

Application Form

Organization Information

If you would like to complete this application in Word first and copy your answers over later, use the following link: [Download Application](#)

The evaluation rubric that will be used to score your request is now available here: [Download Rubric](#)

Please pay attention to character limits while working on your draft. These limits include spaces.

Organization Name*

Boley Centers, Inc.

Proposal Name*

Please choose a short name to identify this project within the grant portal:

Two Maintenance Vehicles Replacement

EIN*

591290089

Incorporation Year*

What year did your organization incorporate? This will be the year listed on your determination letter from the Internal Revenue Service.

1970

Organizational Mission Statement*

What is your organization's mission statement? This should be no longer than one or two sentences.

Mission: Boley Centers' mission is to enrich the lives of the people in recovery by providing the highest quality treatment, rehabilitation, employment and housing services.

Vision: Boley Centers' vision is to set the standard as an innovative leader for the services we provide.

Values: Boley Centers values respect, trust, and ethics in all our relationships.

Unique Entity ID (SAM)

Please provide your organization's Unique Entity ID number. This is a specific number used by the federal government to identify your organization. **This is different from a DUNS number, which the federal government no longer uses.**

If you do not have a Unique Entity ID number, you can create an account on SAM.gov and apply for one here (it is free and may take 3-4 days for approval): <https://sam.gov/content/home>

This field is optional as to not stop a qualifying organization from applying. **However**, a Unique Entity ID number will be required if your organization is approved for a grant. Your organization should apply for a number now if it does not yet have one.

Character Limit: 12

EPVBLR4HA7R4

Annual Operating Budget Size*

Please provide the amount of your annual operating budget, (expenditures only) for your entire organization.

\$19,500,000.00

Amount Requested*

The maximum grant amount is \$199,999.

\$70,458.00

Parent Non-Profit/Subsidiaries*

If your organization has a parent non-profit that has multiple subsidiaries, will multiple subsidiaries be applying in this process?

Example

Better Tomorrow is the parent non-profit of three organizations. Two of those organizations want to apply in this process. Both would select "Yes" on this question.

No

Request Specifics

Organization Programmatic Background*

Please describe the programming your organization offers to the community and the length of time it has been doing so. What does your organization **do** and **how long** has it been doing it?

Boley Centers is a private, not-for-profit, psychosocial rehabilitation agency providing services to citizens of Pinellas County for the past 52 years. Since 1970, Boley Centers has been providing case management, rehabilitation and treatment to people who are disabled and disadvantaged. Boley's Employment and Youth Services Program place approximately 600 disabled and disadvantaged people into jobs each year including 140 to 150 disadvantaged teens into paid internships each summer. Boley Centers' Supported Employment Program was recognized by the Dole and J.M. Foundations as being one of the 12 best community-based rehabilitation programs in the country for individuals with disabilities. Boley has been part of the Pinellas County social services community for over 52 years making the agency an expert on accessing needed services for a variety of populations. Boley Centers is a leader in developing affordable housing and has developed over 1,000 units of affordable housing in Pinellas County, including over 240 units that are reserved for people and families who are homeless. Boley has received the Developer of the Year award from the Florida Supportive Housing Coalition.

Boley Centers currently has 48 residential facilities including group homes, and independent housing. Boley Centers provides psychiatric rehabilitation services, supported housing, counseling, case management, supported employment, vocational evaluation and assessment, competitive job placement, psychiatric services for disadvantaged and disabled adults including Veterans, and two employment training and placement programs for Veterans funded through the Department of Labor. Boley has operated the After School Youth Employment Program for three years and has operated the Summer Youth Intern Program since 2003.

Boley is accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF) and has an annual operating budget of \$19.5 million.

Community Need*

Please describe the community need that exists for your programming. If you are able to cite quantitative, local data, that will strengthen your proposal.

Boley serves people with very low income and are disabled by mental illness and who may also have co-occurring substance use problems. We serve people who are homeless and affected by mental illness, veterans and high risk youth. With the exception of our Youth Employment Programs, 100% of the people we serve have a disability and low to very low income. We provide Case Management, Community Treatment, Vocational Services, psychiatric and substance use treatment. We provide Permanent Supported Housing to people who have a mental illness and to people who are homeless and who have the highest vulnerability scores as measured by the HLA's SPDAT.

Foundation for a Healthy St. Petersburg clearly outlines the needs of access to affordable housing: In 2016, an estimated 940,000 residents lived in Pinellas County and approximately 130,727 lived in poverty (U.S. Census Bureau). Poverty has a disproportionate impact on persons of color in Pinellas County - nearly 31% of those living in poverty identifying as African-American, 21% identifying as bi- or multi-racial, and 27% identifying as "other race (U.S. Census Bureau)." In Pinellas County, the top 20% household income is 4.8 times higher than the lowest 20% (University of Wisconsin Population Health Institute & Robert Wood Johnson Foundation, 2018). Pinellas County ranks 26th out of 67 counties in the state of Florida for overall health outcomes. Housing instability and homelessness have been linked to an increased risk of depression and mental illness for adults and children over their lifetimes. Adults living in unaffordable housing are more likely to describe themselves as being in "fair" or "poor" health compared to individuals living in affordable housing. Research suggests that stable and affordable housing may help individuals living with chronic diseases, such as HIV/AIDS, diabetes, and hypertension, increase their rates of medical care, maintain their treatment regimens, and achieve better health outcomes.

Negative Economic Impact on Organization*

The following question is the keystone of a strong application in this process. If your organization cannot demonstrate a negative economic impact from the pandemic, your application will not qualify for committee review. If you are uncertain about what constitutes negative economic impact or how to demonstrate it, please contact PCF staff for technical assistance.

Describe your organization's negative economic impact arising from the COVID-19 pandemic. Examples could include:

- A reduction in revenue from 2019 to 2020
- Inflationary pressures
- Increases in demand for services that have not been compensated for through new revenue
- The use of reserves for unbudgeted expenses since the onset of the pandemic, and such use of reserves has prevented the purchase of capital assets
- A need for capital assets to offset community need for which your organization does not have the resources to purchase due to the negative economic harm from the pandemic
- A need for additional capital assets to adapt operations to accommodate health and safety guidelines by the CDC
- Growth in restricted pandemic-related revenue that does not permit capital asset acquisition

You have the option to upload supporting documentation regarding negative economic impact. However, please limit your upload to no more than five pages.

Note: If you are applying for both a Small Purchase and Large Project, you may reuse the answer for this question PROVIDED THAT the negative economic impact is relevant to both requests. The Large Project Letter of Intent does not permit uploads to support the answer to this question.

1. Boley's bed utilization rates were reduced due to the need to social distance which reduced capacity and reduced our ability to draw down our contracts.
2. Reductions in capacity and services occurred due to lack of staffing. We experienced a high staff vacancy rate due to people taking less risky jobs and compounded by our inability to increase wages to a competitive level.
3. We had increased vacancies in our permanent supported housing because shelters closed their doors or reduced capacity which in turn limited referrals to our units.
4. We experienced vacancies in our maintenance positions which greatly slowed our ability to get units "turned" (ready for new occupants)
5. We have continued to have recruitment issues due to low wages, employee fear, employee absences due to COVID and resulting quarantines
6. Extreme inflation has increased the cost of operations with no offsetting revenues
7. Post Covid we received funds to administer several COVID rental assistance programs. These funds did not pay for any administrative fees and we had to hire temporary help to get the documentation completed in order to get the funds to the people in need of assistance.

Proposal Description*

The American Rescue Plan Act requires a request that is reasonable and proportional to the level of economic impact your organization experienced. This means the request you describe below should not be greater than the economic harm your organization has suffered.

Please describe your purchase proposal and address the following:

- What will you be purchasing with these funds?
- What is the estimated lifespan of the purchase/improvement?
- How does it address the negative economic harm you described in the previous question?

We are requesting funds to replace two maintenance vehicles that have exceedingly high mileage (two 2008 Ford Cargo Van with 156,965 mileage and 135,131 mileage) and are in desperate need of replacement. We expect the new maintenance vehicles to last a minimum of eight to ten years. These vehicles directly address the issue with the delay in our ability to "turn" apartments, that is, complete the painting, replace flooring and other maintenance needed before an apartment is ready for a new tenant. Our clients, particularly our clients who are chronically homeless and not stabilized on medications tend to have apartments with need major repairs. Also -- since COVID restrictions have lifted we are resuming our prevention maintenance activities -- routine maintenance that helps to reduce emergency maintenance issues. With over 1,000 units of housing, our maintenance department is extremely busy and needs reliable transportation. In the past we have replaced maintenance vehicles with retiring transportation vehicles, however, since we have replaced traditional vans with Cutters (a type of high volume passenger vehicle associated with increased safety features) this has not been feasible. The Cutters get very low mileage and are not conducive to being altered to a maintenance vehicle.

Guiding Principles - Client Impact*

The American Rescue Plan Act, which provides the funding for this grant program, aims to ensure an equitable recovery from the COVID-19 pandemic. The term "equity" is defined as:

The consistent and systematic fair, just, and impartial treatment of all individuals, including individuals who belong to underserved communities that have been denied such treatment, such as Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color; members of religious minorities; lesbian, gay, bisexual, transgender, and queer (LGBTQ+) persons; persons with disabilities; persons who live in rural areas; and persons otherwise adversely affected by persistent poverty or inequality.

One of the guiding principles of this fund is that it will apply a lens of equity to ensure the needs of specified priority populations are met.

Will this purchase benefit the community members defined above that have experienced disproportionate negative impacts from the COVID-19 pandemic? If so, how?

Boley Centers serves all low and very low income households (100% below 60% AMI) who also have disabilities -- all individuals (100%) will have a severe and persistent mental illness. Households have the head of household affected by mental illness. Our housing units also serve some households who are victims of domestic violence, but these residents will also have a mental illness.

The residents of housing provided by Boley Centers and Pinellas Affordable Living, Inc. all (100%) have incomes at or below 60 percent AMI with the majority having incomes below 35% AMI. The majority were homeless prior to entering PAL housing.

Boley Centers serves all individuals in need of our services. We do not discriminate or deny services to anyone because of the color of their skin, their race, religion, their sexual identity, or their income. Boley Centers serves Pinellas County's most vulnerable citizens.

Number Served*

How many people will directly benefit from this capital purchase annually?

2230

Unduplicated vs. Duplicated*

Is the number indicated above duplicated or unduplicated?

Duplicated: A client is counted each time they access services

Unduplicated: A client is counted once, regardless of the number of times they access services

Example: ABC Food Bank operates two mobile food pantries, one in Clearwater and one in St. Petersburg. Taylor, a Pinellas County resident, goes to both food pantries. If ABC Food Bank counts Taylor's visit TWICE, it is duplicated. If ABC Food Bank counts Taylor's visit ONCE, it is unduplicated.

Unduplicated

Other (Explanation Required)

If you selected "Other" in the previous question, please explain how your organization determined the number of clients that will benefit from the proposed capital purchase.

[Unanswered]

The American Rescue Plan Act (ARPA) prioritizes organizations that either have headquarters or carry out the majority of their operations inside Qualified Census Tracts (QCTs). QCTs are a standard method of identifying communities with a large proportion of low-income residents. The U.S. Department of Housing and Urban Development determines what areas qualify as QCT.

To assess if your organization serves or is headquartered in a QCT, use the following link:

https://www.huduser.gov/portal/sadda/sadda_qct.html

In the top right-hand corner, choose the state of Florida and Pinellas County. Then on the left-hand side of the screen, click the box next to "Color QCT Qualified Tracts." The QCT zones are denoted in purple. You can also map your address by adding it into the address box at the top to see if your location is inside the zones.

Below, please provide the location of your operations and the location of your headquarters, if different.

Headquarters Location*

Please provide your organization's headquarters address as it appears on your Sunbiz account. To check your Sunbiz registration, you may search here: <https://dos.myflorida.com/sunbiz/search/>

445 31st Street N., St. Petersburg, FL 33713

QCT Determination - Headquarters*

Is this organization headquartered in a QCT?

No

Purchase Location*

Where will the majority of the activities related to the purchase(s) take place?

Examples

- If you are proposing the purchase of a van that will deliver to multiple areas within Pinellas County, specifically mention what areas those are.
- If your purchase enables remote access to your services, such as telehealth, provide geographical data around where the majority of your clients reside (presuming they will access your services from their residence).

Boley properties are located from south St. Petersburg to north Clearwater. We have several properties served by the vehicles in the QCTs. These include:
 Twin Brooks Apartments 42 units (3450, 3460, 3480 & 3490 24th Ave S., St. Petersburg); Broadwater Apartments 44 units (3607, 3611, & 3615 37th St S, St. Petersburg, Clam Bayou Apartments 18 units (3910, 3950 & 3990 34th Ave S, St. Petersburg), Poynter Preserves 24 units (4100, 4130 & 4146 34th Ave S., St. Petersburg) Oaks Apartments 12 units (618 11th Ave S, St. Petersburg) Fountain View Apartments 6 units (430 13th Ave S, St. Petersburg, Grove Park 11 units (2664, & 2702 Grove Park Ave N and 2665 & 2697 52 Ave N, St. Petersburg), Salt Creek 18 units (426 Paris Ave S., St. Petersburg) Tyrone Apartments 5 units (8060 & 8070 47th Ave N, St. Petersburg), Paul's Place 9 units (4662 & 4638 71st Way N, St. Petersburg,) Sunset Point 14 units (1401 & 1413 Sunset Point Rd, Clearwater) Dome District 18 units (1029 Burlington Ave N, St. Petersburg)

QCT Determination - Purchase*

Does this organization's proposed purchase benefit residents of QCTs?

Yes

Community Connection

This section aims to capture general demographic data about your organization and to see how you engage with and represent the community you serve. PCF has generalized the demographic data questions more than it has in other processes because of the public nature of this process. PCF understands that identity disclosure can be a sensitive matter, and wants to respect your organization's board and staff. If your organization feels comfortable sharing more detailed demographic information, it may do so in the "Community Representation and Connection" section.

Community Representation and Connection*

Describe how your organization is representative of, or has authentic connections to, the community your proposal seeks to serve. You can list other community-based organizations that work on programming with you and/or list examples of your work within this community.

Boley Centers provides services, housing and treatment to people affected by disabilities with low income. Pinellas County residents demographic break down is 82% White, 11% Black, 11% Hispanic, 4% Asian, 2% 2

or more races. Boley's staff are 46% Black, 46% White, 1% Asian, 1.6% 2 or more races. Boley's clients are 35% Black, 56% white, .7% Asian, 3.7% multiracial, 4% other. We do not collect data regarding LGBTQ+ or Neurodiversity. Our housing is found throughout Pinellas County from North Clearwater to South St. Petersburg. We have been a social service agency in Pinellas County since 1970 and our staff have close formal and informal working relationships with our fellow social service agencies. We work together to coordinate services and to ensure the clients receive the services they need from the most appropriate service provider in the area. We have been members of the local homeless coalition since its inception in the 1980s, we work closely with the local mental health agencies Directions and Suncoast, we have close working relationships with Day Star, HEP, Evara (formerly Community Health Centers) St. Vincent de Paul, Salvation Army, local churches, local veteran organizations and organizations that provide services/supplies to children such as Baby Cycle and Santa's Angels. We manage 110 HOPWA vouchers and therefore work closely with Metro Wellness and Community Centers, EPIC, Catholic Charities and other agencies providing services to people with HIV/AIDS. Our outreach is focused based on the populations we serve, with our Youth Employment Programs reaching out to the local school systems, our group homes reaching out to local psychiatric hospitals and the jail, and out homeless outreach staff working with the HLA's Coordinated Entry and local shelters and the VA.

Leadership Demographics - Board Membership*

Do your board members consider themselves a member of one or more of the following populations? Check all that apply.

- BIPOC defined as Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color
- LGBTQ+ (Lesbian, Gay, Bisexual, Transgender, Queer+)
- Neurodiverse/physically disabled

BIPOC
LGBTQ+

Leadership Demographics - Executive Level Leadership Team*

Does your executive leadership team consider themselves a member of one or more of the following populations? Check all that apply.

- BIPOC defined as Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color
- LGBTQ+ (Lesbian, Gay, Bisexual, Transgender, Queer+)
- Neurodiverse/physically disabled

If your organization is volunteer-run and does not have an executive leadership team, please select "Not applicable."

BIPOC
LGBTQ+

Leadership Demographics - CEO/Executive Director*

Does your CEO/Executive Director consider themselves a member of one or more of the following populations? Check all that apply.

- BIPOC defined as Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color
- LGBTQ+ defined as Lesbian, Gay, Bisexual, Transgender, Queer+
- Neurodiverse/physically disabled

If your organization is volunteer-run and does not have an executive leader, please select "Not applicable."

Not applicable

Proposal Costs

Purchase Estimates/Bids*

You must combine all bids/estimates into one file.

Attach current verifiable bids, estimates, or price lists [from your potential vendor(s)]. Please ensure there is a date listed or when you obtained these estimates/bids, as they must be from within the past sixty (60) days.

- If your purchase is **BELOW** \$75,000, you must upload **TWO** verifiable bids or estimates for the proposed purchases.
- If your purchase is **EQUAL TO** or **MORE THAN** \$75,000, you must upload **THREE** verifiable bids or estimates for your proposed purchases.

This can be as simple as screenshots from Amazon or Best Buy (though PCF does not endorse or recommend any specific vendor) or may be from specialized vendors that sell your proposed purchase. If you have concerns regarding bids or estimates, please reach out to PCF staff.

two maintenance vehicle bids.pdf

Sole Source*

In some cases, a proposed small purchase is only available from a single vendor, and as such, only one bid/estimate can be uploaded. If this is the case for your organization, please explain in the field below. Otherwise, write "N/A" below.

NA

Related Parties*

Are any of the contractors/vendors that have provided bids/estimates a related party to your organization?

Examples of Related Parties

- A board member that owns the contracting company that provided a bid
- The relative of a director, officer, or executive team member owns a company that provided an estimate
- The CEO of the applying organization has a financial interest in the construction company providing a bid

If **yes**, identify the vendor and describe the relationship.

If **no**, write "No related parties below."

No related parties

Budget Summary*

Please use **THIS TEMPLATE** to indicate costs and any cash match your organization may have for the proposed purchases. Note: this spreadsheet will automatically round numbers to make it easier to read for committee members.

Please note that indirect costs are not permitted for small purchases.

If you have additional notes to add to your budget summary, you may do so in the text box below.

ARPA-Budget-Template-Small-Purchases (2).xlsx

Our budget on the template comes to \$61,268. We have requested 15% more -- \$70,458 taking into consideration the soaring inflation that we are experiencing. We expect the costs of the vans to have increased by the time funding is available to purchase them.

Other Funding Sources*

Please describe any other funding not already mentioned that your organization has applied for or obtained for this purchase.

This includes but is not limited to Community Block Development Grants (CBDG), local government grants (including Tourist Development Council funding), foundation grants, and private donors (you do not need to disclose donor identities but simply indicate the amount raised for this purchase). This includes any matching grants or in-kind contributions you may have obtained.

Please be sure these other funding sources are represented in the "Applicant Match" column in the budget summary uploaded above.

We have not applied for or received any other funding sources. All of our applications this year have been for operational funding. We are having a severe staff shortage based somewhat on historic low salaries and have been focusing on increasing salaries to be competitive and on keeping our group homes staffed and our doors open. DOT, our only other way to apply for vehicles, only pays for passenger vehicles historically.

Changes in Operating Costs*

Please answer this question based on the descriptions below:

- If this project **increases** ongoing operational costs (programmatic, operating maintenance or other costs), how will you compensate for the difference?
- If this purchase **decreases** ongoing operating costs, how will it do so?
- If this purchase **does not affect** operating costs, please note so below.

This purchase will have no impact on operating costs.

Organization Documentation

Please reach out to PCF staff if you have trouble uploading the files below. We are able to assist with file conversion and file compression.

Organization Budget*

Please upload your most recent, board-approved organizational budget for this fiscal year. PDF and Excel documents are accepted.

Proposed 2022 - 2023 Operating Budget.pdf

Board of Directors List*

Please upload your Board of Directors list.

Excel, Word, and PDF file formats are accepted.

Board List 22-23.docx

IRS Form 990*

Please upload a PDF copy of your most recently submitted IRS Form 990.

If Form 990 from your most recent fiscal year is delayed or you have received an extension, please explain in the text space below. You may also explain if you don't have a Form 990 due to organization type. You should still upload the most recent publicly available 990.

If you file a Form 990-EZ and do not have anything to attach, please note so below.

Only PDF files are permitted.

Boley Centers_US_2020_PublicInspectionTaxDocuments.pdf

Most Recent Financial Statements*

Upload a PDF version of your most recent financial statements. If you have audited financial statements, please upload the most recently conducted audit. If you do not have a recent audit, please explain why.

BOLEY CENTERS, INC-ISSUED FINANCIAL STATEMENTS- 2020-2021.pdf

Insurance Requirements

Evidence of Insurance Coverage*

Grantees of the ARPA Nonprofit Capital Project Fund will be required to maintain appropriate insurance related to your operations and this purchase. PCF will determine whether this coverage is appropriate.

Please upload evidence of insurance.

If your organization does not have evidence of insurance coverage, please provide an explanation as to why.

Certificate.pdf

Insurance Requirement*

If you are awarded a contract from the ARPA Nonprofit Capital Project Fund, you will be required to list Pinellas Community Foundation as an additional insured through your general liability insurance or other appropriate coverages for the duration of the contract. If you would like to check with your insurance carrier on how to do this, here is the information about PCF you will need:

Pinellas Community Foundation
17755 US Highway 19 N
Suite 150
Clearwater, FL 33764
727-531-0058

Please check the box below to indicate that you understand and will be able to comply with this requirement if you are awarded a contract.

PCF will not ask for a certificate naming us as additional insured until the contracting stage.

Yes, I understand and will comply with this requirement if awarded a contract.

Post-Grant Requirements

Reporting Requirements Acknowledgment*

Grantees will be required to submit a pre-award agreement within two weeks of receiving an award notice. In addition, grantees will be required to submit a report within 30 days after the purchase is completed.

Financial information justifying all expenditures will also need to be provided. This includes but is not limited to:

- Invoices
- Canceled checks
- Credit card statements, along with a record of paying the credit card.

If you have any questions, please contact Rose Cervantes, ARPA Program Officer at rcervantes@pinellascf.org.
Yes, I agree to submit this grant agreement and impact report within the specified timeframes.

Additional Information

Budget Summary

NO LONGER USED, REPLACED IN APP WITH UPLOAD FIELD INCLUDED

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If you have additional notes to add to your budget summary, you may do so in the text box below.

Our budget on the template comes to \$61,268. We have request 15% more -- \$70,458 taking into consideration the soaring inflation that we are experiencing. We expect the costs of the vans to have increased by the time funding is available to purchase them.

Additional Upload

If you have something to share, you can upload it here in PDF format.

Anything else to share?

Is there anything else that you would like Pinellas Community Foundation to know or other information your organization would like to share that isn't addressed elsewhere in this application?

Brief Project Descriptor

Please briefly describe this organization's request.

File Attachment Summary

Applicant File Uploads

- two maintenance vehicle bids.pdf
- ARPA-Budget-Template-Small-Purchases (2).xlsx
- Proposed 2022 - 2023 Operating Budget.pdf
- Board List 22-23.docx
- Boley Centers_US_2020_PublicInspectionTaxDocuments.pdf
- BOLEY CENTERS, INC-ISSUED FINANCIAL STATEMENTS- 2020-2021.pdf
- Certificate.pdf

CNGP510 Targeted Product Offering Vehicle Order 08/25/22 08:43:48
 ==> Dealer: F24201
 Model Yr: 23 Body: S6S Beg Ord: 0825 No Units: 001, End Ord:
 Ord Type: 0 Order Code: 100A
 Priority: L3 Paint: Z2 Trim: SB Accent: Roof:
 Add: 76R 87R 794
 Del:
 Init: Cust/Flt Name: BOLEY CENTER Ord FIN: QS277 User FIN: QS277
 PO Number: Ship to Code: Additional Trailers (Y/N):

CNGP530 VEHICLE ORDER CONFIRMATION 08/25/22 08:43:58
 ==> Dealer: F24201
 2023 TRAN CONNCT VAN Page: 1 of 1
 Order No: 0825 Priority: L3 Ord FIN: QS277 Order Type: 5B Price Level: 315
 Ord Code: 100A Cust/Flt Name: BOLEY CENTER PO Number:

	RETAIL	DLR INV		RETAIL	DLR INV
S6S	TRAN CON-VAN-XL	\$31290	\$30039.00	SP FLT ACCT CR	\$(870.00)
	.105" WHEELBASE			FUEL CHARGE	8188
Z2	FROZEN WHITE			PRICED DORA	NC NC
S	VINYL SEATS			DEST AND DELIV	1695 1695.00
B	EBONY			TOTAL BASE AND OPTIONS	33345 31200.88
100A	ORDER CODE			TOTAL	33345 31200.88
992	.2.0L ENGINE	NC	NC	*THIS IS NOT AN INVOICE*	
448	.8 SPD AUTO TRAN	NC	NC	*TOTAL PRICE EXCLUDES COMP PRICE ALLOW*	
T55	.P215/55R16 BSW	NC	NC	<i>#30,734</i>	
20R	5130# GVWR			<i>- 100 GOV'T PRICE CONCESSION</i>	
425	50 STATE EMISS	NC	NC	<i>#30,634 + TAG + TITLE FEE</i>	
76R	REV SENSING SYS	295	269.00		
794	PRICE CONCESSN				
	REMARKS TRAILER				
87R	KEY FOBS	65	59.00		

F1=Help F2=Return to Order F3/F12=Veh Ord Menu
 F4=Submit F5=Add to Library F9=View Trailers
 S099 - PRESS F4 TO SUBMIT QC048602

Premium Options & Packages

Integrated Voice Command w/Bluetooth

Remote Keyless Entry w/Integrated Key Transmitter 2 Door Curb/Courtesy and Illuminated Entry

PARK ASSIST SYSTEM DELETE

Dual Stage Driver And Passenger Seat-Mounted Side Airbags

ADDITIONAL EQUIPMENT

ENGINE

PRIMARY PAINT

SEAT TYPE

TRANSMISSION

WHEELS



Payment Options

CASH

\$35,325

MSRP: \$32,335

Get E-Price

Other Vehicles You May Like

Specials

Value Your Trade



Shop by Payment



(11) Photos

New 2022 RAM PROMASTER CITY CARGO VAN

VIN: ZFBHRFAB9N6W82847 STOCK:

MSRP	\$32,335(https://www.suncoastjd.com/inventory/new-2022-ram-promaster-city-4x2-2wd-minivans-zfbhrfab9n6w82847/)
Suncoast Appearance & Protection Package	+\$2,990(https://www.suncoastjd.com/inventory/new-2022-ram-promaster-city-4x2-2wd-minivans-zfbhrfab9n6w82847/)
Sale Price	\$35,325(https://www.suncoastjd.com/inventory/new-2022-ram-promaster-city-4x2-2wd-minivans-zfbhrfab9n6w82847/) Value Your Trade

Specials

Shop by Payment

Details

This may be a hidden gem.
11 people have recently viewed it.



View Payment Options

With Suncoast Express



Value Trade-In

See Your Car's Value



All with no impact to your credit score

Estimate financing



Schedule Test Drive

Value Your Trade (/value-your-trade/)



Value Your Trade

Enter Year Make Model Trim

Basic Info
Specials

Value Your Trade

Shop by Payment

Boley Centers, Inc.
Proposed 2022- 2023 Operating Budget

	FY 21-22 Projected Actual	FY 21 - 22 Approved Budget	FY 22 - 23 Proposed Budget	Variance Proposed Budget to Projected Actual
REVENUES				
Nonrestricted Revenues	1,851,964	1,961,308	1,900,300	(48,336)
County Revenues	718,469	595,711	679,409	39,060
DVR Revenues	224,132	122,500	178,400	45,732
State Revenues	4,469,972	5,388,893	4,725,926	(255,954)
Medicaid & Medicare	1,647,675	1,169,159	1,397,996	249,679
Federal Funding	6,178,987	6,265,010	6,332,579	(153,592)
Local Funding	2,640,428	2,230,485	2,321,031	319,397
Other Grants and Contracts	549,032	1,764,825	1,979,776	(1,430,744)
Total Revenue	18,280,660	19,497,891	19,515,417	(1,234,758)
EXPENSES				
Salaries	6,833,252	6,650,662	7,984,223	(1,150,971)
Intern (Youth) Salaries	-	689,326	725,000	(725,000)
Benefits	1,749,707	1,876,603	1,747,104	2,603
Professional Fees	254,661	348,998	267,700	(13,039)
Contractual Services	1,816,565	1,708,605	277,550	1,539,015
Operating Supplies	175,707	204,845	183,000	(7,293)
Food Supplies	242,152	294,896	250,000	(7,848)
Medical Supplies	123,180	160,620	146,765	(23,585)
Client Support	673,857	744,860	740,750	(66,893)
Building & Equip Rental	220,350	227,060	198,040	22,310
Voucher Expense	3,294,980	3,358,680	3,359,071	(64,091)
Repairs & Maintenance	478,185	450,358	538,454	(60,269)
Utilities	830,638	690,713	788,000	42,638
Vehicle Expense	116,164	105,987	116,000	164
Small Furniture & Equip	57,823	66,400	263,665	(205,842)
Personnel Costs	16,546	29,801	23,300	(6,754)
Agency Expenses	76,701	87,500	83,000	(6,299)
Travel	79,513	112,058	112,500	(32,987)
Insurance	344,239	337,907	385,995	(41,756)
Taxes & Licenses	32,165	43,721	37,100	(4,935)
Interest Expense	38,456	50,000	42,000	(3,544)
Other Costs	595,818	533,928	570,000	25,818
Depreciation & Amortization	673,785	652,407	676,200	(2,415)
Total Expenses	18,724,446	19,425,935	19,515,417	(790,971)
Net Income/(Deficit)	(443,786)	71,956	-	(443,786)



BOARD OF DIRECTORS
FY 2022 - 2023

<u>NAME/ADDRESS</u>	<u>OFFICE</u>	<u>OCCUPATION</u>
JOSEPH L. SMITH 980 64 TH Avenue South St. Petersburg, FL 33705 Cell (727) 480-0089 JLOSmith1@gmail.com	CHAIRMAN	Community Involvement
LEONARD COLEY 2602 Bethel Ct. South St. Petersburg, FL 33712 Home (727) 827-0447 Cell (727) 385-2309 coley5leonard@verizon.net	FIRST VICE CHAIRMAN	Community Involvement
MAJOR MARKUS HUGHES 1301 1 st Avenue North St Petersburg, FL 33705 Work (727) 893-4821 Cell (727) 422-3602 Markus.Hughes@stpete.org	SECOND VICE CHAIRMAN	St. Petersburg Police Dept.
RUTLAND BUSSEY 34421 Tranquiview Lane Dade City, FL 33523 Office (727) 572-6864 Home (352) 521-5015 Cell (727) 515-1926 Rutland.bussey@gmail.com		Financial
PAUL V. MISIEWICZ 9700 – 94 th St. Seminole, FL 33777 Home (727) 398-7222 Cell (727) 744-8304 pmisiewi@tampabay.rr.com		Commercial Business
JOHN T. "JACK" HEBERT 2655 Ulmerton Rd. #276 Clearwater, FL 33762 Office (727) 572-4665 Home (727) 573-1528 Cell (727) 560-3323 jack@themallardgroup.com		Advertising The Mallard Group

NAME/ADDRESS**OCCUPATION**

SANDRA INCORVIA
1105 Huntington Lane
Safety Harbor, FL 34695
Home (727) 724-6008
Cell (727) 580-2157
JSIncorvia@gmail.com

Family Member

MARTIN T. LOTT
3510 E. Maritana Drive
St. Pete Beach, FL 33706
Cell (727) 271-6211
758mtl@gmail.com

Architect/Veteran

SUSAN PROCTOR
3738 24th Ave N
St. Petersburg, FL 33713
Cell (727) 410-6741
sfp531@yahoo.com

Real Estate Agent/
Community Involvement

JOSEPH STRINGER
3480 – 24TH Ave. S, #29
Twin Brooks
St. Petersburg, FL 33711
Cell (727) 520-2587
jstrin59@gmail.com

Consumer/Prior Homeless

DR. ROBERT WALLACE, M.D.
1990 59th St N
St Pete Fl 33710
Cell (727) 424-4101
bjwallacemd1@hotmail.com

Physician

DR. JAMES SEWELL
301 2nd St. N. #4
St. Petersburg, FL 33701
Cell (727) 204-0518
jjmdsewell@aol.com

Law Enforcement

CORPORATE OFFICERS

KEVIN MARRONE
Boley Centers, Inc.
445 31st Street North
St. Petersburg, FL 33713
Cell (727) 224-8381
kevin.marrone@boleycenters.org

President
Chief Executive Officer

MICHELLE JOSEPH
Boley Centers, Inc.
6655 66th St. N.
Pinellas Park, FL 33781
(727) 545-7564 x 3271

Chief Financial Officer

JACK HUMBURG

Boley Centers, Inc.
445 31st Street North
St. Petersburg, FL 33713
Cell (727) 224-8313
jack.humburg@boleycenters.org

Corporate Secretary
Chief Operating Officer

CHRISTA BRUNING

Boley Centers, Inc.
445 31st Street North
St. Petersburg, FL 33713
Cell (727) 776-1084
christa.bruning@boleycenters.org

Chief Clinical Officer

Form **990****Return of Organization Exempt From Income Tax**
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2020**Open to Public Inspection**Department of the Treasury
Internal Revenue Service

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

Go to www.irs.gov/Form990 for instructions and the latest information.**A For the 2020 calendar year, or tax year beginning 07/01/20, and ending 06/30/21**

B Check if applicable: <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	C Name of organization BOLEY CENTERS, INC.	D Employer identification number 59-1290089
	Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 445 31ST STREET NORTH	E Telephone number 727-821-4819
	City or town, state or province, country, and ZIP or foreign postal code ST. PETERSBURG FL 33713	G Gross receipts\$ 21,279,040
	F Name and address of principal officer: KEVIN MARRONE 445 31ST STREET NORTH ST PETERSBURG FL 33713	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
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	J Website: WWW.BOLEYCENTERS.ORG	H(c) Group exemption number
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other	L Year of formation: 1970	M State of legal domicile: FL

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: BOLEY CENTERS' MISSION IS TO ENRICH THE LIVES OF PEOPLE IN RECOVERY BY PROVIDING THE HIGHEST QUALITY TREATMENT, REHABILITATION, EMPLOYMENT AND HOUSING SERVICES.		
	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	13
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	598
	6 Total number of volunteers (estimate if necessary)	6	13
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	14,717,001	17,928,219
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,300,953	3,344,810
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	17,590	6,011
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-15,685	0
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	4,177,602	4,380,627
	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)	9,900,216	10,393,108
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25)	0	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,867,716	5,046,374
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	18,945,534	19,820,109	
19 Revenue less expenses. Subtract line 18 from line 12	-925,675	1,458,931	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	17,949,979	18,275,440
	22 Net assets or fund balances. Subtract line 21 from line 20	9,981,939	8,830,251
		7,968,040	9,445,189

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 KEVIN MARRONE	Date			
	Type or print name and title CEO				
Paid Preparer Use Only	Print/Type preparer's name DANIEL HEVIA	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P01297993
	Firm's name PRIDA GUIDA & PEREZ, P.A.	Firm's EIN 59-1978917			
	Firm's address 1106 N FRANKLIN ST TAMPA, FL 33602-3813	Phone no. 813-226-6091			

May the IRS discuss this return with the preparer shown above? See instructions Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2020)

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:

BOLEY CENTERS' MISSION IS TO ENRICH THE LIVES OF PEOPLE IN RECOVERY BY PROVIDING THE HIGHEST QUALITY TREATMENT, REHABILITATION, EMPLOYMENT AND HOUSING SERVICES.

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 \$ **5,547,826** including grants of \$) (Revenue \$ **987,150**)

BOLEY CENTERS' EXEMPT PURPOSE IS TO PROVIDE RESIDENTIAL HOUSING PROGRAMS WITH VARIOUS LEVELS OF STRUCTURE, SUPERVISION, INDEPENDENT LIVING-SKILLS TEACHING, COUNSELING, REHABILITATION AND TREATMENT SERVICES TO INDIVIDUALS WITH CHRONIC MENTAL ILLNESS IN PINELLAS COUNTY, FLORIDA.

4b (Code:) (Expenses \$ **4,312,693** including grants of \$ **3,884,559**) (Revenue \$ **299,591**)

BOLEY HOUSING SERVICES HAS PROVIDED HOUSING AND SUPPORT TO INDIVIDUALS WITH CHRONIC MENTAL ILLNESS SINCE 1970. BOLEY CURRENTLY OWNS AND MANAGES A TOTAL OF 615 BEDS COMPRISED OF 62 GROUP HOME BEDS, 45 SAFE HAVEN BEDS, 38 TRANSITIONAL HOMELESS SUPERVISED APARTMENTS, 191 PERMANENT HOMELESS APARTMENT BEDS, 263 PERMANENT SUPPORTED HOUSING APARTMENT BEDS AND 16 INTEGRATED APARTMENT UNITS. ADDITIONALLY, BOLEY CENTERS ACTS AS A HOUSING AUTHORITY AND MANAGES 382 HOUSING VOUCHERS FOR A TOTAL OF 997 UNITS OF HOUSING UNDER MANANGEMENT.

4c (Code:) (Expenses \$ **2,609,057** including grants of \$ **496,068**) (Revenue \$)

SUPPORTED HOUSING/SUPPORTED LIVING PROGRAM FOCUSES SERVICES AROUND COMMUNITY-BASED REHABILITATIVE PRINCIPLES. TEAM MEMBERS PROVIDE SERVICE AND SUPPORT TO CONSUMERS THAT ARE DESIGNED TO ENHANCE THE CONSUMER'S ABILITY TO ACQUIRE THE SKILLS AND DEVELOP THE SUPPORT NETWORKS NECCESARY TO LIVE INDEPENDENTLY IN A SETTING OF THEIR CHOOSING. THIS INCLUDES ESTABLISHING COMMUNITY INTEGRATION, SKILL ATTAINMENT AND RESTORATION OF FUNCTIONAL ABILITY. TEAM MEMBERS WORK CLOSELY WITH CONSUMERS AND THEIR FAMILY MEMBERS TO IDENTIFY THEIR INDIVIDUAL AREAS OF NEED. THE TEAM MEMBERS THEN DEVELOP INDIVIDUAL TREATMENT PLANS DESIGNED TO HELP THE INDIVIDUALS ACQUIRE OR RESTORE SKILLS AND/OR SUPPORTS REQUIRED TO OBTAIN THEIR IDENTIFIED GOALS.

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

(Expenses \$ **4,831,609** including grants of \$) (Revenue \$ **2,058,069**)

4e Total program service expenses **17,301,185**

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 donor-restricted endowments or in 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
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	

Part IV Checklist of Required Schedules (continued)

	Yes	No
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 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) 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, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	X	
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <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	

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	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
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 598		
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 on 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
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 on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X

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 on 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 on Schedule O. 13		
b	Enter the number of voting members included on line 1a, above, who are independent 13		
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, 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 on 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?	X	

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 (1024 or 1024-A, 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 on Schedule O)
- 19** Describe on 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

KEVIN MARRONE
ST PETERSBURG

445 31ST STREET NORTH

FL 33713

727-821-4819

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. See instructions for the order in which to list the persons above.

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 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) RUTLAND BUSSEY	1.00									
CHAIRMAN	12.00	X		X			0	0	0	
(2) LEONARD COLEY	1.00									
DIRECTOR	12.00	X					0	0	0	
(3) JACK HEBERT	1.00									
DIRECTOR	12.00	X					0	0	0	
(4) SANDY INCORVIA	1.00									
DIRECTOR	12.00	X					0	0	0	
(5) MARTIN T LOTT	1.00									
DIRECTOR	12.00	X					0	0	0	
(6) PAUL V MISIEWICZ	1.00									
DIRECTOR	12.00	X		X			0	0	0	
(7) JOSEPH SMITH	1.00									
DIRECTOR	12.00	X		X			0	0	0	
(8) ROBERT WALLACE MD	1.00									
DIRECTOR	12.00	X					0	0	0	
(9) LIEUTENANT MARKUS HUGHES	1.00									
DIRECTOR	12.00	X					0	0	0	
(10) JOSEPH STRINGER	1.00									
DIRECTOR	12.00	X					0	0	0	
(11) GARY MACMATH	35.00									
EXEC DIRECTOR	5.00			X			157,748	0	4,742	

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

(A) Name and title	(B) Average hours per week 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) KEVIN MARRONE CEO	35.00 5.00			X				115,666	0	0
(13) SUSAN PROCTOR DIRECTOR	1.00 12.00	X						0	0	0
1b Subtotal								273,414		4,742
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								273,414		4,742

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 **2**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		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>	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>		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					
	c Fundraising events	1c					
	d Related organizations	1d	649,008				
	e Government grants (contributions)	1e	16,826,119				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	453,092				
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f		17,928,219				
Program Service Revenue	2a MEDICAID/MEDICARE	Business Code	624100	1,084,036	1,084,036		
	b RENT		624100	544,508	544,508		
	c THRIFT STORE		624100	501,123	501,123		
	d RESERACH STUDY PARTICIPATION		624100	427,257	427,257		
	e MANAGEMENT FEES REVENUE		624100	311,350	311,350		
	f All other program service revenue		624100	476,536	476,536		
	g Total. Add lines 2a-2f		3,344,810				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		6,011			6,011	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses	6b					
	c Rental inc. or (loss)	6c					
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other				
	b Less: cost or other basis and sales exps.	7b					
c Gain or (loss)	7c						
d Net gain or (loss)							
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11a	Business Code					
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions			21,279,040	3,344,810	0	6,011	

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	496,068	496,068		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	3,884,559	3,884,559		
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	272,698		272,698	
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	60,587		60,587	
7 Other salaries and wages	8,255,944	7,158,103	1,097,841	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	138,874	110,369	28,505	
9 Other employee benefits	1,017,599	916,678	100,921	
10 Payroll taxes	647,406	562,293	85,113	
11 Fees for services (nonemployees):				
a Management	28,777	24,847	3,930	
b Legal	199,705	165,438	34,267	
c Accounting	111,420	28,055	83,365	
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.)	428,075	362,690	65,385	
12 Advertising and promotion				
13 Office expenses	204,567	151,886	52,681	
14 Information technology				
15 Royalties				
16 Occupancy	190,344	175,633	14,711	
17 Travel	70,965	68,588	2,377	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	143,875	131,383	12,492	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	666,639	517,462	149,177	
23 Insurance	305,027	166,726	138,301	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a UTILITIES	786,017	730,924	55,093	
b CLIENT SUPPORT	694,149	694,149		
c REPAIRS AND MAINTENANCE	569,220	418,247	150,973	
d FOOD SUPPLIES	208,630	206,086	2,544	
e All other expenses	438,964	331,001	107,963	
25 Total functional expenses. Add lines 1 through 24e	19,820,109	17,301,185	2,518,924	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	2,958,959	1	2,109,401
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	1,645,213	3	2,509,252
	4	Accounts receivable, net	17,240	4	51,550
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	174,974	8	183,316
	9	Prepaid expenses and deferred charges	238,026	9	143,907
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 21,280,353		
	b	Less: accumulated depreciation	10b 11,807,870	10c	9,472,483
	11	Investments—publicly traded securities	78,635	11	80,990
	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	3,094,166	15	3,724,541
16	Total assets. Add lines 1 through 15 (must equal line 33)	17,949,979	16	18,275,440	
Liabilities	17	Accounts payable and accrued expenses	1,114,744	17	980,093
	18	Grants payable		18	
	19	Deferred revenue	9,000	19	84,098
	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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties	7,090,738	23	7,766,060
	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	1,767,457	25	
	26	Total liabilities. Add lines 17 through 25	9,981,939	26	8,830,251
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/>				
	and complete lines 27, 28, 32, and 33.				
	27	Net assets without donor restrictions	7,968,040	27	9,445,189
	28	Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/>				
	and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
31	Retained earnings, endowment, accumulated income, or other funds		31		
32	Total net assets or fund balances	7,968,040	32	9,445,189	
33	Total liabilities and net assets/fund balances	17,949,979	33	18,275,440	

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	21,279,040
2	Total expenses (must equal Part IX, column (A), line 25)	2	19,820,109
3	Revenue less expenses. Subtract line 2 from line 1	3	1,458,931
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	7,968,040
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	18,218
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	9,445,189

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
2b	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 type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	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 on 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	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	X	

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2020

Open to Public Inspection

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

BOLEY CENTERS, INC.

Employer identification number

59-1290089

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).
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).
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).
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).
8 A community trust described in section 170(b)(1)(A)(vi).
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.
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...
11 An organization organized and operated exclusively to test for public safety.
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...
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s)...
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s)...
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s)...
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated...
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).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support. Rows (A) through (E) and 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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	14,996,138	14,490,439	15,145,827	14,717,001	17,432,121	76,781,526
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	14,996,138	14,490,439	15,145,827	14,717,001	17,432,121	76,781,526
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						76,781,526

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4	14,996,138	14,490,439	15,145,827	14,717,001	17,432,121	76,781,526
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	56,111	10,424	32,657	17,167	6,011	122,370
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.)	564,676	570,312	576,453	412,492		2,123,933
11 Total support. Add lines 7 through 10						79,027,829

12 Gross receipts from related activities, etc. (see instructions) 12 3,344,810

13 **First 5 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

14 Public support percentage for 2020 (line 6, column (f) divided by line 11, column (f))	14	97.16 %
15 Public support percentage from 2019 Schedule A, Part II, line 14	15	96.38 %

16a **33 1/3% support test—2020.** 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

b **33 1/3% support test—2019.** 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

17a **10%-facts-and-circumstances test—2020.** 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

b **10%-facts-and-circumstances test—2019.** 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

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

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

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 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; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support; 14 First 5 years.

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Value/Percentage. Row 15: Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) = 15 %; Row 16: Public support percentage from 2019 Schedule A, Part III, line 15 = 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Value/Percentage. Row 17: Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)) = 17 %; Row 18: Investment income percentage from 2019 Schedule A, Part III, line 17 = 18 %

- 19a 33 1/3% support tests—2020. 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—2019. 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 box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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 lines 5b and 5c 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 (as 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 line 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 lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described in line 11a above?		
11b		
c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, 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 line 2, above, 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 governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b 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.		Yes	No
2a			
b Did the activities described in line 2a, above, 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 lines 3a and 3b 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? If "Yes" or "No," 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 (<i>explain in detail in Part VI</i>):		
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 0.015 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 0.035.	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 0.85 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—provide details in Part VI)	
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 2020 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-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, 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 2020 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			

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

\$ 2,123,933

SUPPLEMENTAL INFORMATION

	2016	2017	2018	2019	2020
LEASING REVENUE	\$120,259	\$151,719	\$138,523	\$0	\$0
OTHER INCOME	\$42,808	\$34,111	\$81,437	\$79,115	\$0
GROSS INCOME INVENTORY SALE	\$401,609	\$384,482	\$356,493	\$333,377	\$0

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.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

Employer identification number

BOLEY CENTERS, INC.

59-1290089

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 FASB 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 FASB 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 FASB 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 make 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 program
- 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					
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** Term 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)		
3a(ii)		
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		2,882,945		2,882,945
b Buildings		14,980,510	9,018,900	5,961,610
c Leasehold improvements		350,864	312,780	38,084
d Equipment		1,850,997	1,476,158	374,839
e Other		1,215,037	1,000,032	215,005
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				9,472,483

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) DUE FROM RELATED PARTIES	3,129,866
(2) INVESTMENT IN DUVAL PARK	302,688
(3) INVESTMENT IN SAS	291,987
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	3,724,541

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 FASB 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
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
c		Recoveries of prior year grants	2c
d		Other (Describe in Part XIII.)	2d
e		Add lines 2a through 2d	2e
3		Subtract line 2e from line 1	3
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
c		Add lines 4a and 4b	4c
5		Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5

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

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.

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Part XIII Supplemental Information *(continued)*

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**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.

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

Name of the organization

BOLEY CENTERS, INC.

Employer identification number

59-1290089

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 noncash assistance	(h) Purpose of grant or assistance
(1)	PINELLAS AFFORDABLE LIVING INC 445 31ST STREET NORTH ST PETERSBURG FL 33713	59-3171557			496,068	COST	HOUSING ITEMS	SUPPORTIVE HOUSING
(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
- 3 Enter total number of other organizations listed in the line 1 table

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 ASSISTANCE TO INDIVIDUALS	497	3,884,559			RENT & ASSISTAN
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.

SEE SCHEDULE I SUPPLEMENTAL INFORMATION WORKSHEET

Supplemental Information

SCHEDULE I
(Form 990)

For calendar year 2020, or tax year beginning 07/01/20, and ending 06/30/21

2020

Name of the organization

BOLEY CENTERS, INC.

Employer identification number

59-1290089

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PART IV - ADDITIONAL INFORMATION

BOLEY CENTERS, INC. PROVIDES ASSISTANCE TO INDIVIDUALS FOR FINANCIAL DISTRESS PAYMENTS, UTILITIES, TRAINING, SEC 8 HOUSING, MEDICAL AND RENT. ASSISTANCE IS BASED ON THE PROGRAM IN WHICH THE INDIVIDUAL IS ELIGIBLE: 1. ASSISTANCE TO INDIVIDUALS - INDIVIDUALS QUALIFYING FOR MAINSTREAM SECTION 8. SHELTER PLUS CARE AND HOME VOUCHER PROGRAMS, 2. CLOTHING/TRANSPORTATION - INDIVIDUAL RECEIVING SERVICES TO ACQUIRE OR RESTORE SKILLS TO REACH THEIR INDIVIDUAL RECOVERY GOALS. 3. RENT PAYMENTS/MEDICATIONS - INDIVIDUALS RECEIVING FACT (FLORIDA ASSERTIVE COMMUNITY TREATMENT) REHABILITATIVE SERVICES, TREATMENT AND SUPPORT FUNDED BY CENTRAL FLORIDA BEHAVIORAL HEALTH NETWORK CONTRACT. 4. RENT PAYMENTS/MEDICATIONS - INDIVIDUALS RECEIVING SUPPORTING HOUSING OR SUPPORTED LIVING SERVICES FUNDED BY CENTRAL FLORIDA BEHAVIORAL HEALTH NETWORK CONTRACT.

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.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

BOLEY CENTERS, INC.

Employer identification number

59-1290089

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 on line 1a?

3 Indicate which, if any, of the following the 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 checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" 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? **4a** Yes No
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? **4b** Yes No
- c** Participate in or receive payment from an equity-based compensation arrangement? **4c** Yes No
- 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? **5a** Yes No
- b** Any related organization? **5b** Yes No
- 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? **6a** Yes No
- b** Any related organization? **6b** Yes No
- 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
1a		
2		
3		
4a		<input checked="" type="checkbox"/>
4b		<input checked="" type="checkbox"/>
4c		<input checked="" type="checkbox"/>
5a		<input checked="" type="checkbox"/>
5b		<input checked="" type="checkbox"/>
6a		<input checked="" type="checkbox"/>
6b		<input checked="" type="checkbox"/>
7		<input checked="" type="checkbox"/>
8		<input checked="" type="checkbox"/>
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 GARY MACMATH EXEC DIRECTOR	(i)	143,165	8,814	5,769	4,742	1,284	163,774	0
	(ii)	0	0	0	0	0	0	0
2	(i)							
	(ii)							
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

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.

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Department of the Treasury
 Internal Revenue Service

Name of the organization

Transactions With Interested Persons
 Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a,
 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
 Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

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BOLEY CENTERS, INC.

Employer identification number

59-1290089

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the org.?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
			(1)									
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												

Total \$ _____

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of org. revenues?	
					Yes	No
(1)	MARCIA MACMATH	SPOUSE OF CEO	73,853	VP OF TRAINING		X
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						

Part V Supplemental Information.

Provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

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.

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

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Inspection

BOLEY CENTERS, INC.

Employer identification number

59-1290089

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS

VOCATIONAL PROGRAMS PROVIDE JOB DEVELOPMENT, JOB PLACEMENT, JOB COACHING,
AND FOLLOW-ALONG SERVICES TO BOLEY CONSUMERS. THIS PROGRAM ALSO ASSISTS
INDIVIDUALS IN ACHIEVING THEIR CHOSEN VOCATIONAL GOALS. INDIVIDUALS ARE
ASSISTED IN UNDERSTANDING THE MEANING, VALUE, AND DEMANDS OF WORKING.
SERVICES PROVIDED ARE DESIGNED TO DETERMINE A DISABLED INDIVIDUAL'S
PHYSICAL CAPACITY, LEARNING STYLES, WORK HABITS, PRODUCTIVITY LEVEL,
ACADEMIC ACHIEVEMENT, APTITUTDES, INTERESTS, OCCUPATIONAL AWARENESS, AND
SOCIAL SKILLS BY UTILIZING A WIDE ARRAY OF TESTS AND EQUIPMENT. RECIPIENTS
ARE PROVIDED WITH THE ASSESSMENTS, COUNSELING AND VOCATIONAL SERVICES
NEEDED TO OBTAIN AND MAINTAIN EMPLOYMENT.

FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICERS

GARY MACMATH

MARCIA MACMATH

CEO

TRAINING DIR

HUSBAND/WIFE

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

PRIOR TO FILING, FORM 990 IS EMAILED TO THE BOARD MEMBERS AND PRESENTED AT
A BOARD MEETING FOR REVIEW.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

BOARD MEMBERS ARE REQUIRED TO COMPLETE CONFLICT OF INTEREST FORM ANNUALLY.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

Name of the organization

Employer identification number

BOLEY CENTERS, INC.

59-1290089

**COMPENSATION IS DEPENDENT UPON YEARS OF EXPERIENCE, EDUCATION, AND
CERTIFICATIONS.**

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FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

**COMPENSATION IS DEPENDENT UPON YEARS OF EXPERIENCE, EDUCATION, AND
CERTIFICATIONS.**

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

**AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE STATE OF FLORIDA
WEBSITE. NO OTHER GOVERNING DOCUMENTS ARE PROVIDED TO THE PUBLIC.**

**SCHEDULE R
(Form 990)**Department of the Treasury
Internal Revenue Service

Name of the organization

Related Organizations and Unrelated PartnershipsComplete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020**Open to Public
Inspection**

BOLEY CENTERS, INC.

Employer identification number

59-1290089

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) 128 PLACE APTS INC 2780/2790 1ST AVE N ST PETERSBURG FL 33713 59-3717717	HOUSING	FL	501 C3	10	BOLEY CENT	X	
(2) ARLINGTON AVE APTS INC 1007 ARLINGTON AVE N ST PETERSBURG FL 33705 26-4225646	HOUSING	FL	501 C3	10	BOLEY CENT	X	
(3) BESSIE BOLEY FOUNDATION 445 31ST STREET N ST PETERSBURG FL 33713 59-6165239	SUPPORT	FL	501 C3	12B	BOLEY CENT	X	
(4) BOLEY FOUNDATION INC 445 31ST STREET N ST PETERSBURG FL 33713 59-2230228	SUPPORT	FL	501 C3	12B	BOLEY CENT	X	
(5) BROADWATER PLACE INC 3615 37TH STREET S ST PETERSBURG FL 33713 27-3345871	HOUSING	FL	501 C3	10	BOLEY CENT	X	

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

Schedule R (Form 990) 2020

**SCHEDULE R
(Form 990)**

 Department of the Treasury
Internal Revenue Service

Name of the organization

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.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020
**Open to Public
Inspection**

BOLEY CENTERS, INC.

Employer identification number

59-1290089

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) CLAM BAYOU APTS INC 3910/3990 34TH AVE S 43-2078260 ST PETERSBURG FL 33711	HOUSING	FL	501 C3	10	BOLEY CENT	X	
(2) COMMUNITY HOUSING OF PINELLAS INC 4123 37TH ST N 59-2689809 ST PETERSBURG FL 33714	HOUSING	FL	501 C3	10	BOLEY CENT	X	
(3) DOME DISTRICT APTS INC 1029 BURLINGTON AVE N 59-3617678 ST PETERSBURG FL 33701	HOUSING	FL	501 C3	10	BOLEY CENT	X	
(4) FOREST LANE APTS INC 7101 53RD ST N 59-3212722 PINELLAS PARK FL 33781	HOUSING	FL	501 C3	10	BOLEY CENT	X	
(5) FOREST MEADOWS APTS INC 5170 FOREST MEADOWS LANE 59-3212721 ST PETERSBURG FL 33709	HOUSING	FL	501 C3	10	BOLEY CENT	X	

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

Schedule R (Form 990) 2020

**SCHEDULE R
(Form 990)**

 Department of the Treasury
Internal Revenue Service

Name of the organization

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.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020
**Open to Public
Inspection**

Employer identification number

59-1290089

BOLEY CENTERS, INC.

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) LAKE WINDS APTS INC 836/840 34TH AVE S ST PETERSBURG FL 33705 59-3682167	HOUSING	FL	501 C3	10	BOLEY CENT	X	
(2) LAUREL TRACE INC 7211 46TH AVE N ST PETERSBURG FL 33713 90-0604565	HOUSING	FL	501 C3	10	BOLEY CENT	X	
(3) PALMETTO BREEZE APTS INC 2426/2962 1ST AVE S ST PETERSBURG FL 33713 06-1670536	HOUSING	FL	501 C3	10	BOLEY CENT	X	
(4) PINELLAS AFFORDABLE LIVING INC 445 31ST STREET N ST PETERSBURG FL 33713 59-3171557	HOUSING	FL	501 C3	10	BOLEY CENT	X	
(5) PINELLAS COUNTY HOUSING INC 1800 4TH ST S 3301 6TH ST S ST PETERSBURG FL 33705 59-2311570	HOUSING	FL	501 C3	10	BOLEY CENT	X	

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

Schedule R (Form 990) 2020

**SCHEDULE R
(Form 990)**

 Department of the Treasury
Internal Revenue Service

Name of the organization

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.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020
**Open to Public
Inspection**

BOLEY CENTERS, INC.

Employer identification number

59-1290089

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) SHADY PINES APTS INC 4037 76TH AVE N ST PETERSBURG FL 33781 59-3547490	HOUSING	FL	501 C3	10	BOLEY CENT	X	
(2) SUNSET POIT APARTMENTS INC 1401/1413 SUNSET POINT RD CLEARWATER FL 33755 45-4082301	HOUSING	FL	501 C3	10	BOLEY CENT	X	
(3) TWIN BROOKS APTS INC 3450 24TH AVE S ST PETERSBURG FL 33711 02-0803197	HOUSING	FL	501 C3	10	BOLEY CENT	X	
(4) BOLEY-PAR INC 6655 66TH ST N PINELLAS PARK FL 33781 46-3480340	SUPPORT	FL	501 C3	12C	N/A		X
(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.

(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) DUVAL PARK DEVELOPER LLC 5300 W CYPRESS STREET SUITE 200 TAMPA FL 33607 32-0422120	DEVELOPMEN	FL	N/A	RELATED				X	N/A	X		
(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.

(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) SOLUTIONS FOR ADMIN SERVICES INC 445 31ST STREET NORTH ST PETERSBURG FL 33713 35-2384671	SEE PT VII	FL	N/A	C			50.000000		X
(2) DUVAL PARK GP LLC 5300 W CYPRESS STREET SUITE 200 TAMPA FL 33607 61-1724227	HOUSING	FL	N/A	C			50.000000		X
(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?

- 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
1a		X
1b	X	
1c	X	
1d	X	
1e	X	
1f		X
1g		X
1h		X
1i		X
1j		X
1k		X
1l	X	
1m	X	
1n	X	
1o	X	
1p		X
1q		X
1r		X
1s		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)	BOLEY FOUNDATION	B	90,122	CASH
(2)	128TH PLACE APTS INC	D	39,262	ACCOUNTS RECIEVABLE
(3)	ARLINGTON AVE APTS INC	D	9,032	ACCOUNTS RECIEVABLE
(4)	BOLEY-PAR INC	D	12,885	ACCOUNTS RECIEVABLE
(5)	BROADWATER PLACE INC	D	121,606	ACCOUNTS RECIEVABLE
(6)	CLAM BAYOU APTS INC	D	77,088	ACCOUNTS RECIEVABLE

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) COMMUNITY HOUSING OF PINELLAS INC	D	30,114	ACCOUNTS RECIEVABLE
(2) DOME DISTRICT APTS INC	D	20,234	ACCOUNTS RECIEVABLE
(3) BOLEY FOUNDATION INC	D	1,284	ACCOUNTS RECIEVABLE
(4) FOREST LANE APARTMENTS INC	D	38,499	ACCOUNTS RECIEVABLE
(5) FOREST MEADOWS APTS INC	D	75,195	ACCOUNTS RECIEVABLE
(6) LAKE WINDS APTS INC	D	71,774	ACCOUNTS RECIEVABLE

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
1a		X
1b	X	
1c	X	
1d	X	
1e	X	
1f		X
1g		X
1h		X
1i		X
1j		X
1k		X
1l	X	
1m	X	
1n	X	
1o	X	
1p		X
1q		X
1r		X
1s		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) PALMETTO BREEZE APTS INC	D	23,658	ACCOUNTS RECIEVABLE
(2) PINELLAS AFFORDABLE LIVING INC	D	503,095	ACCOUNTS RECIEVABLE
(3) PINELLAS COUNTY HOUSING INC	D	101,175	ACCOUNTS RECIEVABLE
(4) SHADY PINES APTS INC	D	4,871	ACCOUNTS RECIEVABLE
(5) TWIN BROOKS APTS INC	D	191,841	ACCOUNTS RECIEVABLE
(6) BEESIE BOLEY FOUNDATION	E	677,043	MORTGAGE PAYABLE

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
1a		X
1b	X	
1c	X	
1d	X	
1e	X	
1f		X
1g		X
1h		X
1i		X
1j		X
1k		X
1l	X	
1m	X	
1n	X	
1o	X	
1p		X
1q		X
1r		X
1s		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)	SOLUTIONS FOR ADMIN SERVICES INC	E	202,042	ACCOUNTS PAYABLE
(2)	ALL RELATED TAX EXEMPT ORGANIZATION	L	262,781	SERVICES
(3)				
(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**PART IV: IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS A CORPORATION:**

IN SEPTEMBER 2014, BOLEY CENTERS, INC. (BOLEY) WITH PINELLAS AFFORDABLE

LIVING, INC. (PAL), A RELATED ORGANIZATION, ENTERED INTO AN AGREEMENT WITH

TWO OTHER NOT FOR ORGANIZATIONS TO CREATE DUVAL PARK GP, LLC.

BOLEY ORIGINALLY WAS A 30% PARTNER AND PAL A 25% PARTNER IN DUVAL PARK GP,

LLC. THE DEVELOPMENT WAS COMPLETED IN OCTOBER 2015, AT WHICH TIME BOLEY

BECAME A 50% OWNER AND PAL OWNED 0%. DUVAL PARK GP, LLC WAS CREATED TO BE

THE GENERAL PARTNER IN A NEW LIMITED PARTNERSHIP, DUVAL PARK, LTD. DUVAL

PARK GP, LLC IS A 0.0099% OWNER IN DUVAL PARK, LTD., ALONG WITH ANOTHER

GENERAL PARTNER WITH A 0.0001% OWNERSHIP INTEREST AND A LIMITED PARTNER

WITH A 99.99% OWNERSHIP INTEREST. DUVAL PARK, LTD. WAS CREATED TO BUILD AN

88-UNIT LOW INCOME HOUSING APARTMENT COMPLEX. DURING 2015, BOLEY MADE A

300,000 INVESTMENT INTO THE JOINT VENTURE. THIS ENTITY ELECTED TO BE

CLASSIFIED AS AN ASSOCIATION TAXABLE AS A CORPORATION WITH THE FILING OF

ITS 2015 TAX RETURN. THE PRIMARY ACTIVITY OF SOLUTIONS FOR ADMINISTRATIVE

SERVICES, INC. (SAS) IS TO PROVIDE MANAGEMENT, SUPPORT AND ADMINISTRATIVE

SERVICES TO QUALIFYING TAX-EXEMPT ORGANIZATIONS. SAS IS 50% OWNED BY BOLEY

CENTERS, INC. AND 50% BY ANOTHER UNRELATED TAX-EXEMPT ORGANIZATION.

SCHEDULE R, PART V, LINE 2 - ITEMS L, N AND O: BOLEY CENTERS PROVIDES

MANAGEMENT, PERSONNEL, ACCOUNTING SERVICES, OTHER OPERATIONAL TASKS AND USE

OF FACILITIES TO ALL RELATED EXEMPT ORGANIZATIONS. TWO OF THE RELATED

ENTITIES ARE BILLED FOR SHARED EMPLOYEES.

BOLEY CENTERS, INC. AND AFFILIATES
CONSOLIDATED FINANCIAL STATEMENTS,
Years Ended June 30, 2021 and 2020

BOLEY CENTERS, INC. AND AFFILIATES
Financial Statements
Years Ended June 30, 2021 and 2020

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PRIDA, GUIDA & PEREZ, P.A.
CERTIFIED PUBLIC ACCOUNTANTS
1106 N. FRANKLIN STREET
TAMPA, FLORIDA 33602

INDEPENDENT AUDITORS' REPORT

To the Board of Directors
Boley Centers, Inc. and affiliates

Report on the Financial Statements

We have audited the accompanying consolidated financial statements of Boley Centers, Inc. and affiliates, which comprise the consolidated statement of financial position as of June 30, 2021, and the related consolidated statements of activities and changes in net assets, functional expenses, and cash flows for the year then ended, and the related notes to the consolidated financial statements (collectively, "financial statements").

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

INDEPENDENT AUDITORS' REPORT (Continued)

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Boley Centers, Inc. and affiliates, as of June 30, 2021, and the changes in their net assets and their cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Other Matters

Prior Period Financial Statements

The financial statements of Boley Centers, Inc. and affiliates as of June 30, 2020, and for the year then ended were audited by other auditors whose report dated April 2, 2021, expressed an unmodified opinion on those financial statements.

Other Reporting Required by *Government Auditing Standards*

In accordance with *Government Auditing Standards*, we have also issued our report dated May 13, 2022, on our consideration of Boley Centers, Inc. and affiliates' internal control over financial reporting and on our tests of their compliance with certain provisions of laws, regulations, contracts, grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of Boley Centers, Inc. and affiliates' internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Boley Centers, Inc. and affiliates' internal control over financial reporting and compliance.



Prida, Guida & Perez, P.A.
Tampa, Florida
May 13, 2022

FINANCIAL STATEMENTS

BOLEY CENTERS, INC. AND AFFILIATES
Statements of Financial Position

	June 30,	
	2021	2020
Assets		
Cash and cash equivalents	\$ 2,722,083	\$ 3,364,814
Restricted cash	1,750,039	1,734,625
Accounts receivable - clients and other	105,623	114,674
Accounts receivable - grants and funding sources	2,563,812	1,680,262
Promised use of land, net	159,029	2,307
Due from related parties	12,885	16,533
Investments	4,763,767	3,907,681
Investments in joint ventures	594,863	596,608
Prepaid expenses and other assets	366,635	443,157
Construction in progress	6,560,633	2,705,270
Property and equipment, net	39,200,083	39,790,446
Total assets	\$ 58,799,452	\$ 54,356,377
Liabilities and net assets		
Accounts payable and accrued expenses	\$ 1,399,048	\$ 2,047,868
Tenant deposits payable	71,949	74,781
Due to related parties	202,042	186,706
Notes payable, net	45,973,702	42,837,240
Accrued interest	201,838	216,430
Total liabilities	47,848,579	45,363,025
Net assets		
Without donor restrictions	10,789,567	8,854,305
With donor restrictions	161,306	139,047
Total net assets	10,950,873	8,993,352
Total liabilities and net assets	\$ 58,799,452	\$ 54,356,377

Read the accompanying notes to financial statements.

BOLEY CENTERS, INC. AND AFFILIATES
Statement of Activities and Change in Net Assets
Year Ended June 30, 2021

	<u>Without Donor Restrictions</u>	<u>With Donor Restrictions</u>	<u>Total</u>
Revenue, gains (losses), and other support			
Governmental funding:			
Federal	\$ 12,480,286	\$ -	\$ 12,480,286
State	197,531	-	197,531
Local	3,246,093	-	3,246,093
Other funding and revenues:			
Medicaid	1,044,461	-	1,044,461
Client fees and rents	1,726,814	-	1,726,814
Grants	1,023,278	-	1,023,278
Debt forgiveness	1,861,957	-	1,861,957
Contributions	550,504	-	550,504
Thrift store	501,123	-	501,123
Unrealized and realized gain on investments, net	600,029	-	600,029
Allocated loss on investments in joint ventures	(2,745)	-	(2,745)
Other	934,141	164,175	1,098,316
Net assets released from restrictions	141,916	(141,916)	-
	<u>24,305,388</u>	<u>22,259</u>	<u>24,327,647</u>
Expenses			
Program services	19,070,519	-	19,070,519
Fundraising - thrift store	770,504	-	770,504
General and administrative	2,520,894	-	2,520,894
Total functional expenses	<u>22,361,917</u>	<u>-</u>	<u>22,361,917</u>
Loss on disposal of assets	(1,500)	-	(1,500)
Loss on extinguishment of debt	9,709	-	9,709
Total expenses	<u>22,370,126</u>	<u>-</u>	<u>22,370,126</u>
Change in net assets	1,935,262	22,259	1,957,521
Net assets at beginning of year	<u>8,854,305</u>	<u>139,047</u>	<u>8,993,352</u>
Net assets at end of year	<u>\$ 10,789,567</u>	<u>\$ 161,306</u>	<u>\$ 10,950,873</u>

Read the accompanying notes to financial statements.

BOLEY CENTERS, INC. AND AFFILIATES
Statement of Activities and Change in Net Assets
Year Ended June 30, 2020

	<u>Without Donor Restrictions</u>	<u>With Donor Restrictions</u>	<u>Total</u>
Revenue, gains (losses), and other support			
Governmental funding:			
Federal	\$ 12,512,563	\$ -	\$ 12,512,563
State	220,637	-	220,637
Local	2,462,259	-	2,462,259
Other funding and revenues:			
Medicaid	581,419	-	581,419
Client fees and rents	1,614,976	-	1,614,976
Grants	95,136	-	95,136
Debt forgiveness	21,322	-	21,322
Contributions	111,266	-	111,266
Thrift store	384,837	-	384,837
Unrealized and realized loss on investments, net	(261,001)	-	(261,001)
Allocated loss on investments in joint ventures	(2,549)	-	(2,549)
Other	1,737,193	-	1,737,193
Net assets released from restrictions	37,290	(37,290)	-
	<u>19,515,348</u>	<u>(37,290)</u>	<u>19,478,058</u>
Expenses			
Program services	18,643,463	-	18,643,463
Fundraising - thrift store	772,349	-	772,349
General and administrative	1,919,301	-	1,919,301
Total functional expenses	<u>21,335,113</u>	<u>-</u>	<u>21,335,113</u>
Loss on disposal of assets	<u>68,385</u>	<u>-</u>	<u>68,385</u>
Total expenses	<u>21,403,498</u>	<u>-</u>	<u>21,403,498</u>
Change in net assets	(1,888,150)	(37,290)	(1,925,440)
Net assets at beginning of year	<u>10,742,455</u>	<u>176,337</u>	<u>10,918,792</u>
Net assets at end of year	<u>\$ 8,854,305</u>	<u>\$ 139,047</u>	<u>\$ 8,993,352</u>

Read the accompanying notes to financial statements.

BOLEY CENTERS, INC. AND AFFILIATES
Statements of Functional Expenses
Year Ended June 30, 2021

	Program Services							Total Program Services	Fundraising and Thrift Store	General and Administrative	Total	
	Supported Housing and Living	Supported Employment	Residential	Clinical	Youth	Assertive Community Treatment	Housing					Contract Services
Salaries	\$ 504,157	\$ 1,050,005	\$ 2,697,854	\$ 432,797	\$ 1,088,137	\$ 509,103	\$ 377,183	\$ 255,663	\$ 6,914,899	\$ 429,272	\$ 1,097,841	\$ 8,442,012
Payroll related expenses	134,658	219,110	603,750	98,059	179,109	92,579	93,297	67,079	1,487,641	103,036	214,539	1,805,216
	638,815	1,269,115	3,301,604	530,856	1,267,246	601,682	470,480	322,742	8,402,540	532,308	1,312,380	10,247,228
Shared staff	-	-	-	-	-	-	-	-	-	-	333,285	333,285
Employee leasing contract	-	-	-	-	-	-	-	(168,916)	(168,916)	(75,664)	(1,246,115)	(1,490,695)
Net salaries and related payroll expenses	638,815	1,269,115	3,301,604	530,856	1,267,246	601,682	470,480	153,826	8,233,624	456,644	399,550	9,089,818
Agency	2,035	3,053	3,265	-	5,000	400	50	-	13,803	575	45,489	59,867
Bad debts	-	-	40,066	-	-	-	53,764	-	93,830	159	-	93,989
Client support	327,217	27,314	73,761	-	113	264,988	756	-	694,149	-	-	694,149
Contractual services	8,127	10,980	227,229	28,925	1,307	12,231	88,427	981	378,207	9,330	65,385	452,922
Depreciation and amortization	-	31	464,364	19,560	21,580	768	938,113	6,615	1,451,031	7,386	149,177	1,607,594
Food supplies	-	-	187,665	-	2,779	-	116	15,450	206,010	76	2,544	208,630
Housing vouchers and rent	-	-	-	-	-	-	3,884,559	-	3,884,559	-	-	3,884,559
Insurance	3,138	6,823	96,185	9,738	17,685	2,559	287,682	23,692	447,502	3,841	138,801	590,144
Interest	-	-	97,531	-	-	-	99,417	-	196,948	33,852	12,492	243,292
Legal and professional fees	-	1,382	13,853	37,818	26,540	110,955	129,575	-	320,123	825	117,632	438,580
Management fees	-	-	-	-	-	-	-	168,916	168,916	75,664	1,250,045	1,494,625
Medical supplies	10,488	-	103,805	21,443	-	-	-	-	135,736	-	15,248	150,984
Operating supplies	1,213	4,262	91,264	7,525	21,435	2,182	14,623	4,495	146,999	8,482	52,681	208,162
Other expense	-	-	-	-	1,805	-	20,704	-	22,509	17,758	2,455	42,722
Personnel costs	1,197	461	4,158	370	8,926	948	880	328	17,268	1,435	1,707	20,410
Rent expense	2,665	24,061	10,247	1,345	42,314	672	8,264	-	89,568	108,450	22,604	220,622
Repairs and maintenance	15,920	29,005	294,741	26,258	3,872	11,411	685,506	8,832	1,075,545	8,880	150,973	1,235,398
Small equipment	2,271	2,453	57,087	1,044	6,551	435	1,740	1,428	73,009	427	15,074	88,510
Taxes and licenses	2,566	354	11,056	1,144	-	120	5,009	-	20,249	195	21,567	42,011
Travel	6,667	26,639	6,826	-	7,002	15,665	4,975	311	68,085	503	2,377	70,965
Utilities	55,455	43,300	463,119	52,940	30,763	10,199	649,050	28,023	1,332,849	36,022	55,093	1,423,964
Total functional expenses	\$ 1,077,774	\$ 1,449,233	\$ 5,547,826	\$ 738,966	\$ 1,464,918	\$ 1,035,215	\$ 7,343,690	\$ 412,897	\$ 19,070,519	\$ 770,504	\$ 2,520,894	\$ 22,361,917

Read the accompanying notes to financial statements.

BOLEY CENTERS, INC. AND AFFILIATES
Statements of Functional Expenses
Year Ended June 30, 2020

	Program Services								Total Program Services	Fundraising and Thrift Store	General and Administrative	Total
	Supported Housing and Living	Supported Employment	Residential	Clinical	Youth	Assertive Community Treatment	Housing	Contract Services				
Salaries	\$ 536,282	\$ 1,183,863	\$ 2,432,433	\$ 486,746	\$ 1,229,903	\$ 476,562	\$ 330,634	\$ 208,827	\$ 6,885,250	\$ 416,265	\$ 803,368	\$ 8,104,883
Payroll related expenses	125,464	245,109	549,907	109,985	222,203	76,929	73,477	56,475	1,459,549	102,548	152,071	1,714,168
	661,746	1,428,972	2,982,340	596,731	1,452,106	553,491	404,111	265,302	8,344,799	518,813	955,439	9,819,051
Shared staff	-	-	-	-	-	-	-	-	-	-	345,638	345,638
Employee leasing contract	-	-	-	-	-	-	-	(160,295)	(160,295)	(63,053)	(1,197,920)	(1,421,268)
Net salaries and related payroll expenses	661,746	1,428,972	2,982,340	596,731	1,452,106	553,491	404,111	105,007	8,184,504	455,760	103,157	8,743,421
Agency	2,431	3,053	2,637	-	5,000	259	166	476	14,022	2,625	72,284	88,931
Bad debts	-	-	59,087	-	-	-	6,226	-	65,313	935	-	66,248
Client support	294,874	87,001	152,166	22,923	16,281	267,162	6,987	-	847,394	-	-	847,394
Contractual services	7,620	10,876	151,605	35,111	2,235	15,309	189,166	420	412,342	13,563	45,541	471,446
Depreciation and amortization	-	375	462,806	17,234	19,271	768	897,582	3,394	1,401,430	4,112	94,192	1,499,734
Food supplies	159	337	210,662	71,048	2,515	46	235	76	285,078	298	7,866	293,242
Housing vouchers and rent	-	-	-	-	-	-	2,988,520	-	2,988,520	-	-	2,988,520
Insurance	2,950	6,611	86,746	8,778	16,094	2,385	228,993	29,156	381,713	3,633	26,308	411,654
Interest	-	-	15,626	-	-	-	399,498	-	415,124	44,894	21,218	481,236
Legal and professional fees	-	1,920	13,589	45,153	30,026	109,295	112,745	-	312,728	-	133,241	445,969
Management fees	-	-	-	-	-	-	-	179,822	179,822	43,527	1,201,953	1,425,302
Medical supplies	12,358	310	101,821	39,296	-	131	-	-	153,916	-	8,684	162,600
Operating supplies	1,173	7,352	87,906	10,666	20,182	1,294	76,636	808	206,017	15,644	36,591	258,252
Other expense	-	-	-	-	1,405	-	175	-	1,580	31,833	9,478	42,891
Personnel costs	17,035	27,990	52,049	9,290	12,723	7,498	4,944	1,700	133,229	7,483	10,045	150,757
Rent expense	2,589	33,331	12,689	1,353	40,143	735	7,745	-	98,585	90,000	14,098	202,683
Repairs and maintenance	18,470	33,446	353,985	29,451	5,605	12,517	339,553	4,757	797,784	12,414	76,194	886,392
Small equipment	11,275	3,280	56,944	2,496	5,745	469	33,472	203	113,884	2,058	4,949	120,891
Taxes and licenses	1,197	-	12,603	600	-	-	-	-	14,400	-	22,963	37,363
Travel	9,909	46,841	20,031	425	825	16,898	3,022	926	98,877	3,366	5,927	108,170
Utilities	47,677	45,078	397,262	48,416	28,019	9,844	655,401	19,889	1,251,586	40,204	24,612	1,316,402
Vehicle	51,984	-	175,272	23,703	-	34,656	-	-	285,615	-	-	285,615
Total functional expenses	\$ 1,143,447	\$ 1,736,773	\$ 5,407,826	\$ 962,674	\$ 1,658,175	\$ 1,032,757	\$ 6,355,177	\$ 346,634	\$ 18,643,463	\$ 772,349	\$ 1,919,301	\$ 21,335,113

Read the accompanying notes to financial statements.

BOLEY CENTERS, INC. AND AFFILIATES
Statements of Cash Flows

	Year Ended June 30,	
	2021	2020
Cash flows from operating activities		
Change in net assets	\$ 1,957,521	\$ (1,925,440)
Adjustments to reconcile changes in net assets to net cash (used in) provided by operating activities:		
Depreciation and amortization	1,607,594	1,499,734
Grants for capital projects	(152,600)	(65,706)
Loss on disposal of property and equipment	(1,500)	68,385
Amortization of loan costs	24,089	21,530
Accretion of loan discounts	98,918	144,136
Debt forgiveness income	(1,861,957)	-
Loss on extinguishment of debt	9,709	-
Bad debt	93,989	66,248
Unrealized and realized (gain) loss on investments	(600,029)	202,373
Allocated loss on investments in joint ventures	2,745	2,549
Changes in:		
Accounts receivable - clients and other	(84,938)	(125,302)
Accounts receivable - grants and funding sources	(883,550)	183,265
Promised use of land, net	(156,722)	-
Prepaid expenses and other assets	76,522	(32,992)
Accounts payable and accrued expenses	(648,820)	(212,330)
Tenant deposits payable	(2,832)	-
Due to/from related parties	18,984	-
Accrued interest	(14,592)	14,592
Net cash used in operating activities	(517,469)	(158,958)
Cash flows from investing activities		
Purchases of investments	(1,662,283)	(452,935)
Proceeds from sale of investments	1,406,226	26,945
Investments in joint ventures	(1,000)	(563)
Purchases of property and equipment	(970,083)	(422,238)
Purchases of construction materials	(3,901,011)	(3,628,166)
Net cash used in investing activities	(5,128,151)	(4,476,957)

Read the accompanying notes to financial statements.

BOLEY CENTERS, INC. AND AFFILIATES
Statements of Cash Flows (Continued)

	Year Ended June 30,	
	2021	2020
Cash flows from financing activities		
Proceeds from borrowing	5,599,528	6,123,023
Principal payments on debt	(226,010)	(86,262)
Payment of loan costs	(67,815)	(68,730)
Grants received for capital projects	152,600	65,706
Contribution to related party	(440,000)	-
Net cash provided by financing activities	5,018,303	6,033,737
Net change in cash, cash equivalents, and restricted cash	(627,317)	1,397,822
Cash, cash equivalents, and restricted cash - beginning of year	5,099,439	3,701,617
Cash, cash equivalents, and restricted cash - end of year	\$ 4,472,122	\$ 5,099,439
 Reconciliation of cash, cash equivalents, and restricted cash:		
Cash and cash equivalents	\$ 2,722,083	\$ 3,364,814
Restricted cash	1,750,039	1,734,625
Cash, cash equivalents, and restricted cash - end of year	\$ 4,472,122	\$ 5,099,439
 Supplemental disclosures:		
Cash paid for interest	\$ 46,344	\$ 64,945
Construction in progress transferred to property and equipment	\$ 45,648	\$ 6,070,058

Read the accompanying notes to financial statements.

BOLEY CENTERS, INC. AND AFFILIATES
Notes to Financial Statements
Years Ended June 30, 2021 and 2020

Note 1 – Organization and Presentation

Boley Centers, Inc. (“Boley”) is a Florida not-for-profit corporation that primarily provides room and board services, as well as case management, educational and skills training, and vocational services for individuals with chronic mental illness that reside in Pinellas County, Florida and surrounding counties. Boley also develops and operates affordable housing for these and other individuals through various other not-for-profit entities in the Tampa Bay area.

As Boley controls the voting interest of the following not-for-profit entities, and has an economic interest in them through the receipt of various fees, the accompanying financial statements reflect the consolidation of the following entities (collectively, the “Organization”):

Not-for-profit Entities	Housing Units in Operation
<i>Boley Centers, Inc.</i>	
Housing units	196
Average housing vouchers	352 vouchers
<i>Community Housing Development Organization:</i>	
Pinellas Affordable Living, Inc. ("PAL")	163
<i>HUD Multifamily Housing Projects:</i>	
128 Place, Inc. ("128 PL")	18
Arlington Avenue Apartments, Inc. ("AA")	16
Broadwater Place, Inc. ("BP")	14
Clam Bayou Apartments, Inc. ("CB")	14
Community Housing of Pinellas County, Inc. ("CHP")	15 beds
Dome District Apartments, Inc. ("DD")	18
Forest Lane Apartments, Inc. ("FLA")	24
Forest Meadows Apartments, Inc. ("FMA")	15
Lake Winds Apartments, Inc. ("LW")	14
Laurel Trace, Inc. ("LT")	9
Palmetto Breeze Apartments, Inc. ("PB")	12
Pinellas County Housing, Inc. ("PCH")	40
Shady Pines Apartments, Inc. ("SP")	8
Sunset Point Apartments, Inc., ("SUN")	14
Twin Brooks Apartments, Inc. ("TB")	14
<i>Foundations:</i>	
Bessie Boley Foundation ("BBF")	N/A
Boley Foundation, Inc. ("BF")	N/A
	956

BOLEY CENTERS, INC. AND AFFILIATES
Notes to Financial Statements
Years Ended June 30, 2021 and 2020

Note 1 – Organization and Presentation (Continued)

Pinellas Affordable Living, Inc. (“PAL”) is a not-for-profit corporation whose mission is to develop and operate integrated affordable housing for individuals with chronic mental illness and/or low income within the guidelines of various funding programs. PAL fulfills its mission by operating as a Community Housing Development Organization (“CHDO”). A CHDO is a private nonprofit, community-based organization that has the capacity to develop affordable housing for the community it serves. In order to qualify for designation as a CHDO, PAL had to meet certain requirements pertaining to its legal status, organizational structure, capacity, and experience. As of June 30, 2021, PAL is operating 16 properties that are subject to Department of Housing and Urban Development (“HUD”) or other similar regulations and has 4 properties in various stages of development.

The HUD multifamily housing projects are residential facilities for individuals with chronic mental illness that are regulated by HUD as to rent charges and operating methods.

Bessie Boley Foundation is a Florida not-for-profit organization that manages certain investments and distributes income to Boley Centers for use in its programs.

Boley Foundation, Inc. is a Florida not-for-profit organization that operates as the fundraising arm of Boley Centers.

Effective July 1, 2015, the structure of Boley Centers, Inc. changed. Boley-PAR, Inc., a Florida not-for-profit corporation with 501(c)(3) tax exempt status is now its sole member. Boley-PAR, Inc. is also the sole member of Operation PAR, Inc. (“PAR”) and Personal Enrichment Through Mental Health Services, Inc. (“PEMHS”). As the sole member of the Boley, Boley-PAR, Inc. has the right to appoint and approve members of the Boley board of directors and to both initiate and approve certain actions as defined by the by-laws of Boley that may be required whether initiated by the Boley board of directors and other governing bodies or not. This new ownership structure will allow the respective organizations to retain their separate corporate existence while sharing some administrative services to be more cost effective and efficient.

Note 2 – Summary of Significant Accounting Policies

Principles of Consolidation – The accompanying consolidated financial statements include the activities of Boley and all of the aforementioned entities. All significant inter-organization accounts and transactions are eliminated.

Basis of Presentation – The accompanying financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (“U.S. GAAP”).

Use of Estimates – The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

Reclassifications – Certain amounts in the 2020 financial statements have been reclassified to conform to the 2021 presentation. The reclassifications had no effect on previously reported change in net assets.

BOLEY CENTERS, INC. AND AFFILIATES
Notes to Financial Statements
Years Ended June 30, 2021 and 2020

Note 2 – Summary of Significant Accounting Policies (Continued)

Cash and Cash Equivalents – Cash and cash equivalents consist of cash on hand and money market accounts. All highly liquid investments with original maturities of three months or less are considered cash equivalents for the purpose of reporting cash flows.

Restricted Cash – Restricted cash includes escrow accounts required under various loan agreements, tenant security deposits held, and reserves and residual receipts accounts required by HUD and certain other agreements.

Accounts Receivable and Allowance – Accounts receivable - clients and other are stated at net rental amount less an allowance for doubtful accounts. The allowance for doubtful accounts related to these receivables was approximately \$10,000 as of June 30, 2021 and 2020. Accounts receivable - grants and funding sources are stated at expected collectable amount once services have been provided, less an allowance for doubtful accounts. The allowance for doubtful accounts related to these receivables was approximately \$77,000 as of June 30, 2021 and 2020. Management has reviewed the receivables and believes that the allowance for doubtful accounts is adequate.

Promised Use of Land – Promised use of land represents property that has been leased to PAL over a period of twenty years and has been extended for an additional twenty years at a rate of \$1 per year. As the lease is significantly below market-rate, promised use of land was recorded at the time of the initial contribution and again at the extension of the lease during the year ended June 30, 2021 in an amount estimated to be the fair value of the lease agreement. Every year rent expense is recorded and promised use of land is decreased.

Investments – Investments are recorded at fair value. Cash and money market accounts designated for long-term purposes are classified as investments.

Fair Value – The Organization defines fair value in accordance with U.S. GAAP, which specifies a hierarchy of valuation techniques. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets (Level 1 measurements) and the lowest priority to measurements involving significant unobservable inputs (Level 3 measurements). Following is a brief description of the type of valuation information (inputs) that qualifies a financial asset for each level:

Level 1 – Unadjusted quoted market prices for identical assets in active markets which are accessible by the Organization.

Level 2 – Observable prices in active markets for similar assets. Prices for identical or similar assets in markets that are not active. Market inputs that are not directly observable but are derived from or corroborated by observable market data.

Level 3 – Unobservable inputs based on the Organization's own judgment as to assumptions a market participant would use, including inputs derived from extrapolation and interpolation that are not corroborated by observable market data.

Investments in Joint Ventures – Investments in joint ventures are carried under the equity method. The Organization's initial investments in joint ventures are recorded as an asset and are adjusted by the Organization's share of joint ventures' gains and losses.

BOLEY CENTERS, INC. AND AFFILIATES
Notes to Financial Statements
Years Ended June 30, 2021 and 2020

Note 2 – Summary of Significant Accounting Policies (Continued)

Construction in Progress – Construction in progress represents projects that are under development. Construction in progress is not depreciated until the developed assets are placed in service.

Property and Equipment – Property and equipment are carried at cost less accumulated depreciation if purchased or at estimated fair market value at date of receipt, less accumulated depreciation, if acquired by gift. Depreciation is calculated using the straight-line method over the estimated useful lives of the respective assets ranging from three to forty years.

Expenditures for renewals and improvements that significantly add to the productive capacity or extend the useful life of the asset are capitalized. Expenditures for normal repairs and maintenance are expensed as incurred. Upon retirement, sale or other disposition of property and equipment, the costs and accumulated depreciation are eliminated from the accounts and any resulting gain or loss is included within the statement of activities.

Impairment of Assets – Long-lived assets are reviewed for impairment whenever events or changes in circumstances indicate that the net carrying amount may not be recoverable. When these events occur, management measures impairment by comparing the carrying value of long-lived assets to the estimated undiscounted future cash flows resulting from the assets. If the undiscounted future cash flows are less than the carrying amount of the long-lived assets, an impairment loss is recognized. There are no impairments recognized for the years ended June 30, 2021 and 2020.

Tenant Deposits Payable – Tenant security deposits are kept in a separate interest-bearing bank account in the name of the Organization until returned to the depositor or forfeited.

Notes Payable – The recorded amount of two mortgages which are interest-free are calculated based on fair value using the prevailing market interest rates for similar transactions at the time the notes were executed. Each year, interest expense is recognized, and the notes payable liability is increased (accreted). Other interest-free and below-market interest rate notes payable are recorded at face value, which management has determined approximates fair value.

Notes payable with forgiveness provisions are recorded as forgiven when the conditions of those notes payable are met or explicitly waived and the Organization is relieved of its liability. Upon forgiveness of the notes payable, the Organization reduces its liability and recognizes contribution revenue.

Loan Costs – Loan costs consist of costs related to obtaining the Organization's notes payable. Loan costs are netted with notes payable in the consolidated statements of financial position and are amortized over the life of the related loan. Amortization of loan costs is recorded as interest expense in the accompanying consolidated statements of activities.

Classification of Net Assets – Net assets of the Organization are classified based on the presence or absence of donor- or grantor-imposed restrictions, as follows:

Net assets without donor restrictions – Amounts that are not subject to usage restrictions based on donor- or grantor- imposed requirements. Net assets without donor restrictions includes expendable funds available to support operations as well as net assets invested in property and equipment. This class also includes net assets previously restricted by donors or grantors where restrictions have expired or been met.

BOLEY CENTERS, INC. AND AFFILIATES
Notes to Financial Statements
Years Ended June 30, 2021 and 2020

Note 2 – Summary of Significant Accounting Policies (Continued)

Classification of Net Assets (Continued) –

Net assets with donor restrictions – Amounts subject to usage limitations based on donor- or grantor-imposed restrictions. Restrictions may be met by the passage of time or by actions of the Organization. These restrictions may be temporary or perpetual in nature. When a donor restriction expires, net assets with donor restrictions are released to net assets without donor restrictions and are reported in the consolidated statements of activities as net assets released from restriction.

Revenue Recognition –

Grants – The Organization receives performance, rate for service, and reimbursement grants. Grant revenues are recognized when grantor-imposed restrictions are met, pursuant to each grant agreement. If funds are not spent and also have other performance and/or control barriers that must be met for the Organization to be entitled to the funds. For non-reciprocal agreements, revenues are recognized when received, or when any conditions by grantors have been met. Grants received with grantor-imposed restrictions that are met in the same year as received are reported as revenues without donor restrictions.

Rent – Rent revenue is recognized monthly when the terms of the lease agreement. Rental payments received in advance are deferred and classified as a liability until earned.

Contributions – Contribution revenue is recognized when an unconditional gift is given to the Organization, or when such a legally enforceable gift is promised but not yet received. Unconditional promises to give expected to be collected within one year are recorded at net realizable value. Unconditional promises to give expected to be collected in future years are initially recorded at fair value using present value techniques incorporating risk-adjusted discount rates applicable to the years in which the promises are received. Amortization of the discount is included in contribution revenue.

Functional Allocation of Expenses – The costs of providing program and supporting services have been summarized in the accompanying consolidated statements of functional expenses. Employee leasing and related expenses that are associated with a specific program are charged directly to that program. Salaries and other expenses that benefit more than one program are allocated to the various programs based on the relative benefit provided. Maintenance, training, and other costs are allocated to natural expense classifications (i.e., repairs and maintenance, personnel costs, etc.) based on usage, and recorded as program and supporting services as appropriate.

Income Taxes – The entities comprising the Organization have been recognized by the Internal Revenue Service as tax-exempt organizations under Section 501(c)(3) of the Internal Revenue Code and have been determined not to be private foundations. As a result, there is no provision for federal income taxes in these consolidated financial statements and no federal income taxes were paid. Management believes that the entities comprising the Organization have adequately addressed all relevant tax positions and there are no unrecorded tax liabilities. Generally, the tax returns of the organizations remain open for three years for federal income tax examination.

BOLEY CENTERS, INC. AND AFFILIATES
Notes to Financial Statements
Years Ended June 30, 2021 and 2020

Note 3 – Availability and Liquidity

The Organization has a policy of structuring its financial assets to be available as its general expenditures, liabilities, and other obligations come due. As part of its liquidity plan, excess cash is invested in short-term investments. Cash needs of the Organization are expected to be met on a monthly basis from rents collected and from grant and contribution revenue.

The Organization has the following financial assets available to meet its needs for general expenditures over the next 12 months at June 30, 2021:

Financial assets at year-end:	
Cash and cash equivalents	\$ 2,722,083
Accounts receivable - clients and other	105,623
Accounts receivable - grants and funding sources	2,563,812
Investments	4,763,767
	10,155,285
Less amounts not available to be used within one year:	
Board designated net assets	(215,315)
	\$ 9,939,970

None of the financial assets are subject to donor or other contractual restrictions that would make them unavailable to meet the cash needs of the Organization in the next 12 months. Accordingly, all such funds are available to meet the cash needs of the Organization in the next 12 months.

In addition, in accordance with certain debt agreements, the Organization may maintain cash in reserve for replacements accounts. These funds are required by debt agreements and are to be used for the benefit of the Organization. The funds may be withdrawn only with the approval of the debt holder.

Boley also has an unsecured line of credit of \$2 million with Centennial Bank, none of which was outstanding at June 30, 2021 and 2020.

Note 4 – Promised Use of Land

PAL leases certain real property with improvements on which it provides affordable rental apartments for households with special needs at a lease cost to PAL of \$1 annually. The property may be used only for the purpose of improving and operating this eight-unit apartment complex. At the landlord's sole discretion, the lease can be extended for an additional 20-year term, or the landlord can purchase the property improvements at fair value. The agreement expired 20 years after the date of issuance of the certificate of occupancy (March 14, 2021).

During the year ended June 30, 2021, the lease was extended under substantially identical terms. The extended lease expires March 31, 2041.

BOLEY CENTERS, INC. AND AFFILIATES
Notes to Financial Statements
Years Ended June 30, 2021 and 2020

Note 4 – Promised Use of Land (Continued)

Promised use of land was recorded at inception and again at lease extension in amounts equal to the fair value of the real property at the time of the contribution, which was determined by management to be \$353,600. As the promised use of land will be realized over a period greater than one year, the contribution revenue was discounted to present value using a discount rate of 4%. The promised use of land balance is reduced annually by rent expense recognized over the term of the lease. Additionally, the discount on the contribution is being amortized and recognized as contribution with donor restrictions over the term of the lease.

Promised use of land is expected to be amortized as follows:

In one year or less		\$	17,643
Between one and five years			70,572
In more than five years			260,239
			348,454
Less unamortized discount			(189,425)
			\$ 159,029

Note 5 – Investments

Investments consist of the following at June 30:

	Boley Centers, Inc.	Bessie Boley Foundation	Boley Foundation, Inc.	Total
<i>2021</i>				
Cash and money market accounts	\$ -	\$ 77,307	\$ 103,906	\$ 181,213
Fixed income securities	-	26,844	953,548	980,392
Equities	-	1,737,380	1,531,035	3,268,415
Mutual funds	80,990	-	-	80,990
Community Foundation of Tampa Bay	-	-	252,757	252,757
	\$ 80,990	\$ 1,841,531	\$ 2,841,246	\$ 4,763,767

BOLEY CENTERS, INC. AND AFFILIATES
Notes to Financial Statements
Years Ended June 30, 2021 and 2020

Note 5 – Investments (Continued)

Investments consist of the following at June 30:

	Boley Centers, Inc.	Bessie Boley Foundation	Boley Foundation, Inc.	Total
<i>2020</i>				
Cash and money market accounts	\$ -	\$ 51,624	\$ 67,958	\$ 119,582
Fixed income securities	-	508,821	685,097	1,193,918
Equities	-	1,421,193	890,603	2,311,796
Mutual funds	78,635	-	-	78,635
Community Foundation of Tampa Bay	-	-	203,750	203,750
	<u>\$ 78,635</u>	<u>\$ 1,981,638</u>	<u>\$ 1,847,408</u>	<u>\$ 3,907,681</u>

Total interest and dividends are included in other revenue and consist of the following for the years ended June 30:

	2021	2020
Interest and dividends on investments	\$ 147,624	\$ 152,558
Interest on cash and money market accounts	2,467	199,562
Discounts earned	-	300
	<u>\$ 150,091</u>	<u>\$ 352,420</u>

Total unrealized and realized gains (losses), net of fees, consist of the following for the years ended June 30:

	2021	2020
Realized gains (losses)	\$ 184,065	\$ (23,390)
Unrealized gains (losses)	457,240	(204,439)
Fees	(41,276)	(33,172)
	<u>\$ 600,029</u>	<u>\$ (261,001)</u>

BOLEY CENTERS, INC. AND AFFILIATES
Notes to Financial Statements
Years Ended June 30, 2021 and 2020

Note 6 – Fair Values of Financial Assets

The fair value of financial assets are as follows at June 30:

	Fair Value	Measured Using		
		Level 1	Level 2	Level 3
<i>2021</i>				
Cash and money market accounts	\$ 181,213	\$ 181,213	\$ -	\$ -
Fixed income securities	980,392	-	980,392	-
Equities	3,268,415	3,268,415	-	-
Mutual funds	80,990	-	80,990	-
Community Foundation of Tampa Bay	252,757	-	-	252,757
	<u>\$ 4,763,767</u>	<u>\$ 3,449,628</u>	<u>\$ 1,061,382</u>	<u>\$ 252,757</u>
<i>2020</i>				
Cash and money market accounts	\$ 119,582	\$ 119,582	\$ -	\$ -
Fixed income securities	1,193,918	-	1,193,918	-
Equities	2,311,796	2,311,796	-	-
Mutual funds	78,635	-	78,635	-
Community Foundation of Tampa Bay	203,750	-	-	203,750
	<u>\$ 3,907,681</u>	<u>\$ 2,431,378</u>	<u>\$ 1,272,553</u>	<u>\$ 203,750</u>

For the valuation of fixed income securities and mutual funds, the Organization used other observable inputs, particularly dealer marked prices for comparable investments as of the valuation date (Level 2).

For the valuation of investments held at the Community Foundation of Tampa Bay, the Organization used significant unobservable inputs, including information from fund managers or other valuation methods (Level 3). Management reviews and evaluates the values provided by the fund managers and agrees with the valuation methods and assumptions used in determining the fair value of the investments.

BOLEY CENTERS, INC. AND AFFILIATES
Notes to Financial Statements
Years Ended June 30, 2021 and 2020

Note 6 – Fair Values of Financial Assets (Continued)

The table below sets forth a reconciliation of the Organization’s beginning and ending Level 3 financial assets at June 30:

	2021	2020
Beginning of year	\$ 203,750	\$ 214,444
Realized and unrealized losses included in change in net assets	50,701	(2,067)
Purchases, sales, issuances, and settlements, net	(1,694)	(8,627)
End of year	\$ 252,757	\$ 203,750

Note 7 – Investments in Joint Ventures

Investments in joint ventures are as follows at June 30:

	2021	2020
Solutions for Administrative Services	\$ 291,987	\$ 294,732
Duval Park		
Boley Centers, Inc.	302,688	301,688
Pinellas Affordable Living, Inc.	188	188
	\$ 594,863	\$ 596,608

Solutions for Administrative Services

Boley and PAR (collectively, “members”) formed a Florida corporation, Solutions for Administrative Services, Inc. (“SAS”). SAS was designated as a taxable not-for-profit entity by the Internal Revenue Service. Boley is a 50% member.

The primary purpose of SAS is to serve as an administrative services organization that efficiently provides management, support, and administrative services to qualifying tax-exempt organizations that operate in the geographic area served by SAS, including the current members. Specific services provided by SAS include certain core service areas including human resources, finance/accounting, electronic health record development/management, information technology, and support services.

The members and other are tax-exempt organizations desiring to use SAS’s services have the benefit of collaborating and sharing a variety of management and related administrative services, thereby gaining efficiencies and economies of scale, and enabling participants to focus on their respective missions, goals, and programs for which they are organized.

During the years ended June 30, 2021 and 2020, Boley did not make any investment in SAS. Boley’s share of the operating loss of SAS for the years ended June 30, 2021 and 2020, was approximately \$2,700 and \$2,500, respectively, and were accounted for using the equity method.

BOLEY CENTERS, INC. AND AFFILIATES
Notes to Financial Statements
Years Ended June 30, 2021 and 2020

Note 7 – Investments in Joint Ventures (Continued)

Solutions for Administrative Services (Continued)

Summarized financial information for SAS as of and for the years ended June 30, 2021 and 2020 is as follows:

	2021	2020
Total assets	\$ 689,063	\$ 694,552
Total liabilities	\$ -	\$ -
Net assets	\$ 689,063	\$ 694,552
Net income (loss)	\$ (5,489)	\$ (5,096)

Duval Park

Boley and PAL, along with other unrelated investors are general partners in Duval Park GP, LLC (“LLC”). The LLC and with another unrelated party are general partners with one limited partner, who is also an unrelated entity, own Duval Park, Ltd. (“Duval”). Duval was created to build an 88-unit, low-income housing apartment complex. During the years ended June 30, 2021 and 2020, Boley contributed an approximately additional \$1,000 and \$560, respectively, to Duval. Boley’s share of the operating loss of Duval for each the years ended June 30, 2021 and 2020, was \$0.

A developer fee of approximately \$5,800 and \$6,500 was received by each, Boley and PAL, for the years ended June 30, 2021 and 2020, respectively, related to this project. Total developer fees related to this project are approximately \$25,000 and \$13,000 for the years ended June 30, 2021 and 2020, respectively, and are included in developer fees in other revenue in the accompanying consolidated statements of activities.

Note 8 – Property and Equipment and Construction in Progress

Property and Equipment

Property and equipment consists of the following at June 30:

	2021	2020
Land	\$ 8,516,410	\$ 8,188,991
Buildings and improvements	49,606,322	49,307,370
Furniture and equipment	2,983,565	2,613,252
Leasehold improvements	350,864	350,864
Vehicles	1,215,037	1,177,507
	62,672,198	61,637,984
Less accumulated depreciation	(23,472,115)	(21,847,538)
	\$ 39,200,083	\$ 39,790,446

BOLEY CENTERS, INC. AND AFFILIATES
Notes to Financial Statements
Years Ended June 30, 2021 and 2020

Note 8 – Construction in Progress and Property and Equipment (Continued)

Construction in Progress

Construction in progress and construction commitments consist of the following at June 30:

	Construction in Progress		Construction Commitments	
	2021	2020	2021	2020
PAL:				
Butterfly Grove	\$ 2,167,499	\$ 234,258	\$ 774,608	\$ 2,595,914
Evergreen Village	4,230,355	2,391,307	369,884	1,378,415
Founders Point	41,938	-	-	-
Poynter Preserves	-	45,648	-	-
Whispering Pines	120,841	34,057	4,394,000	-
	\$ 6,560,633	\$ 2,705,270	\$ 5,538,492	\$ 3,974,329

Butterfly Grove – Is the redevelopment of an existing property into a twenty-unit apartment complex that is being financed by Florida Housing Finance Corporation (\$4.3 million); Pinellas County, Florida (\$470 thousand); and the City of St. Petersburg, Florida (\$75 thousand).

Evergreen Village – Is a multi-unit housing complex that consists of five duplexes and four triplexes, in one, two, and three-bedroom units. Construction is underway on the 22 units and is being financed by Florida Housing Finance Corporation (\$4.5 million) and Pinellas County, Florida (\$545 thousand).

Founders Point – Is land purchased and capitalized development costs for expected future development.

Poynter Preserves III – Is an eight-unit apartment complex that was placed in service during the year ended June 30, 2021. Boley recognized a \$50,000 developer fee during the year ended June 30, 2021 at the completion of this project.

Whispering Pines – Is land purchased and capitalized development costs for expected future development that is being financed by Florida Housing Finance Corporation (\$4.4 million), an ELI loan of \$296 thousand, and City of St. Petersburg loan of \$910 thousand. Financing was secured after year end.

Note 9 – Notes Payable

Notes Payable

Notes payable consist of the following at June 30:

Entity	Property	Debt Holder	Maturity	Periodic Payment	Interest, per Annum	Forgiveness Provisions	Notes	2021	2020
Boley	PPP Loan	Centennial Bank		\$ -	1%	Yes	18	\$ -	\$ 1,767,457
PAL	Parkside Apts.	City of St. Petersburg	2021 Apr	-	0%	Yes	2, 9, 18	-	90,000
PAL	Parkside Apts.	City of St. Petersburg	2021 Apr	-	0%	Yes	2, 9, 18	-	4,500
Boley	Safe Haven	Synovus Bank	2022 Jan	-	0%	Yes	1, 3	118,421	118,421
DD	Dome District Apartments, Inc.	City of St. Petersburg	2022 Jan	-	0%	Yes	1, 3, 9	9,000	9,000

BOLEY CENTERS, INC. AND AFFILIATES
Notes to Financial Statements
Years Ended June 30, 2021 and 2020

Note 9 – Notes Payable (Continued)

Notes Payable (Continued)

Notes payable consist of the following at June 30 (continued):

Entity	Property	Debt Holder	Maturity	Periodic Payment	Interest, per Annum	Forgiveness Provisions	Notes	2021	2020
PAL	Oak Park Apts.	City of St. Petersburg	2022 Jul	225	0%		1, 7, 9, 15	-	246
PAL	Bayou Pass Apts.	Neighborhood Lending Partners ("NLP")	2023 Feb	2,030	2%		1, 6, 8, 17	-	71,140
128 PL	128 Place, Inc.	City of St. Petersburg	2023 Sep	-	0%	Yes	1, 3, 9	62,000	62,000
PB	Palmetto Breeze Apartments, Inc.	Synovus Bank	2023 Sep	-	0%	Yes	1, 3	107,875	107,875
PAL	Clam Bayou Apts.	Synovus Bank	2023 Sep	-	0%	Yes	1	60,034	60,034
SUN	Sunset Point Apartments, Inc.	City of Clearwater	2023 Sep	-	0%	Yes	1, 3, 14	346,451	346,451
PAL	Salt Creek	City of St. Petersburg	2024 Apr	-	0%	Yes	1, 3, 9	186,222	186,222
PAL	Salt Creek	City of St. Petersburg	2024 Apr	-	0%	Yes	1, 3, 10	129,093	129,093
PAL	Salt Creek	City of St. Petersburg	2024 Apr	-	0%	Yes	1, 3, 9	1,815	1,815
Boley	Grove Park Village	Synovus Bank	2024 Jul	-	0%	Yes	1, 3	117,377	117,377
Boley	Broadwater II	Synovus Bank	2027 Jan	-	0%	Yes	1, 3	154,535	154,535
CB	Clam Bayou Apartments, Inc.	Synovus Bank	2026 Jul	-	0%	Yes	1, 3	187,960	187,960
Boley	Safe Haven	City of St. Petersburg	2027 Jan	-	0%	Yes	1, 9, 16	433,812	382,713
PAL	Owls Nest	City of St. Petersburg	2027 Jan	-	0%	Yes	1, 10	12,000	-
CB	Clam Bayou Apartments, Inc.	City of St. Petersburg	2027 Dec	-	0%	Yes	1, 3, 9	91,500	91,500
PB	Palmetto Breeze Apartments, Inc.	City of St. Petersburg	2027 Dec	-	0%	Yes	1, 3, 9	82,000	82,000
PAL	Clam Bayou Apts.	City of St. Petersburg	2028 Jun	-	0%	Yes	1, 9	399,294	399,294
TB	Twin Brooks Apartments, Inc.	Synovus Bank	2028 Sep	-	0%	Yes	1, 3	120,000	120,000
AA	Arlington Avenue Apartments, Inc.	City of St. Petersburg	2030 Jun	-	0%	Yes	1, 3, 9	500,000	500,000
Boley	Broadwater II	City of St. Petersburg	2031 Jan	-	0%	Yes	1, 3, 9	238,144	238,144
PAL	Bayou Pass Apts.	City of St. Petersburg	2031 Jan	-	0%	Yes	1, 9	111,000	111,000
PAL	Bayou Pass Apts.	NLP	2031 Feb	622	5%		1, 7, 17	-	95,894
BP	Broadwater Place, Inc.	City of St. Petersburg	2033 Sep	-	0%	Yes	1, 3, 9	170,000	170,000
CHP	Community Housing of Pinellas County, Inc.	U.S. Department of Housing and Urban Development ("HUD")	2033 Oct	-	0%	Yes	1, 12	423,500	423,500
PAL	Broadwater III	City of St. Petersburg	2033 Oct	-	0%	Yes	1, 9	500,000	500,000
FLA	Forest Lane Apartments, Inc.	HUD	2035 May	-	0%	Yes	1, 12	1,259,100	1,259,100
FMA	Forest Meadows Apartments, Inc.	HUD	2035 Jun	-	0%	Yes	1, 12	935,400	935,400
PAL	Ranch at Pinellas	Florida Housing Finance Corp. ("FHFC")	2035 Jul	-	0%		1	3,766,273	3,766,273
PAL	Ranch at Pinellas	FHFC	2035 Jul	-	0%	Yes	1, 3	211,887	211,887
PAL	Evergreen Village	FHFC	2035 Nov	-	0%		1	3,933,377	1,341,202
PAL	Evergreen Village	FHFC	2035 Nov	-	0%		1, 3	235,300	112,560
Boley	Mastery Apartments	City of St. Petersburg	2035 Dec	-	0%	Yes	1, 9	268,965	268,965
Boley	Safe Haven	Pinellas County	2036 May	-	0%	Yes	1, 3, 9	325,000	325,000
Boley	Grove Park Village	Pinellas County	2036 Apr	-	0%	Yes	1, 3, 9	510,748	510,748
PAL	Poynter Preserves	Pinellas County	2036 Nov	-	0%	Yes	1, 9	1,175,000	1,175,000
PAL	Butterfly Grove	FHFC	2037 Apr	-	0%		1	1,678,567	-
PAL	Butterfly Grove	FHFC	2037 Apr	-	0%	Yes	1, 3	94,475	-
Boley	Mid-County Safe Haven	Pinellas County	2037 May	-	0%	Yes	1, 9	2,135,880	2,135,880
Boley	Grove Park Village	Pinellas County	2038 Oct	-	0%	Yes	1, 3	302,000	302,000
PAL	Poynter Preserves	City of St. Petersburg	2039 Jan	-	0%	Yes	1, 9	965,790	965,790
PAL	Poynter Preserves III	Pinellas County	2039 Jul	-	0%	Yes	1, 9	479,296	344,603
PAL	Poynter Preserves III	Housing Finance Authority of Pinellas County ("HFAPC")	2039 Jul	-	0%	Yes	1	384,631	384,631

BOLEY CENTERS, INC. AND AFFILIATES
Notes to Financial Statements
Years Ended June 30, 2021 and 2020

Note 9 – Notes Payable (Continued)

Notes Payable (Continued)

Notes payable consist of the following at June 30 (continued):

Entity	Property	Debt Holder	Maturity	Periodic Payment	Interest, per Annum	Forgiveness Provisions	Notes	2021	2020
PAL	Salt Creek	FHFC	2039 Sep	9,823	0%		1	186,643	196,466
SP	Shady Pines Apartments, Inc.	HUD	2039 Sep	-	0%	Yes	1, 12	455,000	455,000
Boley	Covert Apartments	City of Clearwater	2039 Dec	232	0%		7	51,558	54,345
LT	Laurel Trace Apartments, Inc.	Pinellas County	2040 Sep	-	0%	Yes	1, 3, 9	140,000	140,000
PAL	Poynter Preserves III	City of St. Petersburg	2040 Sep	-	0%	Yes	1, 9	481,093	463,898
Boley	Burlington Gardens	City of St. Petersburg	2041 Mar	-	0%	Yes	1, 10	1,567,925	1,567,925
DD	Dome District Apartments, Inc.	HUD	2041 May	-	0%	Yes	1, 12	1,061,100	1,061,100
PAL	Butterfly Grove	City of St. Petersburg	2041 Jul	-	0%	Yes	1, 3	73,048	-
LW	Lake Winds Apartments, Inc.	HUD	2042 Apr	-	0%	Yes	1, 12	865,100	865,100
128 PL	128 Place, Inc.	HUD	2043 May	-	0%	Yes	1, 12	1,128,600	1,128,600
Boley	Fountainview	City of St. Petersburg	2043 Jun	-	0%	Yes	1, 10	870,073	870,073
PB	Palmetto Breeze Apartments, Inc.	HUD	2045 May	-	0%	Yes	1, 12	809,448	809,448
PAL	Broadwater IV	City of St. Petersburg	2045 Aug	-	0%	Yes	1, 9	110,000	110,000
CB	Clam Bayou Apartments, Inc.	FHFC	2046 Sep	-	0%		1, 3	184,130	184,130
CB	Clam Bayou Apartments, Inc.	HUD	2047 Jan	-	0%	Yes	1, 12	1,110,000	1,110,000
PCH	Pinellas County Housing, Inc.	Walker & Dunlop, Inc.	2048 Jan	8,232	2.65%		1, 7, 13	1,708,125	1,751,822
PAL	Ranch at Pinellas	Pinellas County	2048 May	11,545	0%	Yes	1, 3, 5, 10	400,000	400,000
PAL	Ranch Phase II	Pinellas County	2049 Jul	-	0%	Yes	1, 11	926,696	926,696
PAL	Ranch Phase II	HFAPC	2049 Jul	-	0%		1, 3	300,000	300,000
TB	Twin Brooks Apartments, Inc.	HUD	2049 Sep	-	0%	Yes	1, 12	1,404,900	1,404,900
PAL	Twin Brooks Apts. II & III	City of St. Petersburg	2049 Dec	-	0%	Yes	1, 9	1,641,199	1,641,199
TB	Twin Brooks Apartments, Inc.	City of St. Petersburg	2049 Dec	-	0%	Yes	1, 3, 9	191,667	191,667
AA	Arlington Avenue Apartments, Inc.	HUD	2050 Apr	-	0%	Yes	1, 12	1,878,600	1,878,600
PAL	Butterfly Grove	Pinellas County	2050 Jun	-	0%	Yes	1, 3, 11	469,621	-
LT	Laurel Trace Apartments, Inc.	HUD	2052 May	-	0%	Yes	1, 12	1,167,600	1,167,600
BP	Broadwater Place, Inc.	HUD	2052 Sep	-	0%	Yes	1, 12	1,702,427	1,702,427
PAL	Evergreen Village	Pinellas County	2052 Sep	1,710	1%		1, 3, 5, 9	545,410	535,000
SUN	Sunset Point Apartments, Inc.	HUD	2053 May	-	0%	Yes	1, 12	1,796,900	1,796,900
								46,450,585	43,280,106
								(476,883)	(442,866)
								\$45,973,702	\$42,837,240

Less unamortized loan costs

Notes:

- 1 - Collateralized by real property and assignment of rents. Default provisions apply.
- 2 - Collateralized by The Oaks Apartments, which is owned by Boley.
- 3 - Subordinate to other debt on the same property.
- 4 - Note payable to a related party.
- 5 - Annual payments include principal and interest at the noted annual rate.
- 6 - Quarterly payments include principal and interest at the noted annual rate.
- 7 - Monthly payments include principal and interest at the noted annual rate.
- 8 - \$60,000 under the Community Development Financial Institutions Program.
- 9 - Under the Home Investment Partnerships Program ("HOME").
- 10 - Under the Community Development Block Grants/Entitlement Grants ("CDBG") program.

- 11 - Under the State Housing Initiatives Partnership Program ("SHIP")
- 12 - Under HUD's Section 811 Capital Advance Program.
- 13 - Under HUD's Section 202 Direct Loan Program.
- 14 - Under the Neighborhood Stabilization Program.
- 15 - Presented net of a discount of \$2,277 and \$4,730 at June 30, 2021 and 2020, respectively.
- 16 - Presented net of a discount of \$0 and \$96,465 at June 30, 2021 and 2020, respectively.
- 17 - Paid off during the year ended June 30, 2021.
- 18 - Forgiven during the year ended June 30, 2021.

BOLEY CENTERS, INC. AND AFFILIATES
Notes to Financial Statements
Years Ended June 30, 2021 and 2020

Note 9 – Notes Payable (Continued)

Notes Payable (Continued)

As of June 30, 2021, the Organization has approximately \$2.9 million available for draws on notes payable to fund ongoing construction.

Maturities of notes payable are as follows:

	Principal Payments Due	Mortgages with Forgiveness Provisions	Total
Years ending June 30:			
2022	\$ 72,981	\$ 127,421	\$ 200,402
2023	71,876	-	71,876
2024	73,111	893,490	966,601
2025	74,380	117,377	191,757
2026	75,683	-	75,683
Thereafter	12,351,214	32,595,329	44,946,543
	\$ 12,719,245	\$ 33,733,617	46,452,862
Less unamortized discounts			(2,277)
Less unamortized loan costs			(476,883)
			\$ 45,973,702

SBA PPP Loan

In March 2020, the Coronavirus Aid, Relief, and Economic Security Act (“CARES Act”) was signed into law and was meant to address the economic fallout from the COVID-19 pandemic. In connection with the CARES Act, Boley received a Small Business Administration (“SBA”) Paycheck Protection Plan (“PPP”) loan for \$1,767,457 in April 2020. The loan was unsecured, bore interest at 1%, and was due to mature in April 2022.

The loan was eligible to be forgiven in whole or in part if certain conditions were met related to the use of the proceeds and maintenance of employment with the Organization’s employees. During 2021, the loan was forgiven.

Loan Costs

Loan costs consist of the following at June 30:

	2021	2020
Loan costs	\$ 625,895	\$ 610,082
Less accumulated amortization	(149,012)	(167,216)
	\$ 476,883	\$ 442,866

BOLEY CENTERS, INC. AND AFFILIATES
Notes to Financial Statements
Years Ended June 30, 2021 and 2020

Note 9 – Notes Payable (Continued)

Loan Costs (Continued)

Interest expense related to amortization of loan costs was approximately \$24,000 and \$22,000 for the years ended June 30, 2021 and 2020, respectively. Future amortization of loan costs is expected to be approximately \$24,000 each year through maturity of the related notes payable in 2053.

Accrued Interest

Prior to Salt Creek's refinancing in 2016, the terms of the previous loan included accrued interest that would be due in the event that Salt Creek or PAL violated any of the terms of the agreement. This accrued interest would otherwise be forgiven along with the principal of the note when it comes due in April 2024. When the loan was refinanced in 2016, the debt holder lowered the interest rate to 0%. Therefore, no further interest is required to be recorded for this loan, however the historical balance of \$201,838 will remain until forgiven.

Note 10 – Line of Credit

Boley has an unsecured \$2 million line of credit with Centennial Bank. No amounts were outstanding under the line of credit at June 30, 2021 and 2020. Borrowings under the line of credit carry a variable interest rate, subject to change based on the daily Wall Street Journal (“WSJ”) prime rate, but no less than 4%. The interest rate on the line of credit at June 30, 2021 and 2020, was 4.0% and 3.25%, respectively. This line of credit is payable on demand, secured by the administration building, and matures June 15, 2022.

Note 11 – Net Assets

Net Assets Without Donor Restrictions

Net assets without donor restrictions consist of the following at June 30:

	2021	2020
Board designated	\$ 215,315	\$ 110,013
Operating surplus	10,574,252	8,744,292
	\$ 10,789,567	\$ 8,854,305

The board of directors has designated certain cash to be used for certain incentive compensation payments.

BOLEY CENTERS, INC. AND AFFILIATES
Notes to Financial Statements
Years Ended June 30, 2021 and 2020

Note 11 – Net Assets (Continued)

Net Assets With Donor Restrictions

Net assets with donor restrictions consist of the following at June 30:

	2021	2020
<i>Discounts on below market-rate mortgages</i> - Interest contributed based on the difference between the fair value of mortgages using market interest rates and the stated rate. Each year, interest expense is recognized and the mortgage liability is increased (accreted).	\$ 2,277	\$ 136,740
 <i>Contributed use of land</i> - The remainder of a 20-year below market-rate lease on real property that was contributed to the Organization under an agreement for a one time \$20 payment. Each year rent expense and contributed use of land revenue are recognized.	159,029	2,307
	\$ 161,306	\$ 139,047

Net Assets Released from Donor Restrictions

Net assets are released from donor restrictions by incurring expenses which satisfy the purpose or time restrictions specified by donors or grantors. Net assets were released from donor restrictions as follows for the years ended June 30:

	2021	2020
Accretion of loan discounts	\$ 2,453	\$ 30,348
Rent expense on original lease agreement	2,307	6,942
Rent expense on extended lease agreement	5,146	-
Other	132,010	-
	\$ 141,916	\$ 37,290

BOLEY CENTERS, INC. AND AFFILIATES
Notes to Financial Statements
Years Ended June 30, 2021 and 2020

Note 12 – Thrift Store Revenue

Thrift store revenue consists of the following for the years ending June 30:

	2021	2020
Contributions - donated goods	\$ 65,146	\$ 51,460
Sales and other	435,977	333,377
	\$ 501,123	\$ 384,837

Note 13 – Other Revenue

Other revenue consists of the following for the years ending June 30:

	2021	2020
Consulting	\$ 45,204	\$ 48,371
Developer fees	61,524	63,090
Food stamp revenue	30,209	3,930
Interest, dividends, and discounts earned	150,091	352,420
Maintenance revenue	4,964	5,603
Management fees revenue	70,924	70,552
Medicare	39,575	72,387
Research study participation	427,257	629,368
Special events, net of direct expenses of \$20,064	34,289	47,757
Youth programs, private sector	153,295	325,877
Other	80,984	117,838
	\$ 1,098,316	\$ 1,737,193

Note 14 – Retirement Plan

Boley has a defined contribution 401(k) profit-sharing plan. Employees who have completed one year of service and are 21 years of age or older are eligible to participate. Boley makes a matching contribution equal to 100% of the salary reduction amount contributed by the employee during the plan year that does not exceed 3% of the employee's compensation received during the plan year. Contributions for the years ended June 30, 2021 and 2020, were approximately \$139,000 and \$123,000, respectively.

Note 15 – Leases

Boley leases facilities for the vocational program and a thrift store, as well as various pieces of equipment under various operating leases. Rental expense for the years ended June 30, 2021 and 2020, was approximately \$221,000 and \$203,000, respectively.

BOLEY CENTERS, INC. AND AFFILIATES
Notes to Financial Statements
Years Ended June 30, 2021 and 2020

Note 15 – Leases (Continued)

Approximate future minimum lease payments are as follows:

Years ending June 30:		
2022	\$	80,000
2023		400
		400
	\$	80,400

Note 16 – Related Party Transactions

Boley-PAR, Inc

Boley-PAR, Inc. provides management and other administrative services to its members under a management services agreement. The services provided under the agreement include access center, medical records, human resources, finance/accounting, electronic health record development/management, information technology, property management, and support services. The services are provided by staff that are leased from each member agency under a leased employee agreement. The employee leasing costs are based on actual compensation and benefits.

During the years ended June 30, 2021 and 2020, Boley provided employee leasing services at a cost of approximately \$1,491,000 and \$1,421,000, respectively, to Boley-PAR, Inc. and incurred management fees of approximately \$1,495,000 and \$1,445,000, respectively, to Boley PAR, Inc. for management/administrative services received.

Certain staff are shared with members of Boley-PAR, Inc. Included in the consolidated statement of functional expenses for the years ended June 30, 2021 and 2020, is approximately \$333,000 and \$346,000, respectively, of shared staff costs.

Included in accounts receivable at June 30, 2021 and 2020 is approximately \$12,900 and \$16,500, respectively, owed from Boley-PAR, Inc.

Solutions for Administrative Services, Inc. – Included in accounts payable at June 30, 2021 and 2020 is approximately \$202,000 and \$187,000, respectively, owed to SAS.

Collateralized Debt – A Boley property, the “Oaks Apartments”, collateralizes PAL’s note payable for Parkside Apartments.

Sub-contract Awards – Boley sub-contracts awards to PAL to provide Continuum of Care services to certain tenants of PAL’s properties. For the years ended June 30, 2021 and 2020, approximately \$463,000 and \$410,000, respectively, were sub-contracted by Boley to PAL for providing these services.

Insurance – Boley carries a master insurance policy on all of the properties that they own and manage. Boley allocates insurance premiums based on information provided by the insurance company.

Concentration of credit risk – From time to time, the Organization may maintain cash balances that exceed federal insurance limits. The Organization has not experienced any losses on such accounts and does not believe it is exposed to any significant credit risk on cash and other deposits.

BOLEY CENTERS, INC. AND AFFILIATES
Notes to Financial Statements
Years Ended June 30, 2021 and 2020

Note 17 – Concentrations, Commitments, and Contingencies

Concentration in funding sources – The Organization receives a substantial amount of support from federal, state, and local grantor agencies for its programs. If this support were to be reduced or eliminated, it could affect the operation of the supported programs. As of June 30, 2021 and 2020, approximately 65% and 78%, respectively, of total support and revenues are from these grants.

Grantors – The Organization is subject to federal, state, and local audits to determine compliance with grant funding requirements. In the event that expenditures would be disallowed, repayment could be required. Government grants and certain debt that has been deemed forgiven require the fulfillment of certain conditions as set forth by applicable laws, rules, and regulations, and within the grant agreements. Failure to fulfill the conditions could result in the return of funds to the grantor.

Examination by grantor agencies – PAL is required under various loan and regulatory agreements and federal and local grant funding agreements to operate Bayou Pass, Butterfly Grove, Broadwater III, Broadwater IV, Clam Bayou, Evergreen Village, Oak Park, Owl's Nest, Parkside, Poynter Preserves, Poynter Preserves III, Ranch at Pinellas, Ranch Phase II, Salt Creek, and Twin Brooks II & III as qualified low-income projects, as well as to comply with various other provisions. In the event of noncompliance, the properties could be forfeited, and/or the repayment of disallowed expenditures may be required.

Section 811 Capital Advances – HUD has provided funding through Section 811 Capital Advances accumulating to approximately \$16 million through June 30, 2021 and 2020. These capital advances bear no interest and are not required to be repaid to HUD as long as the mortgaged property remains available for low-income individuals with chronic mental illness for at least 40 years. Failure to keep the HUD projects available for low-income people with chronic mental illness would result in repayment of the entire capital advance amount, plus interest since the date of the first advance.

The HUD projects operate in a heavily regulated environment. The operation of the projects is subject to the administrative directives, rules, and regulations of federal, state, and local regulatory agencies, including but not limited to HUD. Such administrative directives, rules, and regulations are subject to change by an act of Congress or an administrative change mandated by HUD. Such changes may occur with little notice or inadequate funding to pay for the related cost, including the additional administrative burden, to comply with the change.

Property acquired with grant funding – A substantial amount of the Organization's property has been acquired with grant funds and is considered to be owned by the Organization while used in the program for which it was purchased or in future authorized programs. However, its disposition and the ownership of any proceeds are subject to applicable regulations.

Note 18 – Subsequent Events

The Organization has evaluated subsequent events through May 13, 2022, the date which the financial statements were available to be issued. No events have occurred subsequent to the statement of financial position date and through May 13, 2022, except as disclosed in Note 8, that would require adjustment to, or disclosure in, the financial statements.



PRIDA, GUIDA & PEREZ, P.A.
CERTIFIED PUBLIC ACCOUNTANTS
1106 N. FRANKLIN STREET
TAMPA, FLORIDA 33602

**INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER FINANCIAL
REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN
AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE
WITH *GOVERNMENT AUDITING STANDARDS***

To the Board of Directors
Boley Centers, Inc. and affiliates

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in Government Auditing Standards issued by the Comptroller General of the United States, the consolidated financial statements of Boley Centers, Inc. and affiliates (a nonprofit organization), which comprise the consolidated statement of financial position as of June 30, 2021, and the related consolidated statements of activities and change in net assets, functional expenses, and cash flows for the year then ended, and the related notes to the consolidated financial statements (collectively, "financial statements"), and have issued our report thereon dated May 13, 2022.

Internal Control over Financial Reporting

In planning and performing our audit of the financial statements, we considered Boley Centers, Inc. and affiliates' internal control over financial reporting ("internal control") as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of Boley Centers, Inc. and affiliates' internal control. Accordingly, we do not express an opinion on the effectiveness of Boley Centers, Inc. and affiliates' internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected, on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and therefore, material weaknesses or significant deficiencies may exist that have not been identified. We did identify certain deficiencies in internal control, described in the accompanying schedule of findings and responses as item 2021-001 that we consider to be a material weakness.

**INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER FINANCIAL
REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN
AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE
WITH *GOVERNMENT AUDITING STANDARDS* (Continued)**

Compliance and Other Matters

As part of obtaining reasonable assurance about whether Boley Centers, Inc. and affiliates' financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Boley Centers, Inc. and affiliates' Response to Findings

Boley Centers, Inc. and affiliates' response to the findings identified in our audit is described in the accompanying schedule of findings and questioned costs. Boley Centers, Inc. and affiliates' response was not subject to the auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on it.

Purpose of Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.



Prida, Guida & Perez, P.A.
Tampa, Florida
May 13, 2022

BOLEY CENTERS, INC. AND AFFILIATES
Schedule of Findings and Responses
Year Ended June 30, 2021

Finding No. 2021-001 - Financial Close Process

Material Weakness

Condition: While performing 2021 audit procedures, we noted that the Organization did not perform an effective close of the 2020 year end which also resulted in an ineffective close of the 2021 year end. We also noted that several accounts (including cash, investments, accounts receivable, prepaid expenses, fixed assets, liabilities, expense allocations, and intercompany accounts) were not reconciled during the year. The result was several adjustments to the financial statements. Several of the key closing activities that were not performed are as follows:

- Bank reconciliations for 4 accounts were not completed.
- Investment accounts were not reconciled to the general ledger. Activities within the investment accounts were not accounted for properly.
- Several accounts receivable accounts were misstated due to payments being misapplied, activity not being updated, and reconciliations not being performed.
- Prepaid expenses were not updated for current year activities.
- Fixed assets subsidiary ledger provided to support the account balances was not reconciled to the general ledger. Significant differences exist between the subsidiary ledger and the general ledger.
- Accrued vacation was not updated with current year activity.
- Intercompany accounts were not reconciled.
- Expense allocation accounts were not closed.
- Transactions between the foundations and Boley Centers were not accounted for properly.

The Organization did provide updated documentation upon request, but the lack of a formal review and close process led to material audit adjustments to the general ledger for the year ending June 30, 2021.

Criteria: Based on principles and guidance contained within the 2013 Internal Control – Integrated Framework as published by the Committee of Sponsoring Organizations of the Treadway Commission (“COSO”), management is responsible for the maintenance of internal controls over financial reporting with the objective that financial statements are accurate under generally accepted accounting principles.

Cause: The Organization does not have an internal control system designed to identify all necessary adjustments and provide for an effective review of year end amounts.

Effect: Unaudited financial statement amounts could be materially misstated. Audited financial statements could require material adjustments.

Auditor recommendation: It is recommended that the Organization establish procedures to ensure a formal closing process is completed monthly and that financial statements are prepared regularly (at least quarterly) and reviewed timely in order to identify potential misstatements. We recommend that the Organization review general ledger accounts to determine the balances are accurate; that schedules prepared support the general ledger balances; general ledger accounts be reviewed for completeness and accuracy; and that the Organization implement controls to require that any schedules that contain financial information be timely reviewed by a responsible official.

BOLEY CENTERS, INC. AND AFFILIATES
Schedule of Findings and Responses
Year Ended June 30, 2021

Finding No. 2021-001 - Financial Close Process (Continued)

Views of responsible officials: The Organization worked to fill the accounting positions that were missing for the majority of the audit year, specifically, the Organization hired two new CFO's that did not fit within the Organization. The Organization has recently filled the CFO position and is actively seeking to fill another open accounting position. Under this promising new leadership, Boley Centers will review its accounting processes to ensure adherence to formal financial statement closing procedures as well as ownership, review, and approval of financial schedules that ultimately support the financial statements and related footnotes. These processes will be performed internally prior to providing support for the annual audit.

These procedures include:

- Review of general ledger accounts to determine that balances are accurate
- Preparation of schedules that support general ledger balances
- Review of general ledger accounts for completeness and accuracy
- Timely review of financial information by responsible individual

Finding No. 2020-001 - Pre-audit Financial Close Process

Significant Deficiency

Finding summary: During the prior year audit the auditors noted that the Organization had experienced turnover and therefore did not perform a timely close of the 2020 year end, resulting in several adjustments to the financial statements. Additionally, schedules received to support the general ledger transactions or general ledger account balances were not accurate and required several versions. The Organization did provide updated documentation upon request, but the lack of a formal review and close process led to material audit adjustments, as well as other audit and client provided adjustments to the financial statements for the year ending June 30, 2020. Misstatements were noted in accounts receivable, depreciation, accumulated depreciation, property and equipment, construction in progress, accounts payable, debt, revenues, and expenses.

Based on principles and guidance published by COSO, management is responsible for the maintenance of internal controls over financial reporting with the objective that financial statements are accurate under generally accepted accounting principles. The Organization did not have an internal control system designed to identify all necessary adjustments.

BOLEY CENTERS, INC. AND AFFILIATES
Schedule of Findings and Responses
Year Ended June 30, 2021

Finding No. 2020-001 - Pre-audit Financial Close Process (Continued)

The auditors recommended:

- The Organization establish procedures to ensure a formal closing process is completed timely,
- The Organization review general ledger accounts to determine the balances are accurate,
- The Organization review audit schedules prepared to ensure they support the general ledger balances,
- The Organization review the general ledger accounts for completeness and accuracy,
- The Organization implement controls to require that any schedules that contain financial information must be timely reviewed by a responsible official.

Status: The Organization hired a CFO during the year that has begun to review the Organization's accounting processes. Due to timing, it was not possible to perform the pre-audit financial close process in its entirety for the year ended June 30, 2021. As a result, a similar material weakness was reported for the year ended June 30, 2021. See Finding No. 2021-0001.



May 13, 2022

Amy Mierzejewski, CPA
Prida, Guida & Perez, P.A.
1106 North Franklin St.
Tampa, FL 33602

Subject: Response to Section 2 Financial Statement Findings

Condition: During our audit, it was noted that we did not perform an effective close of the 2021 year end (partially due to the issues with the close of the 2020 year end). The result was several adjustments to the financial statements. Fixed assets and debt schedules provided to support the account balances were not accurate and required several revisions. We provided updated documentation upon request, but the lack of a formal review and close process led to material audit adjustments as well as other client-oriented and auditor-proposed adjustments to the general ledger for the year ending June 30, 2021.

We have been working to fill our significant accounting leadership positions that were missing for the majority of the audit year, specifically, we hired two new CFOs that did not fit within the organization. We recently filled the CFO position and are actively seeking to fill our Director of Accounting position. Under this promising new leadership, we will review our accounting processes to ensure adherence to formal financial statement closing procedures as well as ownership, review, and approval of financial schedules that ultimately support the financial statements and related footnotes. These processes will be performed internally prior to providing support for the annual audit.

Our initial response and corrective action to the findings are:

Review of general ledger accounts to determine that balances are accurate by the accountants and followed up by the Director of Accounting.

Preparation of schedules that support general ledger balances by the Director of Accounting followed up by the CFO.

Review of general ledger accounts for completeness and accuracy by the Director of Accounting followed up by the CFO.

Timely review of financial information by the Director of Accounting followed up by the CFO.

Respectfully,

Kevin Marrone
Kevin Marrone, CEO
Boley Centers, Inc

445 31st St. N. St. Petersburg, Florida 33713
Telephone (727) 821-4819 • Fax (727) 822-6240
www.boleycenters.org



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/22/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Wallace Welch & Willingham, Inc. 300 1st Ave. So., 5th Floor Saint Petersburg FL 33701	CONTACT NAME: PHONE (A/C. No. Ext): 727-522-7777		FAX (A/C. No.): 727-521-2902
	E-MAIL ADDRESS: certificates@w3ins.com		
INSURER(S) AFFORDING COVERAGE			NAIC #
INSURED Boley Centers, Inc. 445 31st St. No. St. Petersburg FL 33713	BOLEYCE002		INSURER A : AmeriTrust Ins. Co.
			INSURER B : Technology Insurance Company, Inc.
			INSURER C : Star Insurance Company
			INSURER D : Philadelphia Indemnity Ins Co
			INSURER E :
		INSURER F :	

COVERAGES

CERTIFICATE NUMBER: 735675725

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			FITGL336582022	6/1/2022	6/1/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			FITAU336582022	6/1/2022	6/1/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			FITXS336582022	6/1/2022	6/1/2023	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000 \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	FITWC336582022	6/1/2022	6/1/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 2,000,000 E.L. DISEASE - EA EMPLOYEE \$ 2,000,000 E.L. DISEASE - POLICY LIMIT \$ 2,000,000
D B	D&O/EPLI Cyber Liability			PHSD1718506 TCL1726317	6/1/2022 6/1/2022	6/1/2023 6/1/2023	Limit/\$10,000 Ded \$1,000,000 Limit/\$5,000 Ded \$1000000/\$1000000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

**Florida Insurance Trust/AmeriTrust Insurance Company Policy FITGL336582022 Additional Coverage:
 Professional Liability (Occurrence): \$1,000,000 Each Claim/ \$3,000,000 General Aggregate/ No Deductible
 Abuse & Molestation (Occurrence): \$1,000,000 Each Claim/ \$3,000,000 General Aggregate/ No Deductible
 Employee Benefits Liability (Claims-Made/Retro Date 6/1/2014): \$1,000,000 Each Claim/ \$1,000,000 General Aggregate

*Excess Liability is over the General Liability and Automobile only/No Deductible

CERTIFICATE HOLDER**CANCELLATION**

For Information Purposes Only

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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