/17				█	█						
Second Appropriation signed into law	Fri 6/30/17	Fri 6/30/17					█						
Board approval, Schematic Design and Phase I construction	Tue 8/15/17	Tue 8/15/17						█					
Phase I construction	Mon 8/21/17	Fri 12/29/17						█	█				
Board approval, Phase II construction	Tue 10/17/17	Tue 10/17/17							█				
Phase II construction	Tue 1/2/18	Fri 6/29/18								█	█		
Board approval, Phase III construction	Tue 5/15/17	Tue 5/15/17										█	
Phase III construction	Mon 7/2/18	Fri 6/28/19											█

Project Timeline for the St. Petersburg/Gibbs Student Success Center

TASK	START	FINISH	QTR. 3 2017			QTR. 4 2017			QTR. 1 2018			QTR. 2 2018			QTR. 3 2018			QTR. 4 2018 - 2019	
			JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	JUN
Board approval, Schematic Design and Phase I construction	Tue 8/15/17	Tue 8/15/17																	
Phase I construction	Mon 8/21/17	Fri 12/29/17																	
Board approval, Phase II construction	Tue 10/17/17	Tue 10/17/17																	
Phase II construction	Tue 1/2/18	Fri 6/29/18																	
Board approval, Phase III construction	Tue 5/15/17	Tue 5/15/17																	
Phase III construction	Mon 7/2/18	Fri 6/28/19																	

October 17, 2017

MEMORANDUM

TO: Board of Trustees St. Petersburg College
FROM: Tonjua Williams, President 
SUBJECT: Workforce and Professional Development

Approval is sought for the recommended changes to Workforce and Professional Development for courses within the 2017-2018 catalog year.

Workforce and Professional Development, Information and Innovative Technology: Added one new technology course to meet workforce needs.

- HDW0904 Introduction to Cell Phone and Tablet Repair

Workforce and Professional Development, CE Health: Changed two health continuing education courses to update the curriculum and streamline the class offerings.

- HHP0377 IV Therapy – 28 Hour
- HHP0377L IV Therapy – 32 Hour

Workforce and Professional Development, Business: Changed one business course to update the description and revise the curriculum to meet workforce needs.

- BSF0575 Introduction to Small Business Entrepreneurship


Workforce and Professional Development, Manufacturing: Changed one manufacturing course to update the description and revise the curriculum to meet workforce needs.

- MNF0814 Programmable Logic Controller

Anne Cooper, Senior Vice President, Instruction and Academic Programs and Andrea Henning, Executive Director, Collaborative Labs and Workforce & Professional Development, recommend approval.

October 17, 2017

MEMORANDUM

TO: Board of Trustees, St. Petersburg College
FROM: Tonjua Williams, Ph.D, President 
SUBJECT: Office of the Florida Attorney General, Division of Victim Services – Victim of Crime Assistance (VOCA) Program

Confirmation is sought for a proposal that was submitted, subject to Board of Trustees' approval, to the Office of the Florida Attorney General, Division of Victim Services by St. Petersburg College's Center for Public Safety Innovation (CPSI) for the Victim of Crime Assistance Program. Permission is sought to accept an estimated \$741,094 in funding over a one-year period for this proposal, if awarded, and enter into any amendments, extensions or agreements as necessary, within the original intent and purpose of the grant.

The purpose of the Victim of Crime Assistance (VOCA) Program is to support the provision of services to victims of crime, including responding to their emotional and physical needs, stabilizing their lives after victimization, assisting them understand and participate in the criminal justice system, and providing victims of crime with a measure of safety and security. The goal of SPC's Victim Service Provider Training Program (VSPTP) is to deliver training throughout Florida directed toward people coming into contact with victims as part of their work. CPSI will oversee and coordinate the delivery of various face-to-face trainings, creating a more comprehensive and cohesive system of care through training and education. Additionally, the program will update current training resources, making them more accessible through online and multi-media formats.

The estimated period of performance will be from October 1, 2017 –September 30, 2018. The total award amount is projected to be \$741,094 over a one-year period. See attached Information Summary for additional information.

Anne Cooper, Senior Vice President, Instruction and Academic Programs; Suzanne L. Gardner, General Counsel; Scott Fronrath, Provost; and Eileen LaHaie, Executive Director, Center for Public Safety Innovation, recommend approval.

Attachment

ks1003171

**BOT INFORMATION SUMMARY
GRANTS/RESTRICTED FUNDS CONTRACTS**

Date of BOT Meeting: October 17, 2017

Funding Agency or Organization: Office of the Florida Attorney General,
Division of Victim Services

Name of Competition/Project: Victim of Crime Assistance Program

SPC Application or Sub-Contract: SPC Application

Grant/Contract Time Period: **Start:** 10/1/17 **End:** 09/30/18

Administrator: Scott Fronrath

Manager: Eileen LaHaie

Focus of Proposal:

St. Petersburg College’s Center for Public Safety Innovation (CPSI) is proposing the development of a training program that focuses on delivering education to law enforcement, school personnel and the community to improve interaction and service delivery to victims of crimes. This funding will create a statewide Victim Service Provider Training Program (VSPTP). The goal of this program is to deliver training throughout Florida directed toward people coming into contact with victims as part of their work.

CPSI will use a multi-faceted approach to training that will involve a variety of learning platforms and audiences, including programming in English and Spanish, face-to-face and online. The VSPTP will offer training geared towards victims’ services on a variety of topics including, but not limited to: understanding the needs of children of incarcerated parents; the impact of domestic violence; understanding substance use, abuse, and overdose; human trafficking victims; and hate crimes. It is estimated that the program will deliver up to 25 training sessions on varying topics, in addition to five Florida Crisis Response Team Trainings (40 hour courses).

Budget for Proposal:

(Only Major categories—This is an estimated budget description based on expected funding and services. Specific budget categories may vary as the funding amount and/or services change.)

Personnel	\$ 228,842.00
Fringe	\$ 86,960.00
Travel	\$ 3,770.00
Supplies	\$ 1,800.00
Consultants/Contractors	\$ 364,700.00
Other Costs	\$ 19,732.00
<u>Indirect Costs</u>	<u>\$ 35,290.00</u>
Total Budget	\$ 741,094.00

Funding:

Total proposal budget: (includes amount requested from funder, cash and in-kind matches listed below)

\$ 741,094.00

Total amount from funder:

\$ 741,094.00

Amount/value of match:

Cash: N/A
In-kind: N/A

Required match or cost sharing:

No Yes

Voluntary match or cost sharing:

No Yes

Source of match/cost sharing:

N/A

Negotiated indirect cost:

N/A

(Fixed) administrative fee:

\$35,290 (5% of total budget)

Software/materials:

N/A

Equipment:

N/A

Services:

N/A

Staff Training:

N/A

FTE:

N/A

Other: (20% Grant Acct Salary/Benefits for 1 yr) \$13,142

College Values and Strategic Initiatives Addressed:

Value(s):


1. Partnership
2. Professional Development

Strategic Initiative(s):

1. Community Initiatives

October 17, 2017

MEMORANDUM

TO: Board of Trustees, St. Petersburg College
FROM: Tonjua Williams, President 
SUBJECT: Audits and Other Statutory Requirements of Direct Support Organizations, April, 2016, Through March 31, 2017

In accordance with Section 1004.70, Florida Statutes, the annual financial audits, the audit-associated Reports to the Board of Directors reports, and the Federal Internal Revenue Service Return of Organization Exempt from Income Tax forms (Form 990) of the following direct-support organizations are submitted for your approval and authorization to submit to the appropriate agencies in Tallahassee:

- St. Petersburg College Foundation, Incorporated
- The Leepa-Rattner Museum of Art, Incorporated
- Institute for Strategic Policy Solutions

All of the above St. Petersburg College direct-support organizations are in compliance with the Board of Trustees Rule 6Hx23-1.33 that states they shall make provisions for an annual audit of their financial accounts, to be conducted by an independent certified public accountant. The annual audit report shall be submitted to the Auditor General, the State Board of Education and the Board of Trustees.

Each auditor's report states that each set of financial statements presented fairly, in all material respects, the net assets of each respective direct-support organization as of March 31, 2017.

Attachments

Brian Miles, Vice President, Administrative/Business Services & Information Technology; Amy Lockhart, Associate Vice President, Business & Financial Services; France Neu, Vice President, Institutional Advancement and Executive Director, SPC Foundation, Inc.; Ann Larsen, Director, Leepa-Rattner Museum of Art, Inc.; and David Klement, Executive Director, Institute for Strategic Policy Solutions, recommend approval.

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2016
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

- Do not enter social security numbers on this form as it may be made public.
- Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2016 calendar year, or tax year beginning **04/01/16**, and ending **03/31/17**

- B** Check if applicable:
- Address change
 - Name change
 - Initial return
 - Final return/terminated
 - Amended return
 - Application pending

C Name of organization: **St. Petersburg College Foundation, Inc.**

Doing business as: _____

Number and street (or P.O. box if mail is not delivered to street address): **P.O. Box 13489** Room/suite: _____

City or town, state or province, country, and ZIP or foreign postal code: **St. Petersburg FL 33733**

D Employer identification number: **59-1954362**

E Telephone number: **727-341-3285**

G Gross receipts \$: **9,894,564**

F Name and address of principal officer:
Frances Neu
P.O. Box 13489
St. Petersburg FL 33733

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes No
If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: **spcollegefoundation.spcollege.edu** **H(c)** Group exemption number: _____

K Form of organization: Corporation Trust Association Other

L Year of formation: **1979** **M** State of legal domicile: **FL**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: The Foundation promotes the practice of philanthropy through partnerships with the community for the advocacy of higher education in general and specifically at St. Petersburg College (SPC).		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets:		
	3	Number of voting members of the governing body (Part VI, line 1a)	18
	4	Number of independent voting members of the governing body (Part VI, line 1b)	14
	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	9
	6	Total number of volunteers (estimate if necessary)	18
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0
	7b	Net unrelated business taxable income from Form 990-T, line 34	0
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year: 1,784,108 Current Year: 1,481,945
	9	Program service revenue (Part VIII, line 2g)	416,802 426,434
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,070,578 1,324,981
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-8,003 646,148
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,263,485 3,879,508
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,972,139 2,994,717
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0
	16b	Total fundraising expenses (Part IX, column (D), line 25)	104,800
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,101,153 1,064,437
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,073,292 4,059,154
	19	Revenue less expenses. Subtract line 18 from line 12	-809,807 -179,646
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year: 57,491,543 End of Year: 65,855,439
	21	Total liabilities (Part X, line 26)	0 0
	22	Net assets or fund balances. Subtract line 21 from line 20	57,491,543 65,855,439

Part II Signature Block

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.

Sign Here

Signature of officer: **Frances Neu** Date: _____

Type or print name and title: **Secretary/Exec Dir.**

Paid Preparer Use Only

Print/Type preparer's name: **Byron C. Smith, CPA** Preparer's signature: _____ Date: _____

Check if self-employed PTIN: _____

Firm's name: **Gregory, Sharer & Stuart, PA** Firm's EIN: _____

Firm's address: **100 2nd Ave South Ste 600 Saint Petersburg, FL 33701-4336** Phone no.: **727-821-6161**

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

See Schedule O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **1,820,437** including grants of \$ **1,834,937**) (Revenue \$)

The Foundation has over 270 named Scholarship funds that provide financial assistance to SPC students. Through the generosity of our donors we have specific scholarships available for every area of study including (but not limited to), nursing, education, study abroad programs and financial assistance for our returning veterans. Each scholarship has unique awarding criteria which may include financial need and/or academic achievement. College expenses have risen nearly 40% over the last decade, making this the most difficult time in history for young people to pay for a college education, according to the US Department of Education. Without the help of financial assistance many of our students would not otherwise have the opportunity to attend college. (Continued on Schedule O)

4b (Code:) (Expenses \$ **978,214** including grants of \$ **978,214**) (Revenue \$)

The Foundation provided funding to St. Petersburg College for capital facility projects. The Foundation provided financial support for the Arts by raising funds for the Palladium Theatre at St. Petersburg College and the Leepa-Rattner Museum of Art. The Foundation also provided funding for the Strategic Institute of Policy Solutions, a Direct Support Organization of the College, founded in 2011 to promote educational and civic engagement by providing a forum for public discourse on civic matters. In addition the Foundation provided financial support for numerous college departments, such as nursing, education, athletics, Collegiate High School and fine arts. (Continued on Schedule O)

4c (Code:) (Expenses \$ **426,434** including grants of \$) (Revenue \$ **426,434**)

Provide management of investment assets of the Foundation

4d Other program services (Describe in Schedule O.)

(Expenses \$ **181,566** including grants of \$ **181,566**) (Revenue \$)

4e Total program service expenses **3,406,651**

Part IV Checklist of Required Schedules

	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	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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		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		X
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		X
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		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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	X	
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		X
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	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
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		X
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		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		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
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		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	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		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		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		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		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)		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	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		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.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note.</i> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		
4a	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)?		X
4b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? <i>Note.</i> See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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

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

Section A. Governing Body and Management

		1a	18	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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.		18		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	14		
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?				X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?				X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?				X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?				X
6	Did the organization have members or stockholders?				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?				X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?				X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?			X	
b	Each committee with authority to act on behalf of the governing body?			X	
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				X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	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 with a taxable entity during the year?		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?		

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **FL**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records: **▶**

Frances Neu
St. Petersburg P.O. Box 13489

FL 33733 727-341-3319

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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 nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation (from the organization (W-2/1099-MISC))	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) William D. Law, Jr. Director	1.00 40.00	X		X			0	330,000	85,355	
(2) Frances Neu Secretary/Exec Dir.	40.00 0.00	X		X			131,771	0	50,680	
(3) Theresa K. Furnas Treasurer	1.00 40.00	X		X			0	109,117	10,773	
(4) Amy Lockhart Treasurer	1.00 40.00	X		X			0	77,239	17,375	
(5) Kenneth P. Cherven Director	1.00 0.00	X					0	0	0	
(6) Joseph G. Blanton Director	1.00 0.00	X					0	0	0	
(7) Richard B. Winning Director	1.00 0.00	X					0	0	0	
(8) Beth A. Horner Chairman	1.00 0.00	X					0	0	0	
(9) Stephen O. Cole Director	1.00 0.00	X					0	0	0	
(10) Steve Shepard Director	1.00 0.00	X					0	0	0	
(11) David Zillig Director	1.00 0.00	X					0	0	0	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) Robert L. Hilton	1.00									
Director	0.00	X					0	0	0	
(13) Paul Demirdjian	1.00									
Vice Chair	0.00	X					0	0	0	
(14) Bill McCloud	1.00									
Chairman	0.00	X					0	0	0	
(15) Angela McCourt	1.00									
Director	0.00	X					0	0	0	
(16) R. Michael Carroll	1.00									
Director	0.00	X					0	0	0	
(17) Shan Shikarpuri	1.00									
Director	0.00	X					0	0	0	
(18) Deveron M. Gibbons	1.00									
Director	0.00	X					0	0	0	
(19) Edel Quinn	40.00									
CFO	0.00			X			79,341	0	11,935	
1b Sub-total							211,112	516,356	176,118	
1c Total from continuation sheets to Part VII, Section A										
1d Total (add lines 1b and 1c)							211,112	516,356	176,118	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	51,350			
	1b Membership dues				
	1c Fundraising events	7,553			
	1d Related organizations	175,951			
	1e Government grants (contributions)				
	1f All other contributions, gifts, grants, and similar amounts not included above	1,247,091			
	g Noncash contributions included in lines 1a-1f: \$	84,722			
h Total. Add lines 1a-1f	1,481,945				
Program Service Revenue	2a Administrative Fee Revenue	426,434	426,434		
	b				
	c				
	d				
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f	426,434			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	1,369,093			1,369,093
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				
	6a Gross rents				
	b Less: rental exps.				
	c Rental inc. or (loss)				
	d Net rental income or (loss)				
	7a Gross amount from sales of assets other than inventory	5,901,746			
	b Less: cost or other basis & sales exps.	5,945,858			
	c Gain or (loss)	-44,112			
	d Net gain or (loss)	-44,112			-44,112
	8a Gross income from fundraising events (not including \$ 7,553 of contributions reported on line 1c). See Part IV, line 18	96,250			
b Less: direct expenses	69,198				
c Net income or (loss) from fundraising events	27,052				
9a Gross income from gaming activities. See Part IV, line 19					
b Less: direct expenses					
c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances					
b Less: cost of goods sold					
c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	Busn. Code				
11a BP Fund Revenue		619,096			619,096
b					
c					
d All other revenue					
e Total. Add lines 11a-11d		619,096			
12 Total revenue. See instructions.		3,879,508	426,434	0	1,944,077

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).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,159,780	1,159,780		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	1,834,937	1,834,937		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	28,406		28,406	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	485,042		485,042	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	-14,500	-14,500		
13 Office expenses	24,478		12,124	12,354
14 Information technology	4,778			4,778
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	1,846			1,846
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	21,909		21,909	
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.)				
a Administrative Fee	426,434	426,434		
b Development	82,366			82,366
c Bank charges	2,033		222	1,811
d Dues & Membership	1,645			1,645
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	4,059,154	3,406,651	547,703	104,800
26 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest bearing	244,262	1	98,356
	2	Savings and temporary cash investments	840,082	2	883,617
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	36,750		
	b	Less: accumulated depreciation	36,750	10c	36,750
	11	Investments—publicly traded securities	53,647,032	11	61,931,676
	12	Investments—other securities. See Part IV, line 11	2,723,417	12	1,797,810
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	1,107,230
16	Total assets. Add lines 1 through 15 (must equal line 34)	57,491,543	16	65,855,439	
Liabilities	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	1,863,846	27	2,847,317
	28	Temporarily restricted net assets	28,967,341	28	36,072,936
	29	Permanently restricted net assets	26,660,356	29	26,935,186
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	57,491,543	33	65,855,439	
34	Total liabilities and net assets/fund balances	57,491,543	34	65,855,439	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,879,508
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,059,154
3	Revenue less expenses. Subtract line 2 from line 1	3	-179,646
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	57,491,543
5	Net unrealized gains (losses) on investments	5	8,505,936
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	37,606
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	65,855,439

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2016

Open to Public Inspection

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.

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

Department of the Treasury
Internal Revenue Service

Name of the organization

St. Petersburg College Foundation, Inc.

Employer identification number

59-1954362

Part I 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.)

- 1 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:
- 5 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.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 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.)
- 9 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:
- 10 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 exempt 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). (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.
 - a **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.
 - 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.
 - 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.
 - d **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.
 - e 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.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar 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.")	1,309,737	1,652,774	1,457,562	1,784,108	1,481,945	7,686,126
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge	516,128	596,263	729,867	673,229	779,258	3,294,745
4 Total. Add lines 1 through 3	1,825,865	2,249,037	2,187,429	2,457,337	2,261,203	10,980,871
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						10,980,871

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	1,825,865	2,249,037	2,187,429	2,457,337	2,261,203	10,980,871
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,244,956	1,397,301	1,487,752	1,515,089	1,369,093	7,014,191
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	160				619,096	619,256
11 Total support. Add lines 7 through 10						18,614,318
12 Gross receipts from related activities, etc. (see instructions)					12	2,007,217
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	58.99%
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	58.96%
16a 33 1/3% support test—2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3% support test—2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 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 <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 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 <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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.)

Section A. Public Support

Calendar 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.")						
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						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b 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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a 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 acquired after June 30, 1975						
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 loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%

- 19a **33 1/3% support tests—2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶
- b **33 1/3% support tests—2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶
- 20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

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 Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
c 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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
c 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? <i>If "Yes," provide detail in Part VI.</i>		
10a 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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2	

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1	

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2	
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3	

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 Activities Test. Answer (a) and (b) below.		Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3 Parent of Supported Organizations. Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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	
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 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 factors (explain in detail in Part VI):		
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	
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	
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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
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 responsive (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			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required-explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
c	From 2013			
d	From 2014			
e	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
c	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.			
8	Breakdown of line 7:			
a				
b	Excess from 2013			
c	Excess from 2014			
d	Excess from 2015			
e	Excess from 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.)

Part II, Line 10 - Other Income Detail

Other Income \$ 619,256

DRAFT

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

2016

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

Name of the organization
**St. Petersburg College Foundation,
Inc.**

Employer identification number
59-1954362

Organization type (check one):

- Filers of: Section:
- Form 990 or 990-EZ 501(c)(3) (enter number) organization
 - 4947(a)(1) nonexempt charitable trust not treated as a private foundation
 - 527 political organization
 - Form 990-PF 501(c)(3) exempt private foundation
 - 4947(a)(1) nonexempt charitable trust treated as a private foundation
 - 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization **St. Petersburg College Foundation,** Employer identification number **59-1954362**

Part I Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Community Foundation of Tampa Bay 550 N. Reo St. Suite3011 Tampa FL 33609	\$ 61,153	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	Patrick Brett Foundation P.O. Box 11053 St. Petersburg FL 33733	\$ 50,233	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	Harry James Free 520 Ponce de Leon Blvd. Belleair FL 33756	\$ 50,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	United Way Suncoast 5201 West Kennedy Blvd., Ste. 600 Tampa FL 33609	\$ 51,350	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	The Florida College System Foundatio 325 West Gaines Street Suite 1548 Tallahassee FL 32399	\$ 46,482	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	St. Petersburg College P. O. Box 13489 St. Petersburg FL 33733	\$ 175,951	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization **St. Petersburg College Foundation,** Employer identification number **59-1954362**

Part I Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Pinellas Community Foundation 5200 East Bay Dr, Suite 202 Clearwater FL 33764	\$ 45,411	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	National Christian Foundation 700 N Franklin Street, Suite 800 Tampa FL 33602	\$ 45,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	Transamerica 570 Carillon Parkway St. Petersburg FL 33716	\$ 40,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization
St. Petersburg College Foundation,

Employer identification number
59-1954362

Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
6	Supplies	\$ 24,128	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization

St. Petersburg College Foundation, Inc.

Employer identification number

59-1954362

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Form with multiple sections: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. (Includes sub-table for Held at the End of the Tax Year), 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 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)?, 9 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.

Form with multiple sections: 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 on 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 on Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

- c Beginning balance
- d Additions during the year
- e Distributions during the year
- f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	26,660,356	27,430,633	27,100,453	26,641,634	26,239,759
b Contributions	254,049	245,089	321,595	441,673	389,900
c Net investment earnings, gains, and losses	20,581	-5,959	8,585	17,146	11,975
d Grants or scholarships					
e Other expenditures for facilities and programs	200	-1,009,408			
f Administrative expenses					
g End of year balance	26,935,186	26,660,355	27,430,633	27,100,453	26,641,634

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment %
- b Permanent endowment 100.00 %
- c Temporarily restricted endowment %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		<input checked="" type="checkbox"/>
3a(ii)		<input checked="" type="checkbox"/>
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	36,750			36,750
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				36,750

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, 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) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" on Form 990, 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)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	12,007,206
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	8,505,936	
b	Donated services and use of facilities	2b	426,433	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	106,804	
e	Add lines 2a through 2d		2e	9,039,173
3	Subtract line 2e from line 1		3	2,968,033
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	911,475	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	911,475
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	3,879,508

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	3,643,310
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	426,433	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	69,198	
e	Add lines 2a through 2d		2e	495,631
3	Subtract line 2e from line 1		3	3,147,679
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	911,475	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	911,475
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	4,059,154

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part III, Line 1a - Terms for Not Reporting Assets Per SFAS 116

The Foundation has received various gifts of art objects, microfilm, and microfiche. Collections donated to the Foundation are being held for education purposes and not capitalized on the Statement of Net Assets.

Part III, Line 4 - Collections and Relation to Exempt Purpose

It is the policy of the Foundation not to purchase any collections. Collections are held for exhibition to the public and for educational purposes, not for financial gain. Collections are appropriately protected, cared for, and preserved in order to maintain the cultural, asthetic and historical value of the collections perpetually. The collection enriches the lives of our students and deepens their understanding and appreciation

Part XIII Supplemental Information (continued)

for the arts.

The Foundation has received various gifts of donated art objects, microfilm and microfiche, being held for education purposes, which are not reflected on the financial statements. They include:

1. Wendall Ware Microfilm Collection - A collection of 25,000,000 images. Independently appraised to be worth \$1,932,447
2. Canadian Donor Art Collections - A collection of contemporary prints and artists' proofs. Independently appraised at \$988,653
3. Anonymous Oriental Art Objects Collection - A collection of Chinese Qing dynasty and Japanese Taisno, Heisei and Showa Period objects d'art. Independently appraised at \$44,275
4. Abraham Rattner and Allen Leepa Art Collection - Over 5,000 artworks with an estimated fair market value of \$22,000,000
5. Two Art Quilts by Pauline Salzman. Independently appraised to be worth \$5,600 and \$4,000 respectively. Donated by Pauline Salzman.
6. Contemporary Florida Art Collection and American Fine Crafts from the Gulf Coast Museum of Art. Independently appraised to be worth \$544,210.
7. Black & White Photographs (10) of downtown St. Petersburg by and donated by Stella Anderson with an estimated fair market value of \$2,500.

8. Painting by Martha Campbell painting. Donated by Martha Campbell.

Estimated fair market value of \$800

9. Painting by Florence Putterman (2). Donated by Florence Estimated fair market value of \$1,600

10. Oil on ceramic, 9 wall mounted pieces by Victoria Block. Donated by Victoria Block. Estimated fair market value of \$3,500

11. A mixed media wall construction art piece by Jack King. Donated by Jack King. Estimated fair market value of \$1,100

12. Painting by Jack Barrett "Knight of the Brownstones" Donated by Jack Barrett with an estimated fair market value \$6,800.

13. Winslow Homer Arts Prints (370) donated by Lothar Uhl. Estimated fair market value \$46,955

14. Original drawings and watercolors by Joseph Weinzette (14) Donated by Joseph Weinzette. Estimated fair market value of \$5,800.

15. Digital Print by Robert Derr. Donated by Robert Derr. Estimated fair market value of \$1,100.

16. Paintings (26) by various artists and art books (11), donated by John and Betty Milsom. Estimated fair market value of \$14,500.

17. Four ethnographic sculptures and one decorative lamp, donated by Rita Scott Estate. Estimated fair market value of \$21,700

18. Carved Bass Wood - Golden Retriever "Buddy" by Mark Noll. Estimated fair market value of \$750

19. 12 works by David P. Anderson. No value assigned. Donated by Lawrence Konrad & Robert Pope. Not valued.

20. Paintings (2) by Joseph Weinzette; Portrait of an African Girl and Urban Landscape. Estimated fair market value of \$1,200.

21. Painting by D. Anderson - Russian Peasant and My Heart Rejoices. Estimated fair market value of \$5,000 and \$9,000 respectively.

22. Painting by W. Nelson - Stage Coach. Estimated fair market value of \$4,500.

23. Painting by Lisa Williamson - Kentucky Landscape, Painting by Mary Bassham - Still Life with Tea Pot and an untitled painting by Maria Calandra, donated by Ken Rollins. Estimated fair market value of \$9,500

24. Collection of ceramic Panamanian/pre-Columbian artifacts donated by Lourdes Oliveira. Not valued.

25. Dog with Dragon Fly Sculpture. Estimated fair market value of \$885.00

26. Mixed media artwork "Landscape" by Morgan. Estimated fair market value of \$2,800.

27. Japanese Tatami Mats (2). Estimated fair market value of \$4,200

Total Fair Market Value; \$25,663,375

Part V, Line 4 - Intended Uses for Endowment Funds

Restricted - nonexpendable consist of donor-restricted assets (endowments). These assets are subject to externally imposed conditions that the Foundation will retain in perpetuity. The Foundation's Board establishes the endowment payout rate, giving prudent consideration to asset allocation, expected returns, future capital market assumptions, inflation and other market conditions and the income needs of the endowment fund holders. Endowment spending is used to fund scholarships, numerous College Programs and Departments and provide financial support to the Leepa-Rattner-Museum of Art, The Palladium Theatre at St. Petersburg College and the Institute for Strategic Policy Solutions.

Part XI, Line 2d - Revenue Amounts Included in Financials - Other

Special Event Expense	\$	69,198
Change in Value of Split interest agrmts	\$	37,606

Part XII, Line 2d - Expense Amounts Included in Financials - Other

Special Event Expenses	\$	69,198
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**SCHEDULE G
(Form 990 or 990-EZ)**

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

2016

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of the organization

**St. Petersburg College Foundation,
Inc.**

Employer identification number

59-1954362

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

.....

.....

.....

.....

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>Brooks Event</u> (event type)	(event type)	<u>None</u> (total number)	(add col. (a) through col. (c))
Revenue	1	Gross receipts	103,803		103,803
	2	Less: Contributions	7,553		7,553
	3	Gross income (line 1 minus line 2)	96,250		96,250
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	69,198		69,198
	10	Direct expense summary. Add lines 4 through 9 in column (d)			69,198
	11	Net income summary. Subtract line 10 from line 3, column (d)			27,052

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tab/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1	Gross revenue		
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$

c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

**Open to Public
Inspection**

Name of the organization

**St. Petersburg College Foundation,
Inc.**

Employer identification number

59-1954362

Part I General Information on Grants and Assistance

- 1 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? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II 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.

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 non-cash assistance	(h) Purpose of grant or assistance
(1)	St. Petersburg College P.O. Box 13489 St. Petersburg FL 33733	59-1211489	501c3	341,153				Program Support
(2)	St. Petersburg College - Palladium P.O. Box 13489 St. Petersburg FL 33733	59-1211489	501c3	322,911				Program Support
(3)	Leepa Rattner Museum of Art, Inc. P.O. Box 13489 St. Petersburg FL 33733	59-3733512	501c3	181,566				Program Support
(4)	Institute for Strategic Policy Solu P.O. Box 13489 St. Petersburg FL 33733	45-3194848	501c3	314,150				Program Support
(5)								
(6)								
(7)								
(8)								
(9)								

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **3**

3 Enter total number of other organizations listed in the line 1 table **0**

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

Supplemental Information

SCHEDULE I
(Form 990)

For calendar year 2016, or tax year beginning

04/01/16

, and ending

03/31/17

2016

Name of the organization

St. Petersburg College Foundation,
Inc.

Employer identification number

59-1954362

Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds

Scholarship recipients are selected by the Scholarship selection committee in association with the various college departments. The Foundation has an on-line scholarship application process for students to complete each term. Scholarships are awarded to students who meet the particular criteria for each of our scholarships which is set by the donor.

Grants to the College for construction are based on the timing of construction projects and are paid out as projects are completed.

The Foundation also provides funding for the Leepa Rattner Museum of Art and the Institute for Strategic Policy Solutions at St. Petersburg College and the Palladium Theatre at St. Petersburg College.

SCHEDULE J
(Form 990)

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.

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization

**St. Petersburg College Foundation,
Inc.**

Employer identification number

59-1954362

Part I Questions Regarding Compensation

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.

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input checked="" type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> 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:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?

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:

- a** The organization?
- b** Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?

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

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

For each individual whose compensation must be reported 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.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 William D. Law, Jr. Director	(i) 0 (ii) 330,000	0	0	71,280	14,075	85,355	0
2 Frances Neu Secretary/Exec Dir.	(i) 131,771 (ii) 0	0	0	28,462	22,218	182,451	0
3							
4							
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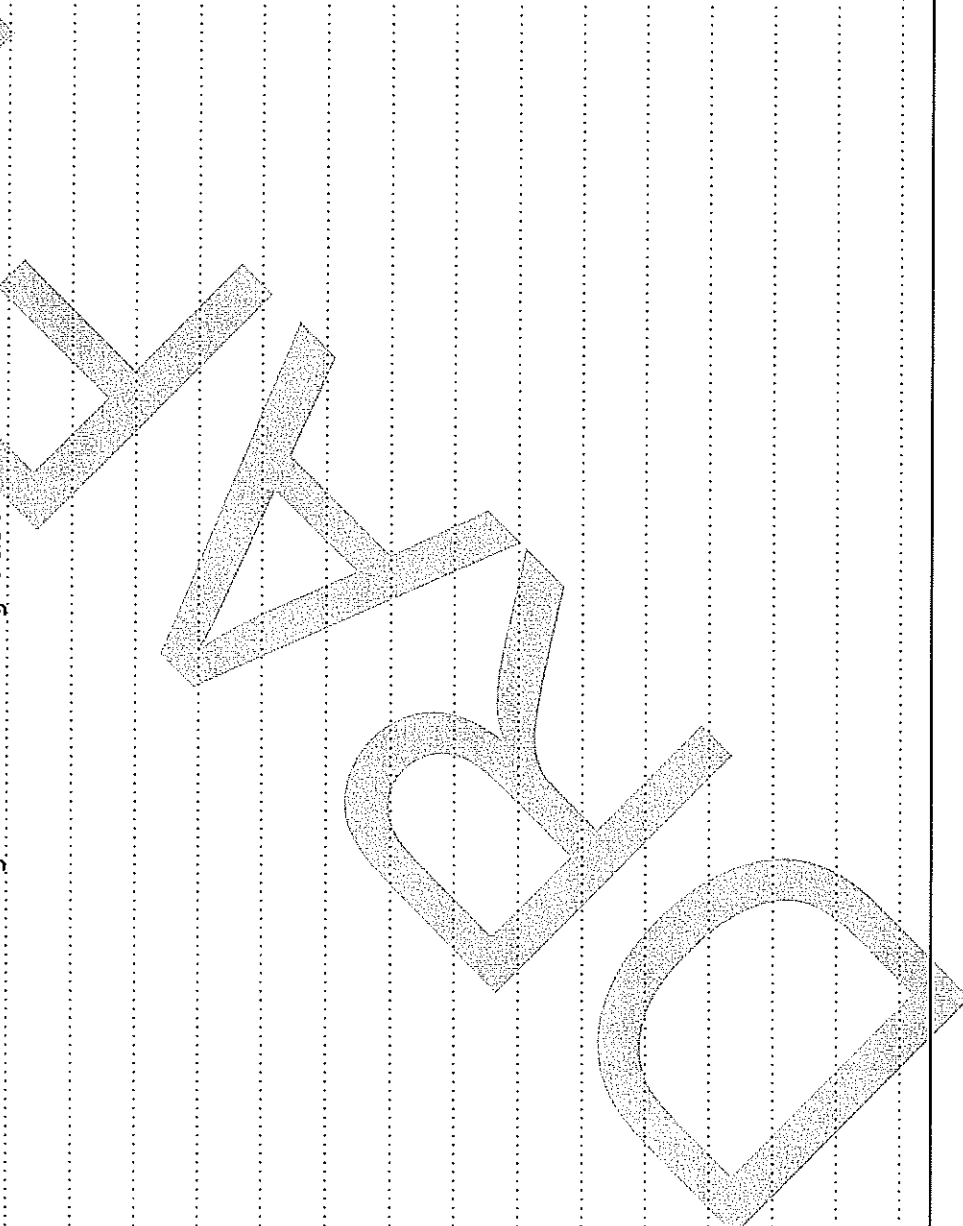
Schedule J (Form 990) 2016 St. Petersburg College Foundation, 59-1954362

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.

Part I, Line 3 - Related Org Methods Used for Compensation Explanation

Compensation for the Executive Director of the St. Petersburg College Foundation, Inc. is based on the St. Petersburg College Classification and Salary Schedule, which includes ranges for each grade.



**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2016

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization **St. Petersburg College Foundation, Inc.**

Employer identification number
59-1954362

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	<input checked="" type="checkbox"/>	2		See Note
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles	<input checked="" type="checkbox"/>	4	20,000	Fair Market Value
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	<input checked="" type="checkbox"/>	2	27,646	Fair Market Value
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (Supplies)	<input checked="" type="checkbox"/>	2	25,228	Fair Market Value
26 Other ▶ (Organ & Speaker)	<input checked="" type="checkbox"/>	1	6,000	Fair Market Value
27 Other ▶ (Tool Cutters)	<input checked="" type="checkbox"/>	1	4,500	Fair Market Value
28 Other ▶ (Gift Cards)	<input checked="" type="checkbox"/>	11	1,348	Fair Market Value

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

- 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?
- b If "Yes," describe the arrangement in Part II.
- 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?
- 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?
- b If "Yes," describe in Part II.
- 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		<input checked="" type="checkbox"/>
31	<input checked="" type="checkbox"/>	
32a		<input checked="" type="checkbox"/>

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Schedule M - Supplemental Information

Collections donated to the Foundation are not capitalized on the Statement of Net Assets. It is the policy of the Foundation not to purchase any collections. The Foundation received two pieces of art which are not part of our audited financial statements. They are included in a supplementary schedule to our financial statements; Unaudited Schedule of Collections.

The Executive Director of the Foundation approves all non-cash and/or in-kind gifts before they are accepted by the Foundation.

DRAFT

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

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

2016

Department of the Treasury
Internal Revenue Service

▶ 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.

Open to Public
Inspection

Name of the organization **St. Petersburg College Foundation,
Inc.**

Employer identification number
59-1954362

Form 990 - Organization's Mission

The Foundation promotes the practice of philanthropy through partnerships with the community for the advocacy of higher education in general and, specifically at St. Petersburg College (SPC), for (1) the provision of student scholarships, awards and grants, (2) the advancement of teaching and instructional services, (3) new and improved facilities and (4) state-of-the-art technology.

Form 990, Part III, Line 4a - First Accomplishment

(Continued from Part III, line 4a) In 2016 the Foundation provided financial assistance to more than 2,350 students. The average scholarship award was approximately \$800. Total amount of scholarships awarded was over \$1.8 million.

Form 990, Part III, Line 4b - Second Accomplishment

(Continued from Part III, line 4b) Additionally the Foundation provided grants to faculty and staff to implement programs that broaden the scope of the curriculum and improve student success. St. Petersburg College is experiencing declines in support from the State of Florida. Accordingly, private support is an increasingly important component of revenue to the various campuses/departments. The Foundation anticipates a higher rate of use of Foundation held funds in the future as a result of decreased resources provided by the State.

Name of the organization

St. Petersburg College Foundation,

Employer identification number

59-1954362

Form 990, Part III, Line 4d - All Other Accomplishment

To provide grants to The Leepa-Rattner Museum of Art for program support.

Form 990, Part V - Additional Information

Lines 2a and 2b:

The Organization's payroll is reported under a related organization; the St. Petersburg College. The number of employees reported represents all the organization's employees. St. Petersburg College has filed all required federal employment tax returns.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

A draft of the 990 tax form will be sent to each member of the Board of Directors for their review and input. The 990 tax form will be on the board agenda for review and/or discussion prior to filing.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

The Foundation seeks disclosure of any conflict of interest from officers, directors and key employees. A disclosed conflict would be reported to the board and handled accordingly.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

Compensation for the Executive Director of the St. Petersburg College Foundation, Inc. is based on the St. Petersburg College Classification and Salary Schedule, which includes ranges for each grade, including this position.

Form 990, Part VI, Line 15b - Compensation Process for Officers

Name of the organization

Employer identification number

St. Petersburg College Foundation,

59-1954362

Compensation for key employees of St. Petersburg College Foundation, Inc. is based on the St. Petersburg College Classification and Salary Schedule, which includes ranges for each grade, including these positions.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

All of the St. Petersburg College Foundation, Inc. documents (including governing documents, financial statements and conflict of interest policy) are available upon request. We post our financial statements on our website and on GuideStar.com.

Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation

Special Event Expense	\$ 69,198
Change in Value of Split interest agrmts	\$ 37,606
Special Event Expenses	\$ -69,198
Total	\$ 37,606

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2016
Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

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

Name of the organization
**St. Petersburg College Foundation,
Inc.**

Employer identification number
59-1954362

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

(1)	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)						
(2)						
(3)						
(4)						
(5)						

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

(1)	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
							Yes	No
(1)	St. Petersburg College P.O. Box 13489 St. Petersburg FL 33733 59-1211489	Higher Edu	FL	501c3	5	N/A		X
(2)	Leepa-Rattner Museum of Art, Inc. P.O. Box 13489 St. Petersburg FL 33733 59-3733512	Art Museum	FL	501c3	7	N/A		X
(3)	Institute for Strategic Policy P.O. Box 13489 St. Petersburg FL 33733 45-3194848	Public Pol	FL	501c3	7	N/A		X
(4)								
(5)								

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

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

(1)	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate alloc.?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
								Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												

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

(1)	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
									Yes	No
(1)									
(2)									
(3)									
(4)									

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)	X	
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)	X	
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 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.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)	St. Petersburg College	b	1,834,937	Cash-Scholarships
(2)	Leepa-Rattner Museum of Art, Inc.	b	181,566	Cash
(3)	Institute for Strategic Policy	b	314,150	Cash
(4)	Leepa-Rattner Museum of Art, Inc.	b	See note - Art on Loan	
(5)	St. Petersburg College	b	636,576	Cash
(6)	St. Petersburg College	c	151,823	Cash - Board of Trustees

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1		
a		
b		
c		
d		
e		
f		
g		
h		
i		
j		
k		
l		
m		
n		
o		
p		
q		
r		
s		

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)	St. Petersburg College	b	27,488	Capital Projects
(2)	St. Petersburg College	c	24,128	Non-cash Supplies
(3)	Leepa-Rattner Museum of Art, Inc.	l	17,840	.75% of pooled investment
(4)	Institute for Strategic Policy	l	81,508	.75% of pooled investment
(5)	St. Petersburg College	n	44,126	Shared facilities
(6)	St. Petersburg College	o	735,133	Shared personnel

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

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

(1)	(a)	(b)	(c)	(d)	(e)		(f)	(g)	(h)		(i)	(j)		(k)
					Legal domicile (state or foreign country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)			Are all partners section 501(c)(3) organizations?	Share of total income		Share of end-of-year assets	Disproportionate allocations?	
(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)

Part VII Supplemental Information

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

Schedule R - Additional Information**Schedule R, Part V, Line 1b - Transactions with Related Organizations**

The St. Petersburg College Foundation, Inc. is related to the Leepa Rattner Museum of Art ("Museum"), as it is a direct support organization of the College. The St. Petersburg College Foundation has permanently loaned The Leepa-Rattner-Gentle art collection to St. Petersburg College for \$1. The College has loaned the collection to the Museum.

Schedule R, Part V, Line 1l - Transactions with Related Organizations

The organization charged a fee of .75% of the Museum and Institute for Strategic Policy Solution's (ISPS) pooled investment funds overseen by the organization. No direct cash payments were made but rather a fee was taken directly from the pooled fund.

Schedule R, Part V, Line 1n - Transactions with Related Organizations

The organization shares facilities and materials with St. Petersburg College. Although a value has been assigned, no cash reimbursements occurred.

Schedule R, Part V, Line 1o - Transactions with Related Organizations

The organization shares paid employees with St. Petersburg College. Although a value has been assigned, no cash reimbursements occurred.

Federal Statements

Taxable Dividends from Securities

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
Interest and Dividends	\$ 1,369,093		14			
Total	<u>\$ 1,369,093</u>					

DRAFT

Federal Statements

For review only - not in final copy

Schedule A. Part II. Line 1(e)

Description	Amount
Contributions	
Artwork	\$ 847,718
Automobiles	
Stock	20,000
Supplies	27,646
Organ & Speakers	1,100
Tool Cutters	6,000
Gift Cards	4,500
Community Foundation of Tampa Bay	1,348
Cash Contribution	
Patrick Brett Foundation	61,153
Cash Contribution	
Harry James Free	50,233
Cash Contribution	
United Way Suncoast	50,500
Cash Contribution	
The Florida College System Foundation	51,350
Cash Contribution	
St. Petersburg College	46,482
Cash Contribution	
Supplies	151,823
Pinellas Community Foundation	24,128
Cash Contribution	
National Christian Foundation	45,411
Cash Contribution	
Transamerica	45,000
Cash Contribution	
Brooks Event	40,000
Cash Contribution	
Total	7,553
	<u>\$ 1,481,945</u>

SPC St. Petersburg College Foundation, Inc.

Tonjua Williams
President
St. Petersburg College

Frances Neu
VP Advancement, SPC
Foundation
Executive Director

October 10, 2017

Board of Directors

Beth A. Horner
Chairman

Joseph G. Blanton
R. Michael Carroll
Kenneth P. Cherven

Katherine E. Cole
Stephen O. Cole

Paul Demirdjian

Robert J. Fine, Jr.

Robert L. Hilton

Amy Lockhart

William H. McCloud

Angie McCourt

Steven R. Shepard

Shan Shikarpuri

Richard B. Winning

Dr. Tonjua Williams, Ph.D.
President
St. Petersburg College
PO Box 13489
St. Petersburg, FL 33733

Dear President Williams:

This letter will confirm to you and the SPC Board of Trustees that St. Petersburg College Foundation, Inc., is certified as a community college direct-support organization and is in full compliance with S1004.70 of the Florida Statutes.

This information is provided as required by the Board of Trustees Rule, 6Hx23-1.33.

Directors Emeriti

Helen K. Leslie

Alfred T. May

Henry B. Sayler

Honorary Director

Wendell R. Ware

P.O. Box 13489
St. Petersburg, Florida
33733-3489

Office 727-341-3302
Fax 727-341-3123

spcollegefoundation.org

Sincerely,



Frances Neu
VP Institutional Advancement, St. Petersburg College
Executive Director, SPC Foundation

LRMA

Leepa-Rattner Museum *of Art*
at St. Petersburg College



August 17, 2016

President William D. Law, Jr.
St. Petersburg College
P.O. Box 13489
St. Petersburg, FL 33733

Dear President Law:

This letter certifies to you and the Board of Trustees that the Leepa-Rattner Museum of Art, Inc., a community college direct support organization, is in full compliance with S1004.70, Florida Statutes.

This information is provided as required by the Board of Trustees Rule 6Hx23-1.33.

Sincerely,

A handwritten signature in blue ink, appearing to read "Ann Larsen", with a long, sweeping underline that extends to the right.

Ann Larsen
Museum Director

INSTITUTE FOR STRATEGIC POLICY SOLUTIONS

SPC St. Petersburg
College

727-394-6942

PolicySolutionsInstitute@spcollege.edu

<http://solutions.spcollege.edu>

October 9, 2017

Dr. Tonjua Williams, President
St. Petersburg College
P.O. Box 13489
St. Petersburg, FL 33733

Dear President Williams,

This letter will certify to you and the Board of Trustees that the Institute for Strategic Policy Solutions, certified as a community college direct-support organization, is in full compliance with S1004.70, Florida Statutes.

This information is provided as required by the Board of Trustees Rule 6Hx23-1.33.

Sincerely,



DAVID E. KLEMENT

Executive Director

Institute for Strategic Policy Solutions

St. Petersburg College

Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
 ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the **2016** calendar year, or tax year beginning Apr 1, 2016, and ending Mar 31, 2017

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization Institute for Strategic Policy Solutions, Inc.
 Doing business as _____
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
P.O. Box 13489
 City or town, state or province, country, and ZIP or foreign postal code
Saint Petersburg FL 33733

D Employer identification number 45-3194848
E Telephone number (727) 319-7087
G Gross receipts \$ 329,515.

F Name and address of principal officer:
David E. Klement P.O. Box 13489 St. Petersburg FL 33733

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If 'No,' attach a list. (see instructions)

I Tax-exempt status 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: ▶ www.solutions.spcollege.edu **H(c)** Group exemption number ▶ _____

K Form of organization: Corporation Trust Association Other ▶ _____ **L** Year of formation: 2011 **M** State of legal domicile: FL

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>The Institute was formed for purposes of educational and civic engagement and excellence through its operations and activities by providing students faculty, college employees, and the community at large, a forum and center for learning and scholarly public discourse on key civic matters which may be local, regional, national, or international in scope and impact.</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	8
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	7
	5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	0
	6 Total number of volunteers (estimate if necessary)	6	2
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	347,892.	322,785.
	9 Program service revenue (Part VIII, line 2g)	6,588.	6,720.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		10.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	12 Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)	354,480.	329,515.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
14 Benefits paid to or for members (Part IX, column (A), line 4)			
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		236,087.	241,507.
16a Professional fundraising fees (Part IX, column (A), line 11e)			
b Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>26,631.</u>			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		80,322.	84,700.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		316,409.	326,207.
19 Revenue less expenses. Subtract line 18 from line 12	38,071.	3,308.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	112,571.	118,440.
	21 Total liabilities (Part X, line 26)	1,548.	4,109.
	22 Net assets or fund balances. Subtract line 21 from line 20	111,023.	114,331.

Part II Signature Block

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.

Sign Here Signature of officer _____ Date 09/05/17
 ▶ David E Klement Executive Director
 Type or print name and title

Paid Preparer Use Only Print/Type preparer's name Ellen Fontana Preparer's signature [Signature] Date 9/5/17 Check if self-employed PTIN P01327163
 Firm's name ▶ Ellen Fontana CPA, LLC
 Firm's address ▶ 2471 N MCMULLEN BOOTH RD #308
Clearwater FL 33759 Firm's EIN ▶ 45-3841539
 Phone no. (727) 431-0354

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

The Institute was formed for purposes of educational and civic engagement and excellence through its operations and activities by providing students See Form 990, Page 2, Part III, Line 1 (continued)

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If 'Yes,' describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If 'Yes,' describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 178,107. including grants of \$ 0.) (Revenue \$ 6,720.)

The Institute's 2016-17 calendar was comprised of three types of programs: Speaker/Forum Series, Dinner Series, and Partnerships/Annual Events. Under these headings a total of 18 programs were presented, attracting a total audience of 2,300, including 314 students. This is a 10.3 percent increase over the previous year. Because 2016 was a presidential election year, many of the summer and fall programs were themed on the campaign and elections, giving students and the public multiple opportunities to learn about the issues and candidates on which they would be voting in November. The program offerings, by heading: Speaker/Forum Series: There were three programs under this heading this fiscal year. One focused on the four proposed amendments to the Florida Constitution on the fall ballot, with pro-con debates of each. A second addressed the false and mis-labeling of food at farmers markets, on restaurant menus, See Form 990, Page 2, Part III, Line 4a (continued)

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 178,107.

Part IV Checklist of Required Schedules

	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	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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		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		X
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		X
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		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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III		X
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		X
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		X
11 If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI		X
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		X
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		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	X	
e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X		X
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	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	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		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV		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		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		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)		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		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If 'Yes,' complete Schedule H</i>		X
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If 'Yes,' complete Schedule I, Parts I and II</i>		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? <i>If 'Yes,' complete Schedule I, Parts I and III</i>		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? <i>If 'Yes,' complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If 'Yes,' complete Schedule L, Part I</i>		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? <i>If 'Yes,' complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If 'Yes,' complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>		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? <i>If 'Yes,' complete Schedule R, Part VI</i>		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	X	

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Form 990 (2016)

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for line numbers (1a-14b), descriptions of questions, and Yes/No columns. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited transactions, and deductible contributions.

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

Check if Schedule O contains a response or note to any line in this Part VI. [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year... 1b Enter the number of voting members included in line 1a... 2 Did any officer, director, trustee, or key employee have a family relationship... 3 Did the organization delegate control over management duties... 4 Did the organization make any significant changes to its governing documents... 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 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? 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? 8b Each committee with authority to act on behalf of the governing body? 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.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? 10b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13. 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done. 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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? 15a The organization's CEO, Executive Director, or top management official. 15b Other officers or key employees of the organization. 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 with a taxable entity during the year? 16b 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?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed Florida
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 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 interest policy, 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 records:
David E. Klement 9200 113th St N, LI 283 St. Petersburg FL 33772 (727) 319-7087

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

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

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

1 a 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 nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Dr. Laurie King Board Member	1.00	X					0.	80,176.	2,424.	
(2) Hon. Irene Sullivan Board Member	1.00	X					0.	0.	0.	
(3) Glen Gilzean, Jr. Board Member	1.00	X					0.	0.	0.	
(4) Jane L. Harper Board Member	1.00	X					0.	0.	0.	
(5) Debra Prewitt Board Member	1.00	X					0.	0.	0.	
(6) Hon. George Greer Chairman	1.00	X		X			0.	0.	0.	
(7) Deborah Kynes Vice Chair	1.00	X		X			0.	0.	0.	
(8) Dr. H. William Heller Treasurer	1.00	X		X			0.	0.	0.	
(9) David Klement Secretary/Exec. Director	40.00	X		X			0.	85,014.	5,242.	
(10)										
(11)										
(12)										
(13)										
(14)										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(15) -----	-----								
(16) -----	-----								
(17) -----	-----								
(18) -----	-----								
(19) -----	-----								
(20) -----	-----								
(21) -----	-----								
(22) -----	-----								
(23) -----	-----								
(24) -----	-----								
(25) -----	-----								

1 b Sub-total 0. 165,190. 7,666.

c Total from continuation sheets to Part VII, Section A

d Total (add lines 1b and 1c) 0. 165,190. 7,666.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 0

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If 'Yes,' complete Schedule J for such individual</i>	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If 'Yes,' complete Schedule J for such individual</i>	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If 'Yes,' complete Schedule J for such person</i>	5	X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 0

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1 a				
	b Membership dues	1 b				
	c Fundraising events	1 c				
	d Related organizations	1 d				
	e Government grants (contributions) . .	1 e 314,150.				
	f All other contributions, gifts, grants, and similar amounts not included above . .	1 f 8,635.				
	g Noncash contributions included in lines 1a-1f: \$	262.				
	h Total. Add lines 1a-1f ▶		322,785.			
Program Service Revenue	2 a <u>Dinner series</u>	Business Code 900099	6,720.	6,720.	0.	0.
	b					
	c					
	d					
	e					
	f All other program service revenue . . .					
	g Total. Add lines 2a-2f ▶		6,720.			
Other Revenue	3 Investment income (including dividends, interest and other similar amounts) ▶		10.	0.	0.	10.
	4 Income from investment of tax-exempt bond proceeds . . ▶					
	5 Royalties ▶					
	6 a Gross rents	(i) Real				
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss) . .				
	d Net rental income or (loss) ▶					
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less: cost or other basis and sales expenses . . .				
		c Gain or (loss)				
	d Net gain or (loss) ▶					
	8 a Gross income from fundraising events (not including . . \$ _____ of contributions reported on line 1c). See Part IV, line 18.	a				
		b Less: direct expenses	b			
c Net income or (loss) from fundraising events ▶						
9 a Gross income from gaming activities. See Part IV, line 19.	a					
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities ▶					
10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory ▶					
11 a Miscellaneous Revenue	Business Code					
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d ▶					
12 Total revenue. See instructions ▶		329,515.	6,720.	0.	10.	

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).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.				
2 Grants and other assistance to domestic individuals. See Part IV, line 22.				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees	89,746.	35,898.	44,873.	8,975.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7 Other salaries and wages.	94,772.	46,406.	37,255.	11,111.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	13,578.	5,958.	6,123.	1,497.
9 Other employee benefits	30,066.	13,343.	13,670.	3,053.
10 Payroll taxes	13,345.	5,866.	6,010.	1,469.
11 Fees for services (non-employees):				
a Management				
b Legal.				
c Accounting	12,600.	0.	12,600.	0.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	15,418.	15,418.	0.	0.
12 Advertising and promotion	12,906.	12,906.	0.	0.
13 Office expenses	768.	0.	768.	0.
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	5,864.	5,764.	0.	100.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
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.)				
a <u>Printing</u>	1,251.	1,251.	0.	0.
b <u>Memberships</u>	5.	5.	0.	0.
c <u>Dues & licenses</u>	270.	0.	70.	200.
d <u>Bank fees</u>	160.	85.	75.	0.
e All other expenses	35,458.	35,207.	25.	226.
25 Total functional expenses. Add lines 1 through 24e.	326,207.	178,107.	121,469.	26,631.
26 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 <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720).	0.	0.	0.	0.

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash — non-interest-bearing	20,000.	1	19,900.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	1,440.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10 a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10 a		
	b Less: accumulated depreciation	10 b		10 c
	11 Investments — publicly traded securities		11	
	12 Investments — other securities. See Part IV, line 11		12	
	13 Investments — program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		92,571.	15
16 Total assets. Add lines 1 through 15 (must equal line 34)		112,571.	16	118,440.
Liabilities	17 Accounts payable and accrued expenses	48.	17	4,109.
	18 Grants payable		18	
	19 Deferred revenue	1,500.	19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25		1,548.	26
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	111,023.	27	114,331.
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	111,023.	33	114,331.	
34 Total liabilities and net assets/fund balances	112,571.	34	118,440.	

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Form 990 (2016)

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	329,515.
2	Total expenses (must equal Part IX, column (A), line 25)	2	326,207.
3	Revenue less expenses. Subtract line 2 from line 1	3	3,308.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	111,023.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	114,331.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.		
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2 b	Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2 c	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3 b	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

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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.

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

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization <u>Institute for Strategic Policy Solutions, Inc.</u>	Employer identification number <u>45-3194848</u>
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Part I 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.)

- 1 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: _____
- 5 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.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 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.)
- 9 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: _____
- 10 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 exempt 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)**. (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.
 - a **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.**
 - 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.**
 - 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.**
 - d **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.**
 - e 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.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar 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.')	189,241.	276,468.	343,030.	347,892.	322,785.	1,479,416.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge.						
4 Total. Add lines 1 through 3	189,241.	276,468.	343,030.	347,892.	322,785.	1,479,416.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						1,479,416.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	189,241.	276,468.	343,030.	347,892.	322,785.	1,479,416.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					10.	10.
9 Net income from unrelated business activities, whether or not the business is regularly carried on		6,450.				6,450.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		3.				3.
11 Total support. Add lines 7 through 10						1,485,879.
12 Gross receipts from related activities, etc. (see instructions).					12	74,451.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	99.57 %
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	%
16a 33-1/3% support test—2016. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>		
b 33-1/3% support test—2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 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 ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 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 ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

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.)

Section A. Public Support

Calendar 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.')						
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						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge.						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b 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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a 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 acquired after June 30, 1975						
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 loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15.	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%

19a 33-1/3% support tests—2016. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33-1/3% support tests—2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.

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 Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If 'Yes,' answer (b) and (c) below.</i>		
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)? <i>If 'Yes,' describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ('foreign supported organization')? <i>If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
c 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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
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? <i>If 'Yes,' provide detail in Part VI.</i>		
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? <i>If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If 'Yes,' provide detail in Part VI.</i>		
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? <i>If 'Yes,' provide detail in Part VI.</i>		
c 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? <i>If 'Yes,' provide detail in Part VI.</i>		
10a 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)? <i>If 'Yes,' answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? <i>If 'Yes' to a, b, or c, provide detail in Part VI.</i>	11c	

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>	1	
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>	2	

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>	1	

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>	2	
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard.</i>	3	

Section E. Type III Functionally Integrated Supporting Organizations

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
 - a** The organization satisfied the Activities Test. Complete **line 2** below.
 - b** The organization is the parent of each of its supported organizations. Complete **line 3** below.
 - c** The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions).

2 Activities Test. Answer (a) and (b) below.

	Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	2a	
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>	2b	
3 Parent of Supported Organizations. Answer (a) and (b) below. <ol style="list-style-type: none"> a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i> b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If 'Yes,' describe in Part VI the role played by the organization in this regard.</i> 	3a	
	3b	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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	
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 instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1 a	
b	Average monthly cash balances	1 b	
c	Fair market value of other non-exempt-use assets	1 c	
d	Total (add lines 1a, 1b, and 1c)	1 d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
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	
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	
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 integrated Type III supporting organization (see instructions).

BAA

Schedule A (Form 990 or 990-EZ) 2016

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D – Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
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 responsive (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			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required – explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c 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.			
8 Breakdown of line 7:			
a			
b Excess from 2013			
c Excess from 2014			
d Excess from 2015			
e Excess from 2016			

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**
▶ **Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.**

OMB No. 1545-0047

2016

Name of the organization

Employer identification number

Institute for Strategic Policy Solutions, Inc.

45-3194848

Organization type (check one):

Filers of:

Form 990 or 990-EZ

Section:

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer 'No' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization <u>Institute for Strategic Policy Solutions, Inc.</u>	Employer identification number <u>45-3194848</u>
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<u>St. Petersburg College Foundation</u> <u>P.O. Box 13489</u> <u>Saint Petersburg FL 33733</u>	\$ <u>314,150.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
---	-----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
---	-----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
---	-----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
---	-----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
---	-----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2016

Department of the Treasury Internal Revenue Service

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.

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

Open to Public Inspection

Name of the organization

Employer identification number

Institute for Strategic Policy Solutions, Inc.

45-3194848

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number of funds, aggregate values, and yes/no questions about donor notification.

Part II Conservation Easements.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, total number of easements, and monitoring details.

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include reporting requirements for art and historical treasures.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1 a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If 'Yes,' explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---|------------|
| c Beginning balance | 1 c |
| d Additions during the year | 1 d |
| e Distributions during the year | 1 e |
| f Ending balance | 1 f |
- 2 a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment ▶ _____ %
 - b Permanent endowment ▶ _____ %
 - c Temporarily restricted endowment ▶ _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---------------------------------------|---------------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
- b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R? **3b**
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶				

Part VII Investments – Other Securities.
 Complete if the organization answered 'Yes' on Form 990, 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) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
(I) _____		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) . . ▶		

Part VIII Investments – Program Related.
 Complete if the organization answered 'Yes' on Form 990, 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) _____		
(2) _____		
(3) _____		
(4) _____		
(5) _____		
(6) _____		
(7) _____		
(8) _____		
(9) _____		
(10) _____		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) . . ▶		

Part IX Other Assets.
 Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) Due from St. Petersburg College	97,100.
(2) _____	
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
(10) _____	
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.) ▶	97,100.

Part X Other Liabilities.
 Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) _____	
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
(10) _____	
(11) _____	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) . . . ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	391,644.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2 a		
	b Donated services and use of facilities	2 b	62,129.	
	c Recoveries of prior year grants	2 c		
	d Other (Describe in Part XIII.)	2 d		
	e Add lines 2 a through 2 d		2 e	62,129.
3	Subtract line 2 e from line 1		3	329,515.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b.	4 a		
	b Other (Describe in Part XIII.)	4 b		
	c Add lines 4 a and 4 b		4 c	
5	Total revenue. Add lines 3 and 4 c . (This must equal Form 990, Part I, line 12.)		5	329,515.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements.		1	388,336.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2 a	62,129.	
	b Prior year adjustments	2 b		
	c Other losses	2 c		
	d Other (Describe in Part XIII.)	2 d		
	e Add lines 2 a through 2 d		2 e	62,129.
3	Subtract line 2 e from line 1		3	326,207.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b.	4 a		
	b Other (Describe in Part XIII.)	4 b		
	c Add lines 4 a and 4 b		4 c	
5	Total expenses. Add lines 3 and 4 c . (This must equal Form 990, Part I, line 18.)		5	326,207.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Pt X, Line 2 The Institute is an organization exempt from taxation
Pt X, Line 2 under Section 501(c)(3) of the Internal Revenue Code and
Pt X, Line 2 is generally not subject to federal or state income
Pt X, Line 2 taxes. However, the Institute is subject to income taxes
Pt X, Line 2 on any net income that is derived from a trade of
Pt X, Line 2 business, regularly carried on, and not in furtherance
Pt X, Line 2 of the purpose for which the Institute is granted
Pt X, Line 2 exemption. No income tax provision has been recorded as
Pt X, Line 2 the net income, if any, from any unrelated trade or
Pt X, Line 2 business, in the opinion of management, is not material
Pt X, Line 2 to the basic financial statements taken as a whole.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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**

Name of the organization

Institute for Strategic Policy Solutions, Inc.

Employer identification number

45-3194848

Other Part V Line 2a & 2b - The Organization's payroll
Other is reported under a related organization, St. Petersburg
Other College.
Pt VI, Line 11b Form 990 emailed to the Board for review prior to
Pt VI, Line 11b filing.
Pt VI, Line 12c College Financial and Legal Department monitors all
Pt VI, Line 12c financial records. The Executive Director monitors all
Pt VI, Line 12c employees.
Pt VI, Line 15a Compensation for the Executive Director is based on the
Pt VI, Line 15a classification and salary schedule which includes ranges
Pt VI, Line 15a for each pay grade.
Pt VI, Line 15b Compensation for employees is based on the classification
Pt VI, Line 15b and salary schedule which includes ranges for each pay
Pt VI, Line 15b grade.
Pt VI, Line 19 The governing documents, conflict of interest, and
Pt VI, Line 19 financial statements are available upon request.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

- ▶ Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
 - ▶ Attach to Form 990.
- ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization

Institute for Strategic Policy Solutions, Inc.

Employer identification number

45-3194848

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) _____ _____ _____					
(2) _____ _____ _____					
(3) _____ _____ _____					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Sec 512(b)(13) controlled entity?	
						Yes	No
(1) <u>St. Petersburg College Foundation</u> <u>P.O. Box 13489</u> <u>St. Petersburg, FL 33733</u> <u>59-1954362</u>	Scholar.	FL	501c3	7	N/A		X
(2) <u>St. Petersburg College</u> <u>P.O. Box 13489</u> <u>St. Petersburg, FL 33733</u> <u>59-1211489</u>	College	FL	501c3	5	N/A		X
(3) _____ _____ _____							
(4) _____ _____ _____							

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) ----- ----- -----												
(2) ----- ----- -----												
(3) ----- ----- -----												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Sec 512(b)(13) controlled entity?	
								Yes	No
(1) ----- ----- -----									
(2) ----- ----- -----									
(3) ----- ----- -----									

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)

- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)

- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)

- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses

- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

	Yes	No
1 a		X
1 b		X
1 c	X	
1 d		X
1 e		X
1 f		X
1 g		X
1 h		X
1 i		X
1 j		X
1 k		X
1 l		X
1 m		X
1 n	X	
1 o	X	
1 p	X	
1 q		X
1 r		X
1 s		X

2 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.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) St. Petersburg College Foundation	c	314,150.	cash
(2) St. Petersburg College	o	241,507.	cash
(3) St. Petersburg College	p	309,621.	cash
(4)			
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1) ----- ----- -----													
(2) ----- ----- -----													
(3) ----- ----- -----													
(4) ----- ----- -----													
(5) ----- ----- -----													
(6) ----- ----- -----													
(7) ----- ----- -----													
(8) ----- ----- -----													

Part VII **Supplemental Information.**

Provide additional information for responses to questions on Schedule R. See instructions.

Schedule O (Form 990), Supplemental Information to Form 990
Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

faculty, college employees, and the community at large, a forum and center for learning and scholarly public discourse on key civic matters which may be local, regional, national, or international in scope and impact.

Schedule O (Form 990), Supplemental Information to Form 990
Form 990, Page 2, Part III, Line 4a (continued)

and on food packaging labels, featuring a guest speaker from the Chef Action Network, Katherine Miller, along with a panel of local experts. The third featuring guest speaker Peter Kageyama and guest artist Derek Donnelly delved into the influence of art on politics.

Dinner Series: We staged three programs in the Dinner Series, each with a guest speaker backed up by a panel discussion. The first featured PBS talk-show host Alexander Heffner, speaking on Politics, Media and the Future of Civil Discourse. In addition to speaking at dinner, Heffner addressed a separate student gathering to discuss ramifications of the presidential election campaign. The debate over limitations on free speech, especially on college campuses, was the focus of the second Dinner Series event. A guest speaker from the Individual Rights Defense Fund outlined the problem of speech censorship and joined a panel of local experts in discussing the issue from a constitutional and societal perspective. The third Dinner Series program featured researcher and author Robert Jones, who discussed the highlights of his book, The End of White Christian America.

Partnerships/Annual Events: We staged or co-sponsored a number of candidate debates for local political offices, including Pinellas School Board, U.S. House District 13, Pinellas County Commission, Florida House and Florida Senate. We continued to develop our ongoing projects, the Age-Friendly St. Petersburg initiative with partners AARP Florida and Area Agency on Aging Pinellas-Pasco, as well as the Sea Level Rise Collaborative. For Age-Friendly, we staged a Listening Session and a Collaborative Labs workshop for stakeholders in the social service field serving older residents. For the Sea Level Rise Collaborative, we staged a public forum on water resources and co-sponsored the annual conference of the Florida Association for Insurance Reform.

We co-sponsored and co-presented the Caregivers Conference for the third year in a row, and hosted the Pinellas Economic Leadership Symposium and the Juvenile Welfare Board's annual Children's Summit. An important student-only even in cooperation with Student Government Association leaders at five campuses was the Great Debate competition, which we presented and hosted for the fourth year in a row. We also opened a new partnership with the OPEN organization at the University of South Florida St. Petersburg to present a guest lecture by Hedrick Smith, Pulitzer Prize-winning retired journalist and author, who spoke on the Populist Revolution represented by President Donald Trump. For another on-going initiative, the Project on Accountable Justice, we hosted and staged a public forum on arrest and sentencing reform proposals under consideration by the Legislature.

Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ
Form 990, Page 10, Line 24e All Other Expenses (continued)

Description	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
Food & food products	12,830.	12,644.	0.	186.
Material & Supplies	2,235.	2,235.	0.	0.
Miscellaneous	65.	65.	0.	0.
Education subscriptions	25.	0.	25.	0.
Other services	6,960.	6,960.	0.	0.
Honoraria fees	13,303.	13,303.	0.	0.
Staff training	40.	0.	0.	40.

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2016, or fiscal year beginning Apr 1, 2016, and ending Mar 31, 20 2017

▶ Do not send to the IRS. Keep for your records.

▶ Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.

2016

Department of the Treasury
Internal Revenue Service

Name and title of officer

Employer identification number

Institute for Strategic Policy Solutions, Inc.

45-3194848

David E Klement

Executive Director

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

1 a Form 990 check here . . . ▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1 b	<u>329,515.</u>
2 a Form 990-EZ check here . . . ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2 b	_____
3 a Form 1120-POL check here . . . ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3 b	_____
4 a Form 990-PF check here . . . ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4 b	_____
5 a Form 8868 check here . . . ▶ <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5 b	_____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2016 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize Ellen Fontana CPA, LLC to enter my PIN 94848 as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2016 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2016 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature David E. Klement Date 9/5/17

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN 50917409174
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2016 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature E Fontana Date 9/5/17

**ERO Must Retain This Form — See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So**

BAA For Paperwork Reduction Act Notice, see instructions.

Form 8879-EO (2016)

Form **8879-EO**

**IRS e-file Signature Authorization
for an Exempt Organization**

OMB No. 1545-1878

For calendar year 2016, or fiscal year beginning 4/01, 2016, and ending 3/31, 20 17

▶ Do not send to the IRS. Keep for your records.

▶ Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.

2016

Department of the Treasury
Internal Revenue Service

Name of exempt organization

The Leepa-Rattner Museum of Art Inc

Employer identification number

59-3733512

Name and title of officer

**Ann Larsen
Museum Director**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

1a	Form 990 check here	<input checked="" type="checkbox"/>	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	264,106
2a	Form 990-EZ check here	<input type="checkbox"/>	b	Total revenue, if any (Form 990-EZ, line 9)	2b	
3a	Form 1120-POL check here	<input type="checkbox"/>	b	Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here	<input type="checkbox"/>	b	Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a	Form 8868 check here	<input type="checkbox"/>	b	Balance Due (Form 8868, line 3c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2016 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize Gregory, Sharer & Stuart, PA to enter my PIN 59373 as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2016 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2016 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶

Date ▶

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

59551059551

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2016 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶

B. C. S.

Date ▶

8-28-17

ERO Must Retain This Form — See Instructions

Do Not Submit This Form To the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2016)

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016
Open to Public Inspection

A For the 2016 calendar year, or tax year beginning **04/01/16**, and ending **03/31/17**

<p>B Check if applicable:</p> <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<p>C Name of organization The Leepa-Rattner Museum of Art Inc</p> <p>Doing business as</p> <p>Number and street (or P.O. box if mail is not delivered to street address) Room/suite P.O. Box 1545</p> <p>City or town, state or province, country, and ZIP or foreign postal code Tarpon Springs FL 34688</p> <p>F Name and address of principal officer: Ann Larsen P.O. Box 1545 Tarpon Springs FL 34688</p>	<p>D Employer identification number 59-3733512</p> <p>E Telephone number 727-712-5203</p> <p>G Gross receipts \$ 279,257</p> <p>H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)</p> <p>H(c) Group exemption number ▶</p>
<p>I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</p>		
<p>J Website: ▶ www.leeparattner.org</p>		
<p>K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</p>		<p>L Year of formation: 2001 M State of legal domicile: FL</p>

Part I Summary

Activities & Governance	<p>1 Briefly describe the organization's mission or most significant activities: The museum strives to engage and inspire our diverse community by providing opportunities for education, enlightenment, interpretation and research to students, scholars and visitors.</p> <p>2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.</p> <p>3 Number of voting members of the governing body (Part VI, line 1a) 3 17</p> <p>4 Number of independent voting members of the governing body (Part VI, line 1b) 4 15</p> <p>5 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 13</p> <p>6 Total number of volunteers (estimate if necessary) 6 70</p> <p>7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 966</p> <p>b Net unrelated business taxable income from Form 990-T, line 34 7b 0</p>																									
Revenue	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: right;">Prior Year</th> <th style="text-align: right;">Current Year</th> </tr> </thead> <tbody> <tr> <td>8 Contributions and grants (Part VIII, line 1h)</td> <td style="text-align: right;">364,859</td> <td style="text-align: right;">238,612</td> </tr> <tr> <td>9 Program service revenue (Part VIII, line 2g)</td> <td style="text-align: right;">18,571</td> <td style="text-align: right;">19,598</td> </tr> <tr> <td>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td> <td style="text-align: right;">4,086</td> <td style="text-align: right;">8,491</td> </tr> <tr> <td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td> <td style="text-align: right;">-39,261</td> <td style="text-align: right;">-2,595</td> </tr> <tr> <td>12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td> <td style="text-align: right;">348,255</td> <td style="text-align: right;">264,106</td> </tr> </tbody> </table>		Prior Year	Current Year	8 Contributions and grants (Part VIII, line 1h)	364,859	238,612	9 Program service revenue (Part VIII, line 2g)	18,571	19,598	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,086	8,491	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-39,261	-2,595	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	348,255	264,106							
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Part II Signature Block

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.

Sign Here	<p>Signature of officer Ann Larsen</p> <p>Type or print name and title Museum Director</p>	<p>Date</p>
Paid Preparer Use Only	<p>Print/Type preparer's name Byron C. Smith, CPA</p> <p>Firm's name ▶ Gregory, Sharer & Stuart, PA</p> <p>Firm's address ▶ 100 2nd Ave South Ste 600 Saint Petersburg, FL 33701-4336</p>	<p>Preparer's signature Byron C Smith</p> <p>Date 8-28-17</p> <p>Check <input type="checkbox"/> if PTIN self-employed</p> <p>Firm's EIN ▶</p> <p>Phone no. 727-821-6161</p>

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

See Schedule O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **155,327** including grants of \$ **110,000**) (Revenue \$ **20,788**)

Utilize the museum to enhance the education, educational enjoyment and aesthetic experience of members of the local community, its students and "all who pass through its doors." Approximately 10,715 visitors enjoyed the museum's exhibitions and related programs during fiscal year 2016-17. This included specially-scheduled tours of the museum provided by experienced docents and staff for 1,725 adults, 826 school children (K-12) and 1,149 college students. (Continued on Schedule O)

4b (Code:) (Expenses \$ **58,933** including grants of \$) (Revenue \$)

The museum collects, preserves and displays works of artistic merit that reflect the influences and cultural concerns of Abraham Rattner, Esther Gentle, Allen Leepa and other related artists of the 20th and 21st century. Changing exhibitions provide opportunities for the public to view and learn from a variety of recent and living artists working in a broad variety of artistic media.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **214,260**

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		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? <i>If "Yes," complete Schedule C, Part II</i>		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part I</i>		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? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	X	
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>		X
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? <i>If "Yes," complete Schedule D, Part VII</i>	X	
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? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
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)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		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? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)		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? <i>If "Yes," complete Schedule G, Part II</i>	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

		Yes	No
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>		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? <i>If "Yes," complete Schedule J</i>	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part I</i>		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	X	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1</i>	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		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.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1a	2		
1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2a	13		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	X	
4a	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)?		X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

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

Section 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 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.		
1b	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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		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?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
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.		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	X	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		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?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **FL**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **Cristina McCormack 600 E Klosterman Road FL 34688 727-712-5203 Tarpon Springs**

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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 nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Jonathan Steele	1.00									
Director	40.00	X					0	122,272	25,180	
(2) Vonda Woods	3.00									
Treasurer	40.00	X		X			0	86,887	12,997	
(3) Gary Zino	1.00									
Vice Chair	0.00	X					0	0	0	
(4) Ralph Melick	1.00									
Director	0.00	X					0	0	0	
(5) William Schumacher	1.00									
Director	0.00	X					0	0	0	
(6) Edward C Hoffman, Jr	1.00									
Director	0.00	X					0	0	0	
(7) Maria Edmonds	1.00									
Director	0.00	X					0	0	0	
(8) Mary Mitchell Avery	1.00									
Director	0.00	X					0	0	0	
(9) Marleen Gravitz	1.00									
Director	0.00	X					0	0	0	
(10) Taylor Ikin	1.00									
Director	0.00	X					0	0	0	
(11) Anna Billiris	1.00									
Director	0.00	X					0	0	0	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) Destry Fudge Director	1.00 0.00	X						0	0	0
(13) Housh Ghovaei Director	1.00 0.00	X						0	0	0
(14) Bill Heyser Director	1.00 0.00	X						0	0	0
(15) Lauralee Westine Director	1.00 0.00	X						0	0	0
(16) Jason Dunkel Director	1.00 0.00	X						0	0	0
(17) Dr Clifford M. Brock Director	1.00 0.00	X						0	0	0
(18) Marvin Bright Provost	6.00 40.00			X				0	131,967	38,619
(19) Ann Larsen Museum Director	40.00 0.00			X				79,204	0	12,391
1b Sub-total								79,204	341,126	89,187
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								79,204	341,126	89,187

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b	26,575				
	c Fundraising events	1c	24,739				
	d Related organizations	1d	133,623				
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	53,675				
	g Noncash contributions included in lines 1a-1f: \$		26,873				
	h Total. Add lines 1a-1f		238,612				
	Program Service Revenue	2a Admission Fees	Busn. Code 711130	17,070	17,070		
b Program Service Fees		711130	2,528	2,528			
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f			19,598				
Other Revenue		3 Investment income (including dividends, interest, and other similar amounts)		8,491			8,491
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
	b Less: rental exps.						
	c Rental inc. or (loss)						
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis & sales exps.						
	c Gain or (loss)						
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including \$ 24,739 of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses		6,103			
c Net income or (loss) from fundraising events			-6,103				
9a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses						
	c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	a		11,366				
	b Less: cost of goods sold		9,048				
	c Net income or (loss) from sales of inventory		2,318		966	1,352	
Miscellaneous Revenue		Busn. Code					
11a Other Revenue			1,190	1,190			
b							
c							
d All other revenue							
e Total. Add lines 11a-11d			1,190				
12 Total revenue. See instructions.			264,106	20,788	966	9,843	

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).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	110,000	110,000		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	14,680		14,680	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	4,267	4,267		
13 Office expenses	788	788		
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,464	1,464		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	15,617	10,932	4,685	
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.)				
a Personnel Services	46,532	36,184	10,348	
b Supplies	26,873	26,873		
c Museum Education	9,565	9,565		
d Materials	6,744	6,744		
e All other expenses	7,443	7,443		
25 Total functional expenses. Add lines 1 through 24e	243,973	214,260	29,713	0
26 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest bearing	61,135	1	74,341
	2	Savings and temporary cash investments	125,185	2	157,633
	3	Pledges and grants receivable, net	48,095	3	26,740
	4	Accounts receivable, net	1,811	4	4,260
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	7,888	8	3,182
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
		10a			
	b	Less: accumulated depreciation		10c	
		10b			
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11	254,710	12	259,145
	13	Investments—program-related. See Part IV, line 11		13	
14	Intangible assets		14		
15	Other assets. See Part IV, line 11	17,500	15	17,500	
16	Total assets. Add lines 1 through 15 (must equal line 34)	516,324	16	542,801	
Liabilities	17	Accounts payable and accrued expenses	2,297	17	19
	18	Grants payable		18	
	19	Deferred revenue	10,560	19	19,182
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	12,857	26	19,201
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	394,021	27	441,298
	28	Temporarily restricted net assets	109,446	28	82,302
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	503,467	33	523,600	
34	Total liabilities and net assets/fund balances	516,324	34	542,801	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	264,106
2	Total expenses (must equal Part IX, column (A), line 25)	2	243,973
3	Revenue less expenses. Subtract line 2 from line 1	3	20,133
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	503,467
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	523,600

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

2016

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 or Form 990-EZ.**

Open to Public Inspection

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

Name of the organization

The Leepa-Rattner Museum of Art Inc

Employer identification number

59-3733512

Part I 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.)

- 1 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:
- 5 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.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 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.)
- 9 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:
- 10 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 exempt 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)**. (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.
 - a **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.**
 - 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.**
 - 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.**
 - d **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.**
 - e 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.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Table with 7 columns: (a) 2012, (b) 2013, (c) 2014, (d) 2015, (e) 2016, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2012, (b) 2013, (c) 2014, (d) 2015, (e) 2016, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10.

12 Gross receipts from related activities, etc. (see instructions) 12
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2016; 15 Public support percentage from 2015 Schedule A, Part II, line 14; 16a 33 1/3% support test—2016; 16b 33 1/3% support test—2015; 17a 10%-facts-and-circumstances test—2016; 17b 10%-facts-and-circumstances test—2015; 18 Private foundation.

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.)

Section A. Public Support

Calendar 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.")	165,200	180,754	851,285	364,859	316,112	1,878,210
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	40,493	33,079	16,516	18,990	20,490	129,568
3 Gross receipts from activities that are not an unrelated trade or business under section 513	22,291	920	14,630	11,279	1,411	50,531
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge	632,587	587,330	611,217	557,562	508,308	2,897,004
6 Total. Add lines 1 through 5	860,571	802,083	1,493,648	952,690	846,321	4,955,313
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b 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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						4,955,313

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6	860,571	802,083	1,493,648	952,690	846,321	4,955,313
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	897	3,464	1,291	4,086	8,491	18,229
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	897	3,464	1,291	4,086	8,491	18,229
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 loss from the sale of capital assets (Explain in Part VI.)	990					990
13 Total support. (Add lines 9, 10c, 11, and 12.)	862,458	805,547	1,494,939	956,776	854,812	4,974,532
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	99.61 %
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	99.75 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%

- 19a 33 1/3% support tests—2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- b 33 1/3% support tests—2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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 Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
3b	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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
3c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
4b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
4c	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)? <i>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.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
5b	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?		
5c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
9b	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? <i>If "Yes," provide detail in Part VI.</i>		
9c	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? <i>If "Yes," provide detail in Part VI.</i>		
10a	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)? <i>If "Yes," answer 10b below.</i>		
10b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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	
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 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 factors (explain in detail in Part VI):		
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	
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	
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 integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
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 responsive (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			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required-explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c 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.			
8 Breakdown of line 7:			
a			
b Excess from 2013			
c Excess from 2014			
d Excess from 2015			
e Excess from 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.)

Part III, Line 12 - Other Income Detail

Other Income \$ 990

Supplemental Information

The value of the Museum's collections has been excluded from the Statement of Net Position and artwork gifts are excluded from revenue in the Statement of Revenues, Expenses, and Change in Net Position. Artwork worth \$77,500 was donated to the Organization in the fiscal year ending 3/31/2017. This amount is reported on Schedule A. It is not reported as revenue on the Form 990 and other schedules.

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

2016

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**

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

Name of the organization

Employer identification number

The Leepa-Rattner Museum of Art Inc

59-3733512

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(**3**) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization The Leepa-Rattner Museum of Art Inc	Employer identification number 59-3733512
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Part I Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	St. Petersburg College Foundation P.O. Box 13489 St. Petersburg FL 33733	\$ 110,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	St. Petersburg College P.O. Box 13489 St. Petersburg FL 33733-3489	\$ 23,623	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	Duke Energy Foundation P.O. Box 1007 Charlotte NC 28202	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	Pinellas County Community Foundation 5200 E Bay Drive Suite 202 Clearwater FL 33764	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization The Leepa-Rattner Museum of Art Inc	Employer identification number 59-3733512
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Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	Supplies	\$ 23,623	03/31/17
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization

The Leepa-Rattner Museum of Art Inc

Employer identification number

59-3733512

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 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)?, 9 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.

Table with 2 columns: Description, Amount. Rows include: 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. 1b 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 on 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 on Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other **Education**
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Yes No

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment %
 - b Permanent endowment %
 - c Temporarily restricted endowment %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|-----------------------------|-------------------------------------|-------------------------------------|
| (i) unrelated organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) related organizations | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
- b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? Yes No
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

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

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, 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) Financial derivatives		
(2) Closely-held equity interests		
(3) Other Certificate of Deposit	259,145	Market
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	259,145	

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" on Form 990, 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)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	672,192
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a		
	b Donated services and use of facilities	2b	508,308	
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.)	2d	9,778	
	e Add lines 2a through 2d		2e	518,086
3	Subtract line 2e from line 1		3	154,106
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b	110,000	
	c Add lines 4a and 4b		4c	110,000
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	264,106

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	652,059
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a	508,308	
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.)	2d	9,778	
	e Add lines 2a through 2d		2e	518,086
3	Subtract line 2e from line 1		3	133,973
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b	110,000	
	c Add lines 4a and 4b		4c	110,000
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	243,973

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part III, Line 1a - Terms for Not Reporting Assets Per SFAS 116

The presentation of the collection as not capitalized is the most widely practiced method of presentation for organizations similar to the Museum.

The value of the Museum's collections has been excluded from the Statement of Net Position and artwork gifts are excluded from revenue in the Statement of Revenues, Expenses, and Change in Net Position.

The collections are held in the public trust for exhibition and educational purposes, not for financial gain. Each of the items is catalogued, preserved, and cared for in order to maintain the cultural, aesthetic, and historic value of the collections. Activities verifying the existence and assessing the condition of the collections are periodically performed.

Part XIII Supplemental Information *(continued)***Part III, Line 4 - Collections and Relation to Exempt Purpose**

The Museum promotes educational excellence by collecting, preserving, and displaying works of art that reflect or support the aesthetic concerns of Abraham Rattner, Esther Gentle, Allen Leepa and other artists. The Museum commits to excellence in visual arts education, fosters aesthetic, critical and ethical thinking as a bridge to the future and nurtures interest in 20th century art history.

Core Collection (Leepa-Rattner-Gentle Collection)

The core collection of the Leepa-Rattner Museum of Art, Inc. (Museum) consists of 1,399 objects: paintings, sculptures, works on paper (drawings, watercolors, prints), tapestries and stained glass maquettes, and up to 3,000 inventoried objects (mostly works on paper). This collection is not owned by the Museum, but managed by the Museum through an agreement between the St. Petersburg College, the St. Petersburg College Foundation, Inc. (Foundation), and the Museum.

Secondary Core Collection (Gulf Coast Museum of Art Collection)

The secondary collection of the Museum consists of 275 objects that have been donated to the Museum by the Foundation. Based on the nature of this collection, the Museum has redefined its mission and direction. More than two-thirds of the collection reflects Florida art and southeastern United States fine art crafts amassed between 1995 and 2008.

Part XIII Supplemental Information *(continued)***Donated Art (1,484 Objects) - Listed by Donation Size**

1. St. Petersburg College Foundation, Inc. (245 accessioned objects): Prints created mostly from the 1980s through the 1990s at print workshops in the United States and Canada by a variety of known and lesser known artists gifted to the Museum by the Foundation through a brokered deal with the Eckerd College Foundation.

2. Richard Florsheim Art Fund (182 accessioned objects): Paintings and prints by Chicago artist Richard Florsheim (1916-1979) reflecting a 40-year retrospective of the artist's career.

3. Vladimir Yoffe / Pasco Art Center (46 accessioned objects): Sculptures and ephemera by New York sculptor Vladimir Yoffe (1911-1997) transferred to the Museum from the non-collecting Pasco Art Center.

4. Lothar and Mildred Uhl Collection (436 accessioned objects, including 48 objects in the education collection): Currently reflecting a variety of media, as well as a recent gift of 88 prints by Winslow Homer and 225 prints by Leonard Baskin.

5. Caroline Adams Byrd-Denjoy Collection (131 accessioned objects, including 13 objects in the education collection): A collection of modern and contemporary prints produced in France in a variety of printing techniques.

6. Patricia A. and Thomas J. Lehen Family Art Collection (43 accessioned objects, including 16 in the education collection): An eclectic collection

Part XIII Supplemental Information *(continued)*

of fine art, contemporary craft and ethnographic art, including works by Dale Chihuly.

7. Dorothy Mitchell Collection (34 accessioned objects): Large-format screen-prints created in the 1990s at Berghoff-Cowden Editions in Tampa by seven nationally known artists.

8. Zipkin Family Collection (17 accessioned objects): While not a large collection, the pieces given have greatly enhanced the existing Leepa-Rattner-Gentle collection with the expectation of more objects being gifted.

9. Barbara Witlin Collection (11 accessioned objects): Donation by the widow of Roy Witlin (1923-1997), large reverse-paintings on Plexiglas works.

10. Edna Andrews and Dr. Dietrich Schroer Collection (12 accessioned objects): An alumnus of St. Petersburg College and an art collector, Edna Andrews Schroer and her husband have given European prints.

11. Rita Hayes Scott Collection (13 accessioned objects): Rita Hayes Scott and Robert Russek Scott collection include notable modern and contemporary works falling in several of the museum's collecting areas, including a Kenneth Noland painting, Pablo Picasso ceramic and a Sonia Delaunay tapestry.

12. Other Donations (314 accessioned objects, including 18 in the education collection by 80 individual donors): These works reflect a variety of

Part XIII Supplemental Information (continued)

artists, periods and media in the 20th and 21st century art.

Part V, Line 4 - Intended Uses for Endowment Funds

The Museum has an endowed fund valued at \$2.6 million at 3/31/2017. The Museum is permitted to draw up to 80% of the earnings above the endowment principal balance in accordance with the donor's agreement.

Part XI, Line 2d - Revenue Amounts Included in Financials - Other

Museum store expenses	\$	3,675
Special event expenses	\$	6,103

Part XI, Line 4b - Revenue Amounts Included on Return - Other

Endowment General Support	\$	110,000
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Part XII, Line 2d - Expense Amounts Included in Financials - Other

Museum store expenses	\$	3,675
Special event expenses	\$	6,103

Part XII, Line 4b - Expense Amounts Included on Return - Other

Endowment General Support	\$	110,000
---------------------------	----	---------

Part XIII - Supplemental Financial Information

In-kind contributions are included in contributions in the Statements of Revenues, Expenses, and Change in Net Position. The majority of in-kind contributions are from the College. The remainder of in-kind contributions are from individuals or corporations. Management estimates that the fair value of items donated to the Museum are as follows for the year ended

Part XIII Supplemental Information *(continued)*

March 31, 2017:

In-kind operating contributions/expenses from the College

Personnel \$ 459,045

Facilities 49,262

Functional expenses and percentages, including in-kind, are as follows:

Function	Amount	Percentage
Program Services	\$ 467,092	71.63%
Management and General	\$ 173,421	26.60%
Fundraising	\$ 11,546	1.77%

**SCHEDULE G
(Form 990 or 990-EZ)**

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

2016

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of the organization

The Leepa-Rattner Museum of Art Inc

Employer identification number

59-3733512

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total							

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>Stone Crab Fest</u> (event type)	_____ (event type)	<u>None</u> (total number)	(add col. (a) through col. (c))
Revenue	1	Gross receipts	24,739		24,739
	2	Less: Contributions	24,739		24,739
	3	Gross income (line 1 minus line 2)			
Direct Expenses	4	Cash prizes			
	5	Noncash prizes	470		470
	6	Rent/facility costs	800		800
	7	Food and beverages	4,607		4,607
	8	Entertainment			
	9	Other direct expenses	226		226
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Subtract line 10 from line 3, column (d)				-6,103

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Revenue	1	Gross revenue			
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

**SCHEDULE I
(Form 990)**

**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

2016

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization

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

Employer identification number
59-3733512

The Leepa-Rattner Museum of Art Inc

Part I General Information on Grants and Assistance

1 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? Yes No

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

Part II 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.

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 non-cash assistance	(h) Purpose of grant or assistance
(1)	St. Petersburg College PO Box 13489 St. Petersburg FL 33733	59-1211489	501c3	110,000				Endowment-Support
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **1**

3 Enter total number of other organizations listed in the line 1 table

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

Part III 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.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds

The Museum is related to the Foundation as it is also a direct support organization of the College. Within the Foundation is an endowed fund held for the benefit of the Museum valued at \$2.6 million. Earnings on this endowment are paid to Leepa-Rattner Museum of Art by the Foundation in accordance with the Organization's endowment agreement. In turn, these amounts are paid to St. Petersburg College to be held in a restricted cost center to be used by the Museum.

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

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

2016

Open to Public Inspection

The Leepa-Rattner Museum of Art Inc

Employer identification number

59-3733512

Part I Questions Regarding Compensation

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.

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> 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:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- 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:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- 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

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

Schedule J (Form 990) 2016 **The Leepa-Rattner Museum of Art Inc 59-3733512**

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.

	(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	Marvin Bright	(i) 0	(ii) 0	(iii) 0	0	0	0	0
	1 Provost	(i) 131,967	(ii) 0	(iii) 0	29,358	9,261	170,586	0
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								

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.

Part I, Line 3 - Related Org Methods Used for Compensation Explanation
Compensation for the officers of The Leepa-Rattner Museum of Art, Inc. is
based on the St. Petersburg College Classification and Salary Schedule,
which includes ranges for each grade.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2016

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

The Leepa-Rattner Museum of Art Inc

Employer identification number

59-3733512

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art — Works of art	<input checked="" type="checkbox"/>	8		Appraisal
2 Art — Historical treasures				
3 Art — Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities — Publicly traded				
10 Securities — Closely held stock				
11 Securities — Partnership, LLC, or trust interests				
12 Securities — Miscellaneous				
13 Qualified conservation contribution — Historic structures				
14 Qualified conservation contribution — Other				
15 Real estate — Residential				
16 Real estate — Commercial				
17 Real estate — Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (Silent Auction)	<input checked="" type="checkbox"/>	2	470	Fair market value
26 Other ▶ (Supplies)	<input checked="" type="checkbox"/>	1	23,623	Fair market value
27 Other ▶ (Museum Store/Ed)	<input checked="" type="checkbox"/>	32	1,904	Fair market value
28 Other ▶ (Lodging)	<input checked="" type="checkbox"/>	7	876	Fair market value

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		<input checked="" type="checkbox"/>
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	<input checked="" type="checkbox"/>	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		<input checked="" type="checkbox"/>
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Part I, Line 33 - Explanation for Not Reporting Revenue

Line 1: Art - Works of Art:

The value of the Museum's collections has been excluded from the Statement of Net Position and artwork gifts are excluded from revenue in the Statement of Revenues, Expenses, and Change in Net Position. Artwork worth \$77,500 was donated to the Organization in the fiscal year ending 3/31/2017. This amount is reported on Schedule A. It is not reported as revenue on the Form 990 and other schedules.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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**

Name of the organization

The Leepa-Rattner Museum of Art Inc

Employer identification number

59-3733512

Form 990 - Organization's Mission

The mission of the Leepa-Rattner Museum of Art is to collect, conserve exhibit and protect the works of art entrusted to its care and stewardship. Through its exhibitions, programs and expanding collection of 20th and 21st century art, the museum strives to engage and inspire our diverse community by providing opportunities for education, enlightenment, interpretation and research to students, scholars and visitors.

Form 990, Part III, Line 4a - First Accomplishment

(Continued from Page 1)

The museum experience was augmented by a variety of arts education classes and workshops, lectures and gallery talks, music and dance concerts; self-guided art exploration activities; a monthly program for reading and artmaking for youngsters age 4-8. Additionally, two art therapy programs addressed needs of young adults experiencing emotional, physical or mental challenges, as well as college students with disabilities ranging from autism and speech impairment to emotional disabilities and chronic illness.

Form 990, Part V - Additional Information

Lines 2a and 2b:

The Organization's payroll is reported under a related organization, St. Petersburg College. The number of employees reported represents all the organization's employees. St. Petersburg College has filed all required federal employment tax returns.

Name of the organization The Leepa-Rattner Museum of Art Inc	Employer identification number 59-3733512
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Form 990, Part VI - Additional Information

Section B, Line 13:

The procedures regarding standards of conduct, reporting known or suspected improper or fraudulent financial activities and whistleblower protection are available for public inspection upon request.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

A copy of Form 990 is provided to the Board of Directors prior to the quarterly Board of Directors meeting. Finance committee will review and report back any findings or comments to the board before filing the 990.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

The conflict of interest policy is monitored by the Governance Committee of the Board of Directors. Annually, all officers, directors and key employees are required to disclose interests that could give rise to conflicts.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

Compensation for the Director of the Leepa-Rattner Museum of Art, Inc. is based on the Classification and Salary Schedule, which includes ranges for each grade, including this position.

Form 990, Part VI, Line 15b - Compensation Process for Officers

Compensation for key employees of the Leepa-Rattner Museum of Art, Inc. is based on the Classification and Salary Schedule, which includes ranges for each grade, including these positions.

Name of the organization The Leepa-Rattner Museum of Art Inc	Employer identification number 59-3733512
--	---

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

The Museum's governing documents, conflict of interest policy and financial statements are available for public inspection upon request.

Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation

Museum store expenses	\$	3,675
Special event expenses	\$	6,103
Endowment General Support	\$	-110,000
Museum store expenses	\$	-3,675
Special event expenses	\$	-6,103
Endowment General Support	\$	110,000

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

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

Department of the Treasury
Internal Revenue Service

Name of the organization

The Leepa-Rattner Museum of Art Inc

Employer identification number

59-3733512

OMB No. 1545-0047
2016

**Open to Public
Inspection**

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

	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					

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

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
							Yes	No
(1)	St. Petersburg College Foundation P.O. Box 13489 St. Petersburg FL 33733 59-1954362	Scholar	FL	501c3	7	N/A		X
(2)	St. Petersburg College P.O. Box 13489 St. Petersburg FL 33733 59-1211489	College	FL	501c3	5	N/A		X
(3)	Institute for Strategic Policy P.O. Box 13489 St. Petersburg FL 33733 45-3194848	Public Pol	FL	501c3	7	N/A		X
(4)							
(5)							

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

(1)	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate alloc.?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
								Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												

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

(1)	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
									Yes	No
(1)									
(2)									
(3)									
(4)									

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)	X	
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)	X	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses	X	
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 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.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)	St. Petersburg College	b	110,000	Net Endowment Support
(2)	St. Petersburg College Foundation	c	71,566	Cash-Friends of LRMA
(3)	St. Petersburg College Foundation	c	110,000	Cash-Endowment Support
(4)	St. Petersburg College	c		See note
(5)	St. Petersburg College	c	23,623	Materials and supplies
(6)	St. Petersburg College Foundation	m	17,840	.75% of pooled investment

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		<input checked="" type="checkbox"/>
b Gift, grant, or capital contribution to related organization(s)	<input checked="" type="checkbox"/>	
c Gift, grant, or capital contribution from related organization(s)	<input checked="" type="checkbox"/>	
d Loans or loan guarantees to or for related organization(s)	<input checked="" type="checkbox"/>	
e Loans or loan guarantees by related organization(s)	<input checked="" type="checkbox"/>	
f Dividends from related organization(s)		<input checked="" type="checkbox"/>
g Sale of assets to related organization(s)		<input checked="" type="checkbox"/>
h Purchase of assets from related organization(s)		<input checked="" type="checkbox"/>
i Exchange of assets with related organization(s)		<input checked="" type="checkbox"/>
j Lease of facilities, equipment, or other assets to related organization(s)		<input checked="" type="checkbox"/>
k Lease of facilities, equipment, or other assets from related organization(s)		<input checked="" type="checkbox"/>
l Performance of services or membership or fundraising solicitations for related organization(s)		<input checked="" type="checkbox"/>
m Performance of services or membership or fundraising solicitations by related organization(s)	<input checked="" type="checkbox"/>	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	<input checked="" type="checkbox"/>	
o Sharing of paid employees with related organization(s)	<input checked="" type="checkbox"/>	
p Reimbursement paid to related organization(s) for expenses	<input checked="" type="checkbox"/>	
q Reimbursement paid by related organization(s) for expenses		<input checked="" type="checkbox"/>
r Other transfer of cash or property to related organization(s)		<input checked="" type="checkbox"/>
s Other transfer of cash or property from related organization(s)		<input checked="" type="checkbox"/>

2 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.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)	St. Petersburg College	n	49,263	FMV - Rent
(2)	St. Petersburg College	o	459,045	FMV - Salaries
(3)	St. Petersburg College	p	62,149	Actual salaries/insurance
(4)				
(5)				
(6)				

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

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

	(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
					Yes	No			Yes	No		Yes	No	
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														
(11)														

Part VII Supplemental Information

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

Schedule R - Additional Information**Schedule R, Part II, Identification of Related Tax Exempt Organizations:**

The Museum has an endowed fund valued at \$2.6 million at 3/31/2017. The fund is held by the St. Petersburg College Foundation, a related party of the Museum. The Museum is permitted to draw up to 80% of the earnings above the endowment principal balance in accordance with the donor's agreement.

Schedule R, Part V, Line 2, Line 1c - The St. Petersburg College Foundation, Inc. is also related to the Museum, as it is a direct support organization of the College. The St. Petersburg College Foundation has permanently loaned The Leepa-Rattner-Gentle art collection to St. Petersburg College for \$1. The College has loaned the collection to the Museum.

The St. Petersburg College Foundation, Inc. (Foundation), a 501 (c) (3) and direct support organization of St. Petersburg College, provides fundraising staff to solicit and raise contributions on behalf of the Museum. The contributions raised are deposited into a dedicated Museum account at the Foundation. In turn, the Foundation makes a contribution to the Museum for the amount of the raised contributions.

The Foundation raised \$71,566 on behalf of the Organization. The amounts received are included in the financials of the Organization as various receipts of pledges, special events and direct contributions.

Schedule R, Part V, Line 2, Line 1m - The St. Petersburg College

Part VII Supplemental Information

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

Foundation, Inc. charged an investment management fee of .75% of the Museum's pooled investment endowment fund overseen by the Foundation. No direct cash payments were made but rather a fee was taken directly from the pooled fund.

Schedule R, Part V, Line 1n - Transactions with Related Organizations

The organization shares facilities and materials with St. Petersburg College. Although a value has been assigned, no cash reimbursements occurred.

Schedule R, Part V, Line 1o - Transactions with Related Organizations

The organization shares paid employees with St. Petersburg College. Although a value has been assigned, the only cash reimbursement is for some accounting staff and collection manager position salaries.

Form **8868**

Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

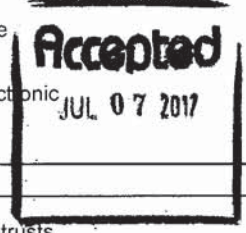
(Rev. January 2017)

► File a separate application for each return.

Department of the Treasury
Internal Revenue Service

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

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.



Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions. The Leepa-Rattner Museum of Art Inc	Employer identification number (EIN) or 59-3733512
	Number, street, and room or suite no. If a P.O. box, see instructions. P.O. Box 1545	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Tarpon Springs FL 34688	

File by the due date for filing your return. See instructions.

Enter the Return Code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

Cristina McCormack
600 E Klosterman Road

• The books are in the care of ► **Tarpon Springs** **FL 34688**

Telephone No. ► **727-712-5203** Fax No. ►

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **02/15/18** , to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- calendar year _____ or
- tax year beginning **04/01/16** , and ending **03/31/17** .

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a	If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0
c	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

325 7-7-17

Filing Instructions

The Leepa-Rattner Museum of Art Inc

Exempt Organization Business Tax Return

Taxable Year Ended March 31, 2017

- Date Due:** February 15, 2018
- Remittance:** None is required. Your Form 990-T for the tax year ended 3/31/17 shows no balance due.
- Mail To:** Department of the Treasury
Internal Revenue Service Center
Ogden, UT 84201-0027
- If a private delivery service is used, mail to:
OSPC
1973 Rulon White Blvd.
Ogden, UT 84201-1000
- Signature:** The return should be signed and dated on Page 2 by an officer representing the organization.
- Other:** Initial and date the copy of the return, and retain it for your records.

Form **990-T**

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No. 1545-0687

2016

For calendar year 2016 or other tax year beginning **04/01/16**, and ending **03/31/17**

▶ Information about Form 990-T and its instructions is available at www.irs.gov/form990t.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for
501(c)(3) Organizations Only

Department of the Treasury
Internal Revenue Service

<p>A <input type="checkbox"/> Check box if address changed</p> <p>B Exempt under section <input checked="" type="checkbox"/> 501(C) (3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)</p> <p>C Book value of all assets at end of year 542,801</p>	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) The Leepa-Rattner Museum of Art Inc</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. P.O. Box 1545</p> <p>City or town, state or province, country, and ZIP or foreign postal code Tarpon Springs FL 34688</p>	<p>D Employer identification number (Employees' trust, see instructions.) 59-3733512</p> <p>E Unrelated business activity codes (See instructions.) 453220</p>
<p>F Group exemption number (See instructions.) ▶</p> <p>G Check organization type ▶ <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust</p>		

H Describe the organization's primary unrelated business activity.
▶ **Museum Store**

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ Yes No
If "Yes," enter the name and identifying number of the parent corporation.
▶

J The books are in care of ▶ **Cristina McCormack** Telephone number ▶ **727-712-5203**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales	6,219			
b Less returns and allowances				
c Balance		6,219		
2 Cost of goods sold (Schedule A, line 7)		5,253		
3 Gross profit. Subtract line 2 from line 1c		966		966
4a Capital gain net income (attach Schedule D)				
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)				
c Capital loss deduction for trusts				
5 Income (loss) from partnerships and S corporations (attach statement)				
6 Rent income (Schedule C)				
7 Unrelated debt-financed income (Schedule E)				
8 Interest, annuities, royalties, and rents from controlled organizations (Schedule F)				
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)				
10 Exploited exempt activity income (Schedule I)				
11 Advertising income (Schedule J)				
12 Other income (See instructions; attach schedule)				
13 Total. Combine lines 3 through 12		966		966

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)				
14 Compensation of officers, directors, and trustees (Schedule K)				
15 Salaries and wages				
16 Repairs and maintenance				
17 Bad debts				
18 Interest (attach schedule)				
19 Taxes and licenses				
20 Charitable contributions (See instructions for limitation rules)				
21 Depreciation (attach Form 4562)		21		
22 Less depreciation claimed on Schedule A and elsewhere on return		22a	22b	0
23 Depletion				
24 Contributions to deferred compensation plans				
25 Employee benefit programs				
26 Excess exempt expenses (Schedule I)				
27 Excess readership costs (Schedule J)				
28 Other deductions (attach schedule)				
29 Total deductions. Add lines 14 through 28				
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13				966
31 Net operating loss deduction (limited to the amount on line 30)				966
32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30				
33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)				1,000
34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32				0

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> See instructions and: a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) \$ _____ (2) \$ _____ (3) \$ _____ b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ _____ (2) Additional 3% tax (not more than \$100,000) \$ _____ c Income tax on the amount on line 34 ▶	35c	
36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041) ▶	36	
37 Proxy tax. See instructions ▶	37	
38 Alternative minimum tax	38	
39 Tax on Non-Compliant Facility Income. See instructions	39	
40 Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies	40	

Part IV Tax and Payments

41a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	41a			
b Other credits (see instructions)	41b			
c General business credit. Attach Form 3800 (see instructions)	41c			
d Credit for prior year minimum tax (attach Form 8801 or 8827)	41d			
e Total credits. Add lines 41a through 41d	41e			
42 Subtract line 41e from line 40	42			
43 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (att. sch.)	43			
44 Total tax. Add lines 42 and 43	44			0
45a Payments: A 2015 overpayment credited to 2016	45a			
b 2016 estimated tax payments	45b			
c Tax deposited with Form 8868	45c			
d Foreign organizations: Tax paid or withheld at source (see instructions)	45d			
e Backup withholding (see instructions)	45e			
f Credit for small employer health insurance premiums (Attach Form 8941)	45f			
g Other credits and payments: <input type="checkbox"/> Form 2439 _____ <input type="checkbox"/> Form 4136 _____ <input type="checkbox"/> Other _____ Total ▶	45g			
46 Total payments. Add lines 45a through 45g	46			
47 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	47			
48 Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed ▶	48			
49 Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid ▶	49			
50 Enter the amount of line 49 you want: Credited to 2017 estimated tax ▶ Refunded ▶	50			

Part V Statements Regarding Certain Activities and Other Information (see instructions)

51 At any time during the 2016 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here ▶		Yes	No
52 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.			<input checked="" type="checkbox"/>
53 Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$			

Sign Here ▶

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 taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer: _____ Date: _____ Title: **Museum Director**

May the IRS discuss this return with the preparer shown below (see instructions)?
 Yes No

Paid Preparer Use Only	Print/Type preparer's name Byron C. Smith, CPA	Preparer's signature <i>Byron C. Smith</i>	Date 8-25-17	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶ Gregory, Sharer & Stuart, PA	Firm's EIN ▶			
	Firm's address ▶ 100 2nd Ave South Ste 600 Saint Petersburg, FL 33701-4336	Phone no. 727-821-6161			

Schedule A – Cost of Goods Sold. Enter method of inventory valuation ► **Cost Method**

1 Inventory at beginning of year	1		6 Inventory at end of year	6	
2 Purchases	2	3,242	7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	5,253
3 Cost of labor	3		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
4a Additional sec. 263A costs (attach schedule)	4a				
b Other costs (attach schedule) Stmt 1	4b	2,011			
5 Total. Add lines 1 through 4b	5	5,253			X

Schedule C – Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property		
(1) N/A		
(2)		
(3)		
(4)		
2. Rent received or accrued		
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	Total	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) ►
(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ►		

Schedule E – Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1) N/A				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals			Enter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B).
Total dividends-received deductions included in column 8				

Schedule F – Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross inc.	6. Deductions directly connected with income in column 5
(1) N/A					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).

Totals

Schedule G – Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col.4)
(1) N/A				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A).		Enter here and on page 1, Part I, line 9, column (B).

Totals

Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1) N/A						
(2)						
(3)						
(4)						
		Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).			Enter here and on page 1, Part II, line 26.

Totals

Schedule J – Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) N/A						
(2)						
(3)						
(4)						

Totals (carry to Part II, line (5)) ..

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) N/A						
(2)						
(3)						
(4)						
Totals from Part I						
Totals, Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 27.

Schedule K – Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1) N/A		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			

Federal Statements

Statement 1 - Form 990-T, Schedule A, Line 4b - Other Costs

<u>Description</u>	<u>Amount</u>
Museum Store - UBIT	\$ 2,011
Total	<u>\$ 2,011</u>

Net Operating Loss Carryover Worksheet

Form **990-T****2016**For calendar year 2016, or tax year beginning **04/01/16**, ending **03/31/17**

Name

The Leepa-Rattner Museum of Art IncEmployer Identification Number
59-3733512

Preceding Taxable Year	Prior Year			Current Year	Next Year Carryover
	Adj. To NOL Inc/(Loss) After Adj.	NOL Utilized (Income Offset)	Carryovers to Current Year	Income Offset By NOL Carryback / Carryover Utilized	
19th 03/30/98					
18th 03/30/99					
17th 03/31/00					
16th 03/31/01					
15th 03/31/02					
14th 03/31/03					
13th 03/31/04					
12th 03/31/05					
11th 03/31/06	-3,038	1,863	1,175	966	209
10th 03/31/07	1,780				
9th 03/31/08	2,543				
8th 03/31/09	-2,366		2,366		2,366
7th 03/31/10	-798		798		798
6th 03/31/11	776				
5th 03/31/12	-1,358		1,358		1,358
4th 03/31/13	-290		290		290
3rd 03/31/14	-1,239		1,239		1,239
2nd 03/31/15	-2,422		2,422		2,422
1st 03/31/16	-7,631		7,631		7,631
NOL carryover available to current year			17,279		
Current year	966			966	0
NOL carryover available to next year					16,313

Form **8868**

Application for Automatic Extension of Time To File an Exempt Organization Return

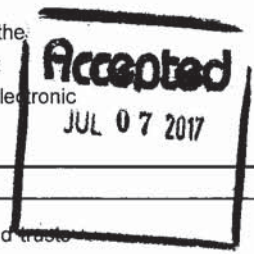
OMB No. 1545-1709

(Rev. January 2017)

► File a separate application for each return.

Department of the Treasury
Internal Revenue Service

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



Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profit, and click on e-file for Charities and Non-Profits.

Automatic 6-Month Extension of Time Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions. The Leepa-Rattner Museum of Art Inc	Employer identification number (EIN) or 59-3733512
	Number, street, and room or suite no. If a P.O. box, see instructions. P.O. Box 1545	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Tarpon Springs FL 34688	

File by the due date for filing your return. See instructions.

Enter the Return Code for the return that this application is for (file a separate application for each return) 07

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

Cristina McCormack
600 E Klosterman Road

• The books are in the care of ► **Tarpon Springs** **FL 34688**

Telephone No. ► **727-712-5203** FAX No. ►

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **02/15/18** to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- calendar year _____ or
- tax year beginning **04/01/16**, and ending **03/31/17**

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

345-7-17

Filing Instructions

The Leepa-Rattner Museum of Art Inc

Form F-1120 - Income/Franchise Tax Return

Taxable Year Ended March 31, 2017

- Date Due:** March 1, 2018
- Remittance:** None is required. No amount is due or overpaid.
- Mail To:** Florida Department of Revenue
5050 West Tennessee Street
Tallahassee, FL 32399-0135
- Signature:** The return should be signed and dated on page 2 by an authorized officer of the corporation.
- Other:** Every business entity with active status is required to file an annual report each year with the Department of State, Division of Corporations to maintain active status. The annual report may be filed online using the Division's website, www.Sunbiz.org.



Florida Corporate Income/Franchise Tax Return
FEIN 59-3733512

CSOL
F-1120, R. 01/17
Rule 12C-1.051
Florida Administrative Code
Effective 01/17

For calendar year 2016 or tax year beginning
04/01/16 ending 03/31/17

870702017033100020050376359373351200007

Name The Leepa-Rattner Museum of Art Inc
Address
Address P.O. Box 1545
City/State/ZIP Tarpon Springs FL 34688



Computation of Florida Net Income Tax

Check here if any changes have been made to name or address

Table with 3 columns: Description, Check here if negative, Amount. Rows include Federal taxable income, State income taxes, Additions to federal taxable income, Total of Lines 1, 2 and 3, Subtractions from federal taxable income, Adjusted federal income, Florida portion of adjusted federal income, Nonbusiness income allocated to Florida, Florida exemption, Florida net income, Tax due, Credits against the tax, Total corporate income/franchise tax due, and various penalty and interest items.

Florida Corporate Income Tax Return

Do Not Detach

YEAR ENDING 03/31/17

CSOL
F-1120
R. 01/17

To ensure proper credit to your account, enclose your check with tax return when mailing.

If 6/30 year end, return is due 1st day of the 4th month after the close of the taxable year, otherwise return is due 1st day of the 5th month after the close of the taxable year.

Name The Leepa-Rattner Museum of Art Inc
Address
Address P.O. Box 1545
City/State/ZIP Tarpon Springs FL 34688

Table with 4 columns: Identification number, Amount, and other values. Rows include 593733512, 20160401, 20170331, 00000000, 012, 201, 0, 0.



The Leepa-Rattner Museum of Art Inc
FEIN 59-3733512

CSOL
F-1120
R. 01/17
Page 2

This return is considered incomplete unless a copy of the federal return is attached.

If your return is not signed, or improperly signed and verified, it will be subject to a penalty. The statute of limitations will not start until your return is properly signed and verified. Your return must be completed in its entirety.

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 taxpayer) is based on all information of which preparer has any knowledge.

Sign here	Signature of officer (must be an original signature)	Date	Title	Museum Director
	Preparer's signature	Date	Preparer check if self-employed	Preparer's PTIN
Paid preparers only	Firm's name (or yours if self-employed) and address			P00744293
	Gregory, Sharer & Stuart, PA			FEIN 59-1850025
	100 2nd Ave South Ste 600			ZIP 33701-4336
	Saint Petersburg FL			

All Taxpayers Must Answer Questions A Through M Below — See Instructions

A. State of incorporation: FL

B. Florida Secretary of State document number: N01000005053

C. Florida consolidated return? YES NO

D. Initial return Final return (final federal return filed)

E. Taxpayer election section (s.) 220.03(5), Florida Statutes (F.S.) General Rule
 Election A Election B

F. Principal Business Activity Code (as pertains to Florida)
453220

G. A Florida extension of time was timely filed? YES NO

H-1. Corporation is a member of a controlled group? YES NO If yes, attach list.

H-2. Part of a federal consolidated return? YES NO If yes, provide:
FEIN from federal consolidated return: _____
Name of corporation: _____

H-3. The federal common parent has sales, property, or payroll in Florida? YES NO

I. Location of corporate books:
600 E Klosterman Road
City: Tarpon Springs State: FL
ZIP: 34689

J. Taxpayer is a member of a Florida partnership or joint venture? YES NO

K. Enter date of latest IRS audit: _____
a) List years examined: _____

L. Contact person concerning this return: Cristina McCormack
a) Contact person telephone number: 727-712-5203
b) Contact person e-mail address: mccormack.cristina@spcollege.edu

M. Type of federal return filed 1120 1120S or 990T

Where to Send Payments and Returns

Make check payable to and mail with return to:
Florida Department of Revenue
5050 W Tennessee Street
Tallahassee FL 32399-0135

If you are requesting a **refund** (Line 19), send your return to:
Florida Department of Revenue
PO Box 6440
Tallahassee FL 32314-6440

Remember:

- ✓ Make your check payable to the Florida Department of Revenue.
- ✓ Write your FEIN on your check.
- ✓ Sign your check and return.
- ✓ Attach a copy of your federal return.
- ✓ Attach a copy of your Florida Form F-7004 (extension of time) if applicable.



NAME **The Leepa-Rattner Museum of Art Inc** FEIN **59-3733512** TAXABLE YEAR ENDING **03/31/17**

Schedule I — Additions and/or Adjustments to Federal Taxable Income	Column (a) For page 1	Column (b) For Schedule VI, AMT
1. Interest excluded from federal taxable income (see instructions)	1.	1.
2. Undistributed net long-term capital gains (see instructions)	2.	2.
3. Net operating loss deduction (attach schedule)	3. 966.	3.
4. Net capital loss carryover (attach schedule)	4.	4.
5. Excess charitable contribution carryover (attach schedule)	5.	5.
6. Employee benefit plan contribution carryover (attach schedule)	6.	6.
7. Enterprise zone jobs credit (Florida Form F-1156Z)	7.	7.
8. Ad valorem taxes allowable as enterprise zone property tax credit (Florida Form F-1158Z)	8.	8.
9. Guaranty association assessment(s) credit	9.	9.
10. Rural and/or urban high crime area job tax credits	10.	10.
11. State housing tax credit	11.	11.
12. Credit for contributions to nonprofit scholarship funding organizations	12.	12.
13. Renewable energy tax credits	13.	13.
14. New markets tax credit	14.	14.
15. Entertainment industry tax credit	15.	15.
16. Credits for spaceflight projects	16.	16.
17. Research and Development tax credit	17.	17.
18. Energy Economic Zone tax credit	18.	18.
19. s. 168(k) IRC special bonus depreciation	19.	19.
20. Other additions (attach schedule)	20.	20.
21. Total Lines 1 through 20 in Columns (a) and (b). Enter totals for each column on Line 21. Column (a) total is also entered on Page 1, Line 3 (of Florida Form F-1120). Column (b) total is also entered on Schedule VI, Line 3.	21. 966.	21.

Schedule II — Subtractions from Federal Taxable Income	Column (a) For page 1	Column (b) For Schedule VI, AMT
1. Gross foreign source income less attributable expenses (a) Enter s. 78, IRC income \$ _____ (b) plus s. 862, IRC dividends \$ _____ (c) less direct and indirect expenses \$ _____ Total ▶	1.	1.
2. Gross subpart F income less attributable expenses (a) Enter s. 951, IRC subpart F income \$ _____ (b) less direct and indirect expenses \$ _____ Total ▶	2.	2.
Note: Taxpayers doing business outside Florida enter zero on Lines 3 through 6, and complete Schedule IV.		
3. Florida net operating loss carryover deduction (see instructions) See NOL Wrk	3. 17,279.	3.
4. Florida net capital loss carryover deduction (see instructions)	4.	4.
5. Florida excess charitable contribution carryover (see instructions)	5.	5.
6. Florida employee benefit plan contribution carryover (see instructions)	6.	6.
7. Nonbusiness income (from Schedule R, Line 3)	7.	7.
8. Eligible net income of an international banking facility (see instructions)	8.	8.
9. s.179, IRC expense (see instructions)	9.	9.
10. s. 168(k), IRC special bonus depreciation (see instructions)	10.	10.
11. Other subtractions (attach statement)	11.	11.
12. Total Lines 1 through 11 in Columns (a) and (b). Enter totals for each column on Line 12. Column (a) total is also entered on Page 1, Line 5 (of Florida Form F-1120). Column (b) total is also entered on Schedule VI, Line 5	12. 17,279.	12.



NAME **The Leepa-Rattner Museum of Art Inc** FEIN **59-3733512** TAXABLE YEAR ENDING **03/31/17**

Schedule III — Apportionment of Adjusted Federal Income

III-A For use by taxpayers doing business outside Florida, except those providing insurance or transportation services.

	(a) WITHIN FLORIDA (Numerator)	(b) TOTAL EVERYWHERE (Denominator)	(c) Col. (a) ÷ Col. (b) Rounded to Six Decimal Places	(d) Weight If any factor in Column (b) is zero, see note on Page 9 of the instructions.	(e) Weighted Factors Rounded to Six Decimal Places
1. Property (Schedule III-B below)	.	.		X 25% or	
2. Payroll	.	.		X 25% or	
3. Sales (Schedule III-C below)	.	.		X 50% or	
4. Apportionment fraction (Sum of Lines 1, 2, and 3, Column [e]). Enter here and on Schedule IV, Line 2.					

III-B For use in computing average value of property (use original cost).	WITHIN FLORIDA		TOTAL EVERYWHERE	
	a. Beginning of year	b. End of year	c. Beginning of year	d. End of year
1. Inventories of raw material, work in process, finished goods
2. Buildings and other depreciable assets
3. Land owned
4. Other tangible and intangible (financial org. only) assets (attach schedule)
5. Total (Lines 1 through 4)

6. Average value of property
 a. Add Line 5, Columns (a) and (b) and divide by 2 (for within Florida) 6a. _____
 b. Add Line 5, Columns (c) and (d) and divide by 2 (for total everywhere) 6b. _____
 7. Rented property (8 times net annual rent)
 a. Rented property in Florida 7a. _____
 b. Rented property Everywhere 7b. _____
 8. Total (Lines 6 and 7). Enter on Line 1, Schedule III-A, Columns (a) and (b).
 a. Enter Lines 6 a. plus 7 a. and also enter on Schedule III-A, Line 1, Column (a) for total average property in Florida 8a. _____
 b. Enter Lines 6 b. plus 7 b. and also enter on Schedule III-A, Line 1, Column (b) for total average property Everywhere 8b. _____

III-C Sales Factor	(a) TOTAL WITHIN FLORIDA (Numerator)	(b) TOTAL EVERYWHERE (Denominator)
1. Sales (gross receipts)	N/A	.
2. Sales delivered or shipped to Florida purchasers	.	N/A
3. Other gross receipts (rents, royalties, interest, etc. when applicable)	.	.
4. TOTAL SALES (Enter on Schedule III-A, Line 3, Columns [a] and [b])	.	.

III-D Special Apportionment Fractions (see instructions)	(a) WITHIN FLORIDA	(b) TOTAL EVERYWHERE	(c) FLORIDA Fraction ([a] ÷ [b]) Rounded to Six Decimal Places
1. Insurance companies (attach copy of Schedule T—Annual Report)	.	.	
2. Transportation services	.	.	

Schedule IV — Computation of Florida Portion of Adjusted Federal Income

	Column (a) Adjusted Federal Income	Column (b) Adjusted AMT Income
1. Apportionable adjusted federal income from Page 1, Line 6 (or Line 6, Schedule VI for AMT in Col. [b])	1. .	1. .
2. Florida apportionment fraction (Schedule III-A, Line 4 or Schedule III-D, Column [c])	2. .	2. .
3. Tentative apportioned adjusted federal income (multiply Line 1 by Line 2)	3. .	3. .
4. Net operating loss carryover apportioned to Florida (attach schedule; see instructions)	4. .	4. .
5. Net capital loss carryover apportioned to Florida (attach schedule; see instructions)	5. .	5. .
6. Excess charitable contribution carryover apportioned to Florida (attach schedule; see instructions)	6. .	6. .
7. Employee benefit plan contribution carryover apportioned to Florida (attach schedule; see instr.)	7. .	7. .
8. Total carryovers apportioned to Florida (add Lines 4 through 7)	8. .	8. .
9. Adjusted federal income apportioned to Florida (Line 3 less Line 8; see instructions)	9. .	9. .


 NAME **The Leepa-Rattner Museum of Art Inc** FEIN **59-3733512** TAXABLE YEAR ENDING **03/31/17**
Schedule V — Credits Against the Corporate Income/Franchise Tax

1. Florida health maintenance organization credit (attach assessment notice)	1.	.
2. Capital investment tax credit (attach certification letter)	2.	.
3. Enterprise zone jobs credit (from Florida Form F-1156Z attached)	3.	.
4. Community contribution tax credit (attach certification letter)	4.	.
5. Enterprise zone property tax credit (from Florida Form F-1158Z attached)	5.	.
6. Rural job tax credit (attach certification letter)	6.	.
7. Urban high crime area job tax credit (attach certification letter)	7.	.
8. Emergency excise tax (EET) credit (see instructions and attach schedule)	8.	.
9. Hazardous waste facility tax credit	9.	.
10. Florida alternative minimum tax (AMT) credit	10.	.
11. Contaminated site rehabilitation tax credit (attach tax credit certificate)	11.	.
12. State housing tax credit (attach certification letter)	12.	.
13. Credit for contributions to nonprofit scholarship funding organizations (attach certificate)	13.	.
14. Florida renewable energy technologies investment tax credit	14.	.
15. Florida renewable energy production tax credit	15.	.
16. New markets tax credit	16.	.
17. Entertainment industry tax credit	17.	.
18. Credits for spaceflight projects	18.	.
19. Research and Development tax credit	19.	.
20. Energy Economic Zone tax credit	20.	.
21. Other credits (attach schedule)	21.	.
22. Total credits against the tax (sum of Lines 1 through 21 not to exceed the amount on Page 1, Line 11). Enter total credits on Page 1, Line 12	22.	.

Schedule VI — Computation of Florida Alternative Minimum Tax (AMT)

1. Federal alternative minimum taxable income after exemption (attach federal Form 4626)	1.	.
2. State income taxes deducted in computing federal taxable income (attach schedule)	2.	.
3. Additions to federal taxable income (from Schedule I, Column [b])	3.	.
4. Total of Lines 1 through 3	4.	.
5. Subtractions from federal taxable income (from Schedule II, Column [b])	5.	.
6. Adjusted federal alternative minimum taxable income (Line 4 minus Line 5)	6.	.
7. Florida portion of adjusted federal income (see instructions)	7.	.
8. Nonbusiness income allocated to Florida (see instructions)	8.	.
9. Florida exemption	9.	.
10. Florida net income (Line 7 plus Line 8 minus Line 9)	10.	.
11. Florida alternative minimum tax due (3.3% of Line 10). See instructions for Page 1, Line 11	11.	.



NAME **The Leepa-Rattner Museum of Art Inc** FEIN **59-3733512** TAXABLE YEAR ENDING **03/31/17**

Schedule R — Nonbusiness Income

Line 1. Nonbusiness income (loss) allocated to Florida

Type

Amount

_____	_____	.
_____	_____	.
_____	_____	.
Total allocated to Florida	1.	_____
(Enter here and on Page 1, Line 8 or Schedule VI, Line 8 for AMT)		

Line 2. Nonbusiness income (loss) allocated elsewhere

Type

State/country allocated to

Amount

_____	_____	_____	.
_____	_____	_____	.
_____	_____	_____	.
Total allocated elsewhere	2.	_____	.

Line 3. Total nonbusiness income

Grand total. Total of Lines 1 and 2	3.	_____	0.
(Enter here and on Schedule II, Line 7)			

FL Net Operating Loss Carryover Worksheet

Form **F-1120****2016**

For calendar year 2016, or tax year beginning

04/01/16

ending

03/31/17

Name

The Leepa-Rattner Museum of Art Inc

Employer Identification Number

59-3733512

Preceding Taxable Year	Apportionment Fraction	Adj to NOL FL Inc (Loss) After Adj	Prior Year NOL Util/(Inc Offset) Carryovers	Current Year Carryover NOL Utilized	Next Year Carryover
19th 03/31/98	1.000000				
18th 03/31/99	1.000000				
17th 03/31/00	1.000000				
16th 03/31/01	1.000000				
15th 03/31/02	1.000000				
14th 03/31/03	1.000000				
13th 03/31/04	1.000000				
12th 03/31/05	1.000000				
11th 03/31/06	1.000000	-3,038	1,863 1,175	966	209
10th 03/31/07	1.000000	1,087			
9th 03/31/08	1.000000	2,543			
8th 03/31/09	1.000000	-2,366	2,366		2,366
7th 03/31/10	1.000000	-798	798		798
6th 03/31/11	1.000000	776	-776		
5th 03/31/12	1.000000	-1,358	1,358		1,358
4th 03/31/13	1.000000	-290	290		290
3rd 03/31/14	1.000000	-1,239	1,239		1,239
2nd 03/31/15	1.000000	-2,422	2,422		2,422
1st 03/31/16	1.000000	-7,631	7,631		7,631
NOL Carryover Available To Current Year			17,279		
Current Year	1.000000	966		966	0
NOL Carryover Available To Next Year					16,313

Form F-1120	FL Net Operating Loss Carryover Worksheet, Page 2		2016
For calendar year 2016, or tax year beginning		04/01/16	ending 03/31/17
Name The Leepa-Rattner Museum of Art Inc			Employer Identification Number 59-3733512

Adjustments to Federal Taxable Income

State income taxes deducted	966
Schedule I additions	966
Schedule II subtractions before NOL	966
Apportionment fraction	1.000000
	966
Schedule IV carryovers and other adjustments	966
Net adjustments	966

Current Year Income (Loss)

Federal Income (Loss)	0
Apportionment fraction	1.000000
	0
Net adjustments	966
Current Year Income (Loss)	966

Florida Tentative Income / Franchise Tax Return
and Application for Extension of Time to File Return

CSOL
F-7004
R. 01/17
Rule 12C-1.051
Florida Administrative Code
Effective 01/17



CUT HERE

Florida Tentative Income / Franchise Tax Return
and Application for Extension of Time to File Return

CSOL
F-7004
R. 01/17

Name **The Leepa-Rattner Museum of Art Inc** FEIN **59-3733512**
Address _____ Taxable Year End 03/31/17
Address **P.O. Box 1545** FILING STATUS Partnership Corporation
City/State/ZIP **Tarpon Springs FL 34688** All other federal returns to be filed
Tentative Tax Due \$ **0**

Under penalties of perjury, I declare that I have been authorized by the above named taxpayer to make this application, that to the best of my knowledge and belief the statements herein are true and correct:


Sign Here: Dr. CSA Date: 7.7.17

593733512	0	0	0
2	0	0	0
20170331	0	0	0
0	0	0	0
012	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0

**An entire copy of the current
year federal return was
attached to this return when
filed.**

October 17, 2017

MEMORANDUM

TO: Board of Trustees, St. Petersburg College
FROM: Tonjua Williams, Ph.D., President 
SUBJECT: Quarterly Informational Report of Contract Items

This informational report includes executed contracts and/or items that have been approved by either the President or designee during the preceding Quarter and are being reported to the Board pursuant to Board of Trustees' Rule 6Hx23-5.903.

Section A: Program Related Contracts

1. Affiliation Agreement with **Apalachee Center, Inc.** to provide a preceptor and clinical experience for RN to BSN Nursing students in order to complete their Leadership Practicum hours in their employment setting. The Agreement will commence as soon as possible and will be ongoing unless terminated by either party. There is no cost to the College. This item was approved by Anne Cooper on August 15, 2017. Department—College of Nursing
2. Affiliation Agreement with **Bayfront HMA Medical Center, LLC d/b/a Bayfront Health St. Petersburg** to provide clinical experience to students enrolled in the Nursing, Radiography, Respiratory Therapy, and Health Information Management programs. The Agreement will commence as soon as possible and continue for the period of three years. This item was approved by Jesse Coraggio for Anne Cooper on July 25, 2017. Departments—Nursing, Radiography, Respiratory Therapy and Health Information Management
3. Affiliation Agreement with **Florida Health Sciences Center, Inc. d/b/a Tampa General Hospital** to provide clinical experience to students enrolled in the Health Services Administration Program. The Agreement will commence as soon as possible and continue for the period of five years. There is no cost to the College. This item was approved by Anne Cooper on August 1, 2017. Department—College of Health Sciences
4. Agreement of Cooperation with **Freedom Institute of Higher Education**, in New Zealand, to collaborate to promote the exchange of experiences and staff in the fields of education, science, culture and other academic areas. The Agreement will commence as soon as possible and will continue unless terminated by either party. There is no cost to the College associated with entering into this Agreement. This item was approved by Anne Cooper on July 24, 2017. Department—Center for International Programs

5. Agreement with **Gulfcoast North Area Health Education Center, Inc.** whereby the College agrees to incorporate tobacco prevention and cessation content throughout the Dental Hygiene curriculum and require its students to participate in the Afternoon of Learning and the AHEC Tobacco Training and Cessation program. Under this agreement, SPC Dental Hygiene students will learn about tobacco and develop professional skills necessary to address its use with their patients. Students will also be prepared to serve as role models and educate youth about the dangers of tobacco. The Agreement will commence upon execution and will continue for one year. The College will receive \$25 per student. This item was approved by the Anne Cooper on July 27, 2017. Department—Dental Hygiene
6. Agreement with **Gulfcoast North Area Health Education Center, Inc.** whereby the College agrees to incorporate tobacco prevention and cessation content throughout the Respiratory Care curriculum and require its students to participate in the Afternoon of Learning and the AHEC Tobacco Training and Cessation program. Under this agreement, SPC Respiratory Care students will learn about tobacco and develop professional skills necessary to address its use with their patients. Students will also be prepared to serve as role models and educate youth about the dangers of tobacco. The Agreement will commence upon execution and will continue for one year. The College will receive \$25 per student. This item was approved by the Anne Cooper on August 1, 2017. Department—Respiratory Care
7. Agreement with **Gulfcoast North Area Health Education Center, Inc.** whereby the College agrees to incorporate tobacco prevention and cessation content throughout the Nursing curriculum and require its students to participate in the Afternoon of Learning and the AHEC Tobacco Training and Cessation program. Under this agreement, SPC Nursing students will learn about tobacco and develop professional skills necessary to address its use with their patients. Students will also be prepared to serve as role models and educate youth about the dangers of tobacco. The Agreement will commence upon execution and will continue for one year. The College will receive \$25 per student. This item was approved by the Anne Cooper on September 21, 2017. Department—Nursing
8. Affiliation Agreement with **HCA City Hospital d/b/a South Bay Hospital** to provide medical surgical clinical site and preceptor for RN Refresher/Remediation/Return to Work students. The Agreement will commence as soon as possible and continue for the period of three years. There is no cost to the College. This item was approved by Jesse Coraggio for Anne Cooper on August 7, 2017. Department—Workforce Institute/CE Health
9. Agreement with **Hernando HMA, LLC d/b/a Bayfront Health Brooksville** to provide clinical experience to students enrolled in the Health Information Management Program. This is no cost to the College. The Agreement will commence as soon as possible and will continue for the period of three years. This item was approved by Anne Cooper on August 21, 2017. Department—Health Information Management
10. Affiliation Agreement with **HSS Systems, LLC on behalf of Tampa Shared Service Center** to provide clinical experience to students enrolled in the Health Information Technology Program at the College. The Agreement will commence as soon as possible

and continue for the period of one year. There is no cost to the College. This item was approved by Anne Cooper on September 5, 2017. Department—Health Information Technology

11. Affiliation Agreement with **Johns Hopkins All Children's Hospital** to provide clinical experience to students in the College's Nursing, Radiography, Health Information Technology, Respiratory Care, Physical Therapist Assistant, Emergency Medical Services, Health Services Administration, CE Nursing, CE Phlebotomy, CE Clinical Medical Assistant Programs. The Agreement will commence as soon as possible and continue for the period of two years. This item was approved by Anne Cooper on September 21, 2017. Departments—Various Programs
12. Affiliation Agreement with **Mayo Clinic** to allow a student in the Health Services Administration baccalaureate program to complete their final course project with a mentor during a rotation at Mayo. The Agreement will commence August 21, 2017 and continue through December 8, 2017. There is no cost to the College. This item was approved by Anne Cooper on July 18, 2017. Department—College of Health Sciences
13. Affiliation Agreement with **Methodist Le Bonheur Healthcare** to provide a preceptor and clinical experience for RN to BSN Nursing students in order to complete their Leadership Practicum hours in their employment setting. The Agreement will commence as soon as possible and continue for a period of three years. Thereafter, the Agreement will continue for one-year periods upon agreement of the parties. There is no cost to the College. This item was approved by Anne Cooper on July 18, 2017. Department—College of Nursing
14. Affiliation Agreement with **Norwegian American Hospital** to provide a preceptor and clinical experience for RN to BSN Nursing students in order to complete their Leadership Practicum hours in their employment setting. The Agreement will commence as soon as possible and will be ongoing unless terminated by either party. There is no cost to the College. This item was approved by Anne Cooper on August 28, 2017. Department—College of Nursing
15. Affiliation Agreement with **Odyssey Healthcare of Marion County, LLC dba Kindred Hospice** to provide a preceptor and clinical experience for RN to BSN Nursing students in order to complete their Leadership Practicum hours in their employment setting. The Agreement will commence as soon as possible and will be ongoing unless terminated by either party. There is no cost to the College. This item was approved by Anne Cooper on September 27, 2017. Department—College of Nursing
16. Agreement with the **City of Oldsmar** for the use of its facility located at 127 State Street, Clearwater, Florida (formerly the Oldsmar Senior Center) to provide course offerings to SPC students through the College's Workforce Institute. The Agreement will commence as soon as possible and will continue for the period of two years. There is no cost to the College associated with entering into this Agreement. This item was approved by Jesse Coraggio for Anne Cooper on August 7, 2017. Department—Workforce Institute

17. Affiliation Agreement with **Port Charlotte HMA, LLC (FL) dba Bayfront Health Port Charlotte** to provide a preceptor and clinical experience for RN to BSN Nursing students in order to complete their Leadership Practicum hours in their employment setting. The Agreement will commence as soon as possible and continue for a period of three years. There is no cost to the College. This item was approved by Jesse Coraggio for Anne Cooper on July 24, 2017. Department—College of Nursing
18. Agreement with **AJ Selmon International, LLC d/b/a U.S. College Connections** to partner to promote the College's Intensive English Program to prospective students in Japan. AJ Selmon International will provide services such as marketing the program, providing a point of contact; assisting students with documentation and the application process; assisting SPC in resolving any student issues; and submitting invoices each semester. The Agreement will commence as soon as possible and continue for the period of one year. The anticipated cost to the College for AJ Selmon's services over the one-year period of the Agreement is \$5,200; however, the cost will be offset by student fees. This item was approved by Anne Cooper on September 26, 2017. Department—Workforce Institute
19. Affiliation Agreement with **Department of Social & Health Services, Behavioral Health Administration, Western State Hospital** to provide clinical experience to students enrolled in the Health Services Administration Program. The Agreement will commence as soon as possible and continue for the period of five years. There is no cost to the College. This item was approved by Anne Cooper on August 1, 2017. Department—College of Health Sciences
20. Internship Agreement with the **City of St. Petersburg, Fire and Rescue** whereby the City will provide a paramedic preceptor and the necessary clinical experience required for students enrolled in the Emergency Medical Services Program. The Agreement will commence as soon as possible and will continue for a period agreed to by the parties. There is no cost to the College. This item was approved by Anne Cooper on September 22, 2017. Department—College of Health Science, EMS Program
21. Affiliation Agreement with **TrustBridge, Inc. and its Subsidiaries; Hospice of Palm Beach County, Inc. and Hospice by the Sea, Inc.** to provide a preceptor and clinical experience for RN to BSN Nursing students in order to complete their Leadership Practicum hours in their employment setting. The Agreement will commence as soon as possible and continue for a period of two years. Thereafter, the Agreement will automatically renew for one-year periods unless terminated by either party.. There is no cost to the College. This item was approved by Anne Cooper on August 15, 2017. Department—College of Nursing
22. Affiliation Agreement with **University Health Services, Inc.** to provide a preceptor and clinical experience for RN to BSN Nursing students in order to complete their Leadership Practicum hours in their employment setting. The Agreement will commence as soon as possible and continue for the period of three years. There is no cost to the College. This item was approved by Anne Cooper on August 23, 2017. Department—College of Nursing

23. Affiliation Agreement with **U.S. Department of Veterans' Affairs, Bay Pines VA Healthcare System** to provide clinical experience to students enrolled in the Health Information Technology Program. The Agreement will commence as soon as possible and continue through May 16, 2027. There is no cost to the College. This item was approved by Anne Cooper on July 14, 2017. Department—Health Information Technology

Section B: Contracts above \$100,000 (\$100,001-\$325,000)

24. Agreement with **Braas** to co-develop and deliver Programmable Logic Circuits (PLCs) courseware for the Mechatronics program(s) leading to the Packaging Machinery Manufacturers Institute (PMMI) Certification. The College will build, host and support the online courseware and student registration as well as recruit students. Braas will collaborate on pre-assessment testing, content/courseware development, teaching 15-hour hands-on labs, maintaining and prepping PLC trainers on-site at its location in Oldsmar. The Agreement will commence as soon as possible and continue for the period of two years. The cost to students for the course will be \$1,550. Based on an estimate of 72 students per year, the College anticipates an annual revenue of \$111,600. The costs are expected to be approximately \$18,000 per year for an estimated annual net revenue to the College of \$93,600. This item was approved by Anne Cooper on July 24, 2017. Department—Workforce and Professional Development
25. Agreement with **Broward College** (BC) whereby BC will engage neighboring communities located in Broward County in transforming the Dr. Martin Luther King, Jr. holiday into a day of citizen action volunteer service in honor of Dr. King. The College will serve as the fiscal and tracking agent of the funding appropriated by the legislature for this program. The funding amount for BC is \$230,000. This item was approved by the President on August 24, 2017. Department—Retention Services, MLK Day of Service 2018
26. Agreement with **Campus Works, Inc.** to conduct a Technology Systems Review to include services such as planning and review of current state of College's academic technologies; conducting a student experience workshop, constituent surveys, student services and IT systems focus groups, interviews, and open forums; delivering a "first look" assessment, findings, and technology roadmap; conducting data analysis and report writing; and presenting findings and final deliverables. The Agreement will commence as soon as possible and continue through December 31, 2017. The cost to the College for this Agreement will be \$212,275. This item was approved by the President on July 27, 2017. Department—Title III/Retention Services
27. Agreement with **Hillsborough Community College** (HCC) whereby HCC will engage neighboring communities located in Hillsborough County in transforming the Dr. Martin Luther King, Jr. holiday into a day of citizen action volunteer service in honor of Dr. King. The College will serve as the fiscal and tracking agent of the funding appropriated by the legislature for this program. The funding amount for HCC is \$210,000. This item was approved by the President on August 24, 2017. Department—Retention Services, MLK Day of Service 2018

28. Agreement with **i3 Group, LLC** to continue to provide the College with student loan management services to student borrowers. The i3 Group will use its best efforts to keep student borrowers in a current repayment status and remove delinquency to help student borrowers repay loans and deliver the lowest possible cohort default rate. More specifically, i3 Group will provide services such as student loan assistance; telephone, email and direct mail student borrower communications; reporting package information regarding repayment status; student borrower access to IonTuition and Webchat through the College's intranet portal; and loan record detail report analysis. The cost to the College for services under this Agreement is anticipated to be \$14,853 per month over a period of one year for a total anticipated cost to the College of \$178,236. This item was approved by the President on July 23, 2017. Department—Financial Assistance Services
29. Agreement with **SharpTurn Consulting Partners, LLC** to provide consulting services to assist the College with the 12-month Implementation Phase I—Build a Strong Infrastructure for the College's Human Resources and Development Department. Deliverables include things such as: 1) a project pre-planning meeting; 2) a project kick-off introduction; 3) a milestone status report; 4) process flow charts; 5) monthly status reporting; 6) final phase and project reporting; and 7) facilitation and reporting of team action committees, task assignments and priorities. The Agreement will commence as soon as possible and continue through June 30, 2018. The cost to the College for the Agreement will be \$127,200. This item was approved by the President on July 19, 2017. Department—Administrative/Business Services & Information Technology
30. Agreement with **State College of Florida, Manatee - Sarasota (SCFMS)** whereby SCFMS will engage neighboring communities located in Manatee and Sarasota Counties in transforming the Dr. Martin Luther King, Jr. holiday into a day of citizen action volunteer service in honor of Dr. King. The College will serve as the fiscal and tracking agent of the funding appropriated by the legislature for this program. The funding amount for SCFMS is \$210,000. This item was approved by the President on August 24, 2017. Department—Retention Services, MLK Day of Service 2018
31. Agreement with **Thyssenkrupp Elevator Corporation** to provide service and maintenance for 37 elevators collegewide. The Agreement will commence as soon as possible and continue for a period of three years. Thereafter, the Agreement will automatically continue for one-year periods unless terminated by either party with 90 days' written notice. Costs to the College for Year One of the Agreement will be \$49,200; however, the Agreement provides for an increase in pricing annually after the first year in an amount not to exceed 4% per year. Based on the foregoing, the anticipated costs to the College for the initial three-year contract period will be \$153,582.72, plus any added costs that may become necessary for emergency repairs. Should the Agreement be continued beyond the three-year period, the annual increase in price would not exceed 4% of the prior year's cost. This item was approved by the President on August 8, 2017. Department—Facilities Services

Section C: Contracts above \$50,000 (\$50,001-\$100,000)

32. Agreement with **Apple, Inc.** to lease 30 Apple computers for use at the St. Petersburg Collegiate High School. The lease is for a period of 48 months. The cost to the College for this lease is expected to be approximately \$53,471.24. Should the College opt to purchase the equipment, if applicable, at the end of the lease term, the purchase option price would be an additional \$1. Based on the foregoing, the total cost to the College for this lease agreement will not exceed \$53,472.24. Should funds not be appropriated to continue the lease for any subsequent fiscal period during the term of the Agreement, the Agreement may be terminated with 30 days' notice prior to the end of the current fiscal period. This item was approved by the Board based on its approval of the 2017-18 Budget on June 20, 2017. — Brian Miles
33. Agreement with **BridgePoint Church** to provide the use of the College's Digitorium and various classrooms for Sunday morning church activities. The Agreement will commence as soon as possible and continue for the period of one year. Although the total revenue to the College is undetermined at this time, the estimated rental fees per event/day of use are approximately \$1,068. This item was approved by Brian Miles on August 30, 2017. Department—Provost, Seminole Campus
34. Agreement with **ERP Analysts, Inc. (ERPA)** to provide PeopleSoft technical support at a monthly cost of \$8,800 per month for 6 months. The total cost to the College for this Agreement will be \$52,800. This item was approved by Brian Miles on September 5, 2017. Department—Information Systems, AIS

Section D: Contracts above \$10,000 (\$10,001-\$50,000)

35. Agreement with **Access Interpreting Services, LLC** to provide interpreting services for employees at the College. The Agreement will commence as soon as possible and continue through June 30, 2018. The anticipated cost to the College for this Agreement is \$45,000. This item was approved by Brian Miles on July 27, 2017. Department—Human Resources Development
36. Agreement with **Behavioral Health Management Services, Inc. d/b/a BayCare Behavioral Health, Inc.** to continue to provide student counseling services and assistance. The Agreement will commence as soon as possible and continue through July 31, 2018. The cost to the College associated with this Agreement is anticipated to be \$42,180. This item was approved by the President on July 11, 2017. Department—Student Services
37. Agreement with **Clear Channel Outdoor, Inc.** to provide bulletin board advertising for the College from May 21, 2018 through August 12, 2018. The cost to the College for this Agreement will be \$27,144. This item was approved by Jesse Coraggio on August 15, 2017. Department—Marketing & Strategic Communications
38. Agreement with **curriQunet** to continue to use the curriQunet system for automated curriculum development and approval tracking. The renewal Agreement(s) will commence October 1, 2017 and continue for the period of three years. The renewal Agreement

includes an upgrade to the curriQunetMETA software, implementation, hosting, and maintenance for a cost of \$2,441 per month. The cost to the College for the three-year period will be \$87,876. This item was approved by Jesse Coraggio on September 28, 2017. Department—Curriculum Services/Institutional Research and Effectiveness

39. Agreement with **Diversified Business Machines** to provide maintenance on the College's 10 Photo ID printers college-wide. The Agreement will commence as soon as possible and continue for the period of one year. The cost to the College for this period will be \$19,250. This item was approved by the President on July 14, 2017. Department—Enrollment Services
40. Agreement with **Health & Wellness Professionals** to provide wellness screening for the College. Wellness screenings for employees will be provided at 8 sites and at the All College Day event in October 2017. The Agreement will commence as soon as possible and continue through October 31, 2017. The estimated cost to the College for this Agreement is approximately \$24,308. This item was approved by Brian Miles on July 18, 2017. Department—Human Resources, Wellness
41. Agreement with **Shameka S. Jones d/b/a Jones & Company Management Group** to provide consulting services associated with the 2017 Martin Luther King Jr. Day of Service. The Agreement will commence as soon as possible and will continue through April 1, 2018. The cost to the College for this Agreement will be \$33,840. This item was approved by the President on July 14, 2017. Department—Retention Services
42. Agreement with **Mid Florida Armored & ATM Service, Inc.** to provide armored car services for all deposits transported to the bank vault. The Agreement will commence as soon as possible and continue through July 31, 2019. The cost to the College for this period is estimated to be approximately \$59,202. This item was approved by Brian Miles on August 1, 2017. Department—District Office Business Office
43. Agreement with **Pandora** to provide radio spots to run on Pandora for a total of 15 weeks, during July 2017, October 2017, November 2017 and June 2018. The cost to the College for this Agreement will be \$28,428.79. This item was approved by Jesse Coraggio on July 14, 2017. Department—Marketing & Strategic Communications
44. Agreement with **POS Impact, LLC** to serve as a 3rd party evaluator for the College's awarded National Science Foundation Biomedical Engineering Technology grant. POS Impact will work with the grant staff and other partners to implement the approved evaluation plan including areas such as data collection, analysis and reporting; annual and summative evaluation reports and consultation regarding project status and progressing toward objectives. The Agreement will commence as soon as possible and continue for the period of three years. The cost to the College for this Agreement will be \$18,000. This item was approved by Anne Cooper on July 12, 2017. Department—Grants
45. Agreement with the **Power of Song, Inc.** to provide consulting services associated with three performances of the production *Sounds of the Civil Rights Movement: The Power of*

Song III to kick off the MLK Day of Service projects and St. Petersburg Weekend Celebration for 2018. The performances will be held on January 7-8, 2018. The cost to the College for this Agreement will be \$30,000. This item was approved by the President on July 11, 2017. Department—Retention Services

46. Agreement with **Qualys, Inc.** to provide external vulnerability scanning services to meet Board of Trustees' policy requirements regarding auditing and assessment of critical SPC systems. The Agreement will commence as soon as possible and continue for the period of one year. The cost to the College will be \$14,944.56. This item was approved by Brian Miles on August 14, 2017. Department—Information Systems, Networks
47. Agreement with **Ricoh USA, Inc.** to provide one color print-scan-fax-copier and two black and white print-scan-fax copiers, including maintenance, to be used at the Downtown Center. The Agreement will commence as soon as possible and continue for the period of 5 years. The estimated cost for this Agreement will be \$16,421.40 for the lease and approximately \$7,000 for copies for a total cost of \$23,421.40. This item was approved by Patrick Rinard on September 25, 2017. Department—Provost's Office, Downtown
48. Agreement with **Transworld Systems, Inc.** to provide pre-collection services on past due student accounts at a cost of \$8.90 per account. The College anticipates approximately 5,000 accounts during the Agreement period. The cost to the College will be \$44,500; however, Transworld provides a performance guarantee which meets or exceeds a minimum collection rate of two times the order amount. Transworld will pay the College the difference if the collections do not meet the required threshold. The Agreement will commence as soon as possible and will continue for the period of up to two years. This item was approved by Brian Miles on July 28, 2017. Department—Business Office, DO

Section E: Contracts below \$10,000

49. Agreement with **3M Health Information Systems, Inc.** to provide encoder software and related services to support the Health Information Technology Program. The Agreement will commence as soon as possible and continue for the period of one year. The cost to the College for this Agreement will be \$8,513.59. This item was approved by Brian Miles on August 18, 2017. Department—Health Information Technology
50. Agreement with **Apple, Inc.** to lease 1 Apple computer for use in the Workforce & Collaborative Labs Department at the EpiCenter. The lease is for a period of 48 months. The cost to the College for this lease is expected to be approximately \$2,864.96. Should the College opt to purchase the equipment, if applicable, at the end of the lease term, the purchase option price would be an additional \$1. Based on the foregoing, the total cost to the College for this lease agreement will not exceed \$2,865.96. Should funds not be appropriated to continue the lease for any subsequent fiscal period during the term of the Agreement, the Agreement may be terminated with 30 days' notice prior to the end of the current fiscal period. This item was approved by the Board based on its approval of the 2017-18 Budget on June 20, 2017. — Brian Miles

51. Agreement with **Barcodes, Inc.** to provide a one-year Service Made Simple contract to provide service/maintenance on three inventory scanners used in Mail and Receiving. The Agreement will commence as soon as possible and continue for the period of one year. The cost to the College will be \$433.20. This item was approved by Amy Lockhart for Brian Miles on August 18, 2017. Department—Mail and Receiving
52. Agreement with **BayCare Wellness Services** to provide influenza vaccines to College employees at the Day of Discovery 2017 event to be held on the Clearwater Campus on October 31, 2017. The cost to the College for this Agreement is anticipated to be \$1,350. This item was approved by Brian Miles on August 14, 2017. Department—Human Resources, Wellness
53. Agreement with **Biodex Medical Systems, Inc.** to provide continued maintenance for the Biodex equipment used in the Physical Therapist Assistant Program. The Agreement will commence October 1, 2017 and continue for the period of one year. The cost to the College for this Agreement will be \$2,650. This item was approved by Anne Cooper on September 26, 2017. Department—Physical Therapist Assistant
54. Agreement with **BlueFrame Technology, LLC** to provide live streaming content management and software for the College’s Athletics Department for the period of one year. The cost to the College will be \$3,000. This item was approved by the President on August 11, 2017. Department—Athletics
55. Agreement with **Burning Glass International, Inc. d/b/a Burning Glass Technologies (BG)** to continue the relationship with BG for the use of its online portal which provides users with access to the FOCUS portal platform through which they can build resumes, search job listings, and explore the job market and targeted careers. The renewal will include a one-year membership to Labor Insight which includes up to 10 licenses and a one-year membership to FOCUS (which includes the student tool, employer tool, and administrative tool). The Agreement will commence as soon as possible and continue for the period of one year. The cost to the College for this Agreement will be \$10,000. This item was approved by Anne Cooper on September 27, 2017. Department—Career Connections
56. Data Sharing Agreement with **CareerSource Pinellas (CSP)** whereby the College will provide CSP with certain student education records information in order for CSP to provide employment services to individuals participating in the College’s programs and aggregate data to SPC to assist in its evaluation of the effectiveness of programs as it relates to the employment of students who have participated in SPC programs. The disclosed data under this Agreement will be maintained in the Florida Department of Economic Opportunity database and be used by CSP to assist SPC in job placement activities and evaluation of programs. The Agreement will commence as soon as possible and continue for the period of one year. Thereafter, the Agreement will renew automatically unless terminated by either party. There is no cost to the College. This item was approved by Anne Cooper on September 21, 2017. Department—Career Connections

57. Agreement with the **Chronicle of Higher Education** for the renewal of the College's online subscription. The renewal will be for the period of one year at a cost to the College of \$3,820. The Agreement will commence as soon as possible and continue for the period of one year. This item was approved by Anne Cooper on July 31, 2017. Department—District Library
58. Agreement with **Collector Systems** to provide a license and subscription for its collection management software/database that will be used by the College/Foundation for managing its art collection. The cost to the College for this Agreement will be \$540. The Agreement will commence as soon as possible and will continue for one year. This item was approved by Brian Miles on July 27, 2017. Department—Foundation Development
59. Agreement with **Compressed Air Systems** to provide quarterly inspection and maintenance for the Kaiser compressor used in the Orthotics and Prosthetics Program. The Agreement will commence as soon as possible and continue for the period of one year. The cost to the College for this period will be \$2,780.58. This item was approved by Brian Miles on September 20, 2017. Department—Orthotics & Prosthetics
60. Agreement with **Day Spring Episcopal Conference Center** to provide meals and lodging for the Women's Basketball Team Retreat to be held September 22-24, 2017. The cost to the College for this Agreement will be \$3,312. This item was approved by Patrick Rinard on September 21, 2017. Department--Athletics
61. Agreement with **Decision Partners, Inc.** to continue to give students in the Student Support Services Program the opportunity to take a Financial Literacy 101 course to learn about budgeting management, credit card debt, personal finances, interest rates and financial aid. The renewal period will commence on September 1, 2017 and continue through August 31, 2018 at a cost to the College of \$500. This item was approved by Pat Rinard on September 1, 2017. Department—Student Support Services Program
62. Agreement with **Dramatists Play Service, Inc.** that will allow the College's Fine Arts Department to present the 2018 Spring musical "The Musical Comedy Murders of 1940" The College will present six performances in March 2018. The cost to the College for this Agreement will be \$600. This item was approved by Anne Cooper on August 16, 2017. Department—Fine Arts Department
63. Agreement with **EBSCO Publishing, Inc.** for the renewal of the License Agreement for the Harvard Business Review for Course Work which allows users to download and print content for course and research use. The Agreement will commence August 1, 2017 and continue through July 31, 2018. The cost to the College for this period will be \$4,256. This item was approved by Anne Cooper on July 11, 2017. Department—District Library
64. Agreement with **Films Media Group** to continue to access the Films on Demand Physical Therapy collection for streamed video content to support the Physical Therapist Assistant Program. The Agreement will commence as soon as possible and continue through October 31, 2018 at a cost to the College of \$785. This item was approved by Anne Cooper on July 11, 2017. Department—District Library

65. Agreement with **GetGo Audio, LLC., a subsidiary of LogMeIn, Inc.** for a subscription to LastPass which is an online password management service. Last Pass is a highly secure password providing industry standard encryption and allows SPC staff to securely store, share, and manage passwords, as well as improving strength of passwords and recoverability in the event of staff turnover. The Agreement will commence as soon as possible and continue for the period of one year. The cost to the College will be \$504. This item was approved by Brian Miles on July 21, 2017. Department—Information Systems, Networks
66. Agreement with **HRP Associates, Inc.** to conduct two Chemical Hygiene Plan and associated regulatory training sessions for certain College faculty and staff. The training will be on August 18, 2017 at the St. Petersburg/Gibbs Campus and on August 23, 2017 at the Clearwater Campus. The cost to the College will be \$2,000. This item was approved by Brian Miles on August 4, 2017. Department—Risk Management
67. Agreement with the **Hilton St. Petersburg Carillon Park** to provide lodging, food and workspace on October 6-12, 2017, for the On-Site Team conducting its review as part of the 2018 SACSCOC Compliance Certification. The cost to the College for this Agreement is anticipated to be approximately \$7,574. This item was approved by Jesse Coraggio on September 28, 2017. Department—Institutional Research
68. Agreement with **Hobsons** to provide products/services including Achieveworks; Naviance Alumni Tracker; Naviance Edocs; Naviance for High School; and Private Web-based Naviance Training for the Collegiate High School. The Agreement will commence as soon as possible and continue for the period of one year. The cost to the College for this Agreement will be \$4,455. This item was approved by Anne Cooper on August 15, 2017. Department—St. Petersburg Collegiate High School
69. Agreement with **David Houle** to present a dinner presentation to students and the public on *Life in 2040: You Have No Idea*. The event will be held at the Seminole Campus on November 1, 2017. The cost to the College will be \$1,000. This item was approved by the President on July 12, 2017. Department—Institute for Strategic Policy Solutions
70. Agreement with **Learning Sciences International, LLC** to provide iObservation subscription package to include iObservation, the iObservation Fidelity Module, Building License and Virtual Trainings for use at the Collegiate High School. The Agreement will commence as soon as possible and continue for one year. The cost to the College will be \$1,140. This item was approved by Anne Cooper on July 13, 2017. Department—St. Petersburg Collegiate High School
71. Agreement with **Mergent, Inc.** to continue the subscription to its Intellect database that will allow students in the Business Program to access private and public U.S. and International business data, industry news, facts and figures, and industry profiles. The Agreement will commence as soon as possible and continue for the period of one year. The cost to the College for this period will be \$2,930. This item was approved by Anne Cooper on July 13, 2017. Department—District Library

72. Agreement with **Microsoft** whereby Microsoft will participate and provide a Gold sponsorship for the College's *Moving the Needle 2017* Conference to be held November 8-9, 2017. The College will receive \$2,500 from Microsoft to participate as a Gold sponsor for this event. This item was approved by Patrick Rinard on September 27, 2017. Department—Enrollment Services
73. Agreement with **Music Theatre International** to perform the musical “Urinetown” during the summer of 2018. The cost to the College for this Agreement will be \$1,815 and includes royalty, security, and materials rental fees. This item was approved by Anne Cooper on August 18, 2017. Department—Fine Arts, Clearwater
74. Agreement with **Pinellas County** to renew the License Agreement with the County which permits the County to use certain SPC properties for emergency relief activities in the event of a natural, technological, or man-made disaster. The renewal Agreement will commence as soon as possible and continue through April 30, 2022. There is no cost to the College. This item was approved by Brian Miles on August 3, 2017. Department—Facilities
75. Agreement with **Ricoh USA, Inc.** to provide a color print-scan-fax-copier, including maintenance, to be used at the Midtown Keene Center. The Agreement will commence as soon as possible and continue for the period of 5 years. The estimated cost for this Agreement will be \$6,544.20 for the lease and approximately \$2,500 for copies for a total cost of \$9,044.20. This item was approved by Patrick Rinard on September 21, 2017. Department—Provost's Office, Downtown
76. Agreement with the **City of Safety Harbor** that will allow the Street Team of the Clearwater Campus to participate in Safety Harbor's 3rd Friday events. This will give SPC a presence at these community events to answer questions and provide information about the College's programs. There is no cost to the College associated with entering into this Agreement. The Agreement will commence as soon as possible and will continue through December 2017. This item was approved by Stan Vittetoe on July 13, 2017. Department—Provost, CL
77. Agreement with **Schindler Elevator Corporation** to provide for the continued operation and maintenance of the Schindler elevator (SSN #99149) at the Clearwater Campus. The Agreement will commence September 1, 2017 and continue through August 31, 2018. The cost to the College for this Agreement will be \$574.15 per month for a total one-year cost of \$6,889.80. This item was approved by Brian Miles on July 14, 2017. Department—Facilities Services
78. Agreement with **Taylor Publishing Company d/b/a Balfour** to provide for the publication of the 2016-17 Yearbook for St. Petersburg Collegiate High School. The cost to the College for the Agreement will be \$5,291. This item was approved by Anne Cooper on September 27, 2017. Department—Collegiate High School
79. Agreement with **Teco Partners, Inc.** to provide energy consulting and supply procurement services related to the College's purchase and transport of gas to College facilities. The

Agreement will continue on a month-to-month basis; however, it is anticipated the services under the Agreement will be needed for the next year and if so, the total cost would be \$4,512. This item was approved by Brian Miles on July 13, 2017. Department—Facilities Services


Pamela S. Smith, Legal Services Coordinator, prepared this Quarterly Informational Report on contract items not exceeding \$325,000.

Suzanne Gardner, General Counsel, recommends approval.

ps0930171

October, 2017

MEMORANDUM

TO: Board of Trustees, St. Petersburg College
FROM: Tonjua Williams, President 
SUBJECT: Quarterly Report of Dell Financial agreements

Section B: Major Technology Contracts

Material for October 17, 2017 BOT meeting – Quarterly report of Dell Financial agreements.

Section B: Major Technology Contracts

1. Agreements with **Dell Financial Services, LLC** to lease a total of 66 computers; network infrastructure equipment for various sites; AV equipment and displays; and other computer equipment for use in various academic and administrative departments college wide. The leases, **entered into between August 1, 2017 and September 30, 2017** are for a period of 36 - 60 months. The cost to the College for these leases is expected to be approximately \$338,299.18. Should the College opt to purchase the equipment, if applicable, at the end of the lease term, the purchase option price would be an additional \$2,297.28. Based on the foregoing, the total cost to the College for these lease agreements will not exceed \$340,596.46. Should funds not be appropriated to continue the leases for any subsequent fiscal period during the term of the Agreement, the Agreement may be terminated with 60 days written notice prior to the end of the current fiscal period. These items are being reported to the Board based on its approval of the 2017-18 Budget on June 20, 2017. — Brian Miles