

# Application Form

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## *Organization Information*

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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\***

Ronald McDonald House Charities of Tampa Bay, Inc.

### **Proposal Name\***

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

IT Infrastructure & Wi-Fi Connectivity Upgrades

### **EIN\***

59-1835985

### **Incorporation Year\***

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

1979

### **Organizational Mission Statement\***

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

The mission of Ronald McDonald House Charities of Tampa Bay (RMHCTB) is to create, find and support programs that directly improve the health and well-being of children.

### **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

XTPLMKWJABY5

### Annual Operating Budget Size\*

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

\$4,154,680.98

### Amount Requested\*

The maximum grant amount is \$199,999.

\$20,235.00

### 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*

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### 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?

Ronald McDonald House Charities (RMHC) of Tampa Bay serves children and families as they seek medical treatment, which lessens the financial burden of finding funding for housing during a vulnerable and potentially traumatic time in their lives. Since opening our St. Pete house doors in 1980 as the first Ronald McDonald House in the State of Florida, we have grown from one to four Houses (3 in St. Petersburg and 1 in Tampa) and have supported over 50,000 families. Our houses provide a total of 80 bedrooms per night (66 bedrooms of 80 are in Pinellas) to families receiving treatment at Johns Hopkins All Children's, Tampa General, St. Joseph's Children's and other local pediatric care centers.

We support the family holistically. Particularly, we provide housing, meals, mental health and wellness support to provide a home away from home experience for families. All of these services are offered at no cost to families, and they stay for free, for as long as needed.

Many families have children that do not have a timetable to be discharged which leads to stress and poor eating habits. This ties into our ability to provide wellness for parents and siblings and give them a safe space to call a home away from home. We provide hot meals on site. We also provide mental health services through a partnership with Better Help to connect our parents with licensed therapists. Our families also stay with us for a variety of treatments which includes inpatients and outpatients. In 2021 the average stay for families in Pinellas County RMHC houses was 37 nights. Thus, we support families with diverse medical needs, and for varying lengths of time.

## 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.

When a parent finds out the child may have an issue, parents go to great constraint to get them the best treatment. Even during a pandemic, childhood illnesses occur, babies are born early, and families try to navigate through the toughest days of their lives. Family members never think about where they will stay, how they will eat, or how long this may take. We serve children from 0 to 21 years old. These children come to us for a variety of conditions which include everything from premature births to specialty treatments. Unfortunately, the cost of medical care can vary per stay in addition to the cost of food and the length of the parents' stay.

RMHC takes the burden off these families by providing a safe place no matter the length of time and does it at no cost. The individuals that stay with us are parents, grandparents, extended family, adoptive parents, and guardians. More importantly, they are the lifeline to their child. In 2021 we served 1,677 parents and children in our Pinellas County RMHC houses. Considering RMHC houses and services are valued at \$100 a night, families who stay an average of 37 nights save \$3,700, which is almost \$2,000 more than one month's salary for individuals making minimum wages.

Additionally, we have a portion of our families that stay with us multiple times. At RMHC Tampa Bay 45% of our families returned during the course of the year to stay with us because these issues are so critical. RMHC promotes an inclusive and equitable space that caters to diverse needs and where families are supported by each other. The families that stay in the houses come from 45 counties in Florida. Hence, we support families from Pinellas County as well as others around the state thereby fostering equitable outcomes for individuals seeking healthcare services.

## 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.**

RMHC Tampa Bay Covid Impact Report- ARPA Grant.pdf

Covid-19 and the aftermath created a negative financial impact for RMHC Tampa Bay. While our organization did an excellent job at managing the budget, it comes at an expense to the organization that is now realized in addition to new economic factors.

RMHC paused all capital improvement projects to conserve resources. This includes pausing any general maintenance and repair to these properties. Deferred maintenance is costly because the problems get worse over time if not handled. In 2020 we budgeted \$300,480 and only 1 capital project (\$23,990) was completed due to the uncertainty of COVID. In 2021 we budgeted \$77,500 but we did not complete any projects in our Pinellas County homes. During 2020 and 2021 our maintenance and repair budget was under budget by \$64,359. Although we had intended these funds for these projects, we had to reallocate the funds to cover operational costs in order to provide optimal service to our community.

Resources that were slated for capital improvement were redirected to purchasing Covid tests, masks, sanitizing stations and other safety supplies, as well as, to serve our constituents differently to meet the extra demand for food across a broader population.

Due to our community living environment, social distancing, and other safety requirements, 1,530 parents and children had to stay at hotels at our expense costing \$96,520 in 2020, \$172,145 in 2021, and \$42,793 in 2022. All of our food had to be purchased as opposed to previously having community groups donate and cook causing \$240,586 in expenses since 2020.

As an offset of these expenses, we also allowed for natural attrition of jobs. New employees have inherited challenges such as long-overdue technological upgrades. Our technology has not been updated in about a decade. Rehiring employees has also been challenging and levels of living wages have increased significantly due to wage laws and cost of living increases, which we have applied to existing and new staff members, increasing our annual budget.

Given that RMHC caters to a diverse audience, accessibility is critical to ensure individuals can navigate the various floors of the home. Thus, having capital assets to fund and maintain a functional elevator is essential to promote an inclusive and equitable environment.

## 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?

The world has vastly changed throughout the pandemic, and we have discovered that our current IT infrastructure has aged into obsolescence. Large parts of our IT infrastructure were last upgraded in the 2010s and new demands from remote work and virtual learning have pushed our network to the brink. Families with newfound possibilities for remote work are now allowing both parents to be present for their child's care, but our network cannot support this robust demand for internet connectivity. RMHC plans to purchase access points and POE switches to upgrade our existing IT infrastructure to improve wi-fi connectivity throughout our St. Pete Houses at East and West. The estimated lifespan of an access point device is 3-5 years. This will help mitigate the costs in upgrading these projects where the pandemic brought a new sense of urgency and the rising inflationary costs and supply issues for IT equipment.

## 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?**

Our need for a technology upgrade is critical to equity. Some of our parents try to work remotely, thereby ensuring they have a continued source of income. Siblings try to attend virtual school to ensure they maintain academic proficiency and performance at or above grade level. When our houses are at capacity, we have difficulty meeting technological needs. Furthermore, we have a need to ensure the security features of the technology and that it can withstand data breaches. This inclusive project will support digital equity, an individual's ability to function in a technological era.

cater to individuals with diverse religious, ethnic, racial, cultural, linguistic, and socio-economic backgrounds. The family structures are also diverse and include traditional nuclear families, extended families, multi-generational, single parent, stepfamilies, same-sex and adoptive families. We also have age differences from newborns to the elderly.

Additionally, 57% of families are Caucasian, 20% are Latino/a, 11% are African American and 12% identifies as other. Our services combat healthcare inequities by increasing the support offered to families seeking medical care for their children.

In 2021, 45% of our families utilized our services multiple times, which includes follow up treatments and procedures. We are the only nonprofit that provides these services in the area. Our facilities are the closest living facilities to our hospital partners. We value our services at \$100 per night which if using the average stay of 37 nights, equals \$3,700. This is 90% of the monthly household income for an average family in Pinellas County.

Most families (78%) indicated that staying at RMHC greatly reduced their stress. While all families (100%) rated their overall experience at RMHC optimally. At RMHC, we embrace diversity and promote equity to create an equitable and inclusive environment for all.

## Number Served\*

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

885

## 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.

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](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/>  
35 Davis Blvd. Tampa, FL 33606

### 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).

The activities will take place within our 2 properties in Pinellas County that are next to Johns Hopkins All Children's Hospital. 401 7th Ave S. St. Petersburg, FL 33701 and 702 8th Avenue S. St. Petersburg, FL 33701.

## QCT Determination - Purchase\*

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

No

## Community Connection

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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.

RMHC Tampa Bay started in St. Petersburg because the All Children's Hospital president Dennis J. Sexton knew that he needed to find a community provider to care for families that were staying longer and could not afford the costs of hotels nearby. Johns Hopkins All Children's and medical partners such as Lampert Therapy Group are critical to our success and vice versa. Without RMHC Tampa Bay these children would not get the best treatment to improve their quality of life.

We have also built a program relationship with Feeding Tampa Bay. In 2021, 4231 pounds of food were donated from Fresh Market. From January until August 26, 2022, 3,094 pounds have been donated thus far. Feeding America is another source of food for RMHCTB families. Through our Feeding America partnership, we receive Starbucks donations as well.



We also have other wellness partners such as the local sports organizations (Lightning, Rays, Rowdies, Buccaneers), Museums (Museum of Fine Arts, Imagine Museum, The James, Children's Museum Great Explorations), Attractions (Clearwater and Florida Aquariums, Sunken Gardens), Pinellas County Urban League and Junior League of St. Petersburg

The wellness partners provide value to the experiences our families have during their stay at RMHC Tampa Bay. Their impact is to support a family's well-being through activities or working with us onsite for meals and needed house chores.

Through these various partnerships, we are able to meet the holistic needs of the family which include staying with us during medical treatment, receiving food, and attending activities.

### 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

### 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."

None of the above

## *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.

RMHC Tampa Bay Technology 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.

We contacted 3 companies to receive bids. This includes Clark Electric, Spectrum Enterprise, and Big Sur. Clark Electric did not respond and Spectrum Enterprise offered a lease program arrangement that was not cost-effective. Big Sur is our current IT partner. They are familiar with our network and the technology challenges we are facing. Big Sur has already conducted the heat mapping project and the assessment of technology upgrades.

### 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, we do not have any related parties involved.

## 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.

Ronald McDonald House- Budget-Template-Small-Capital-Purchases.xlsx

RMHC proposes the purchase and installation of components that enable a functioning and secure network that provides robust wi-fi connectivity and speeds for guest families and staff. The main components include:

- SonicWall, a device that filters traffic to enhance cybersecurity and appropriate guest internet use.
- Ruckus Access Points (APs), devices that send wireless signals that enable guests to connect to the Wi-Fi network by connecting to a wired router and projecting a signal.
- POE Switches, devices that connect all components of a network while enabling data transfer. These switches are also critical to the functioning of our key fob system enabling safety, security, and access to guest rooms/building. Managed devices also allow our IT company Big Sur to troubleshoot issues remotely for faster service and improved business continuity.
- Wiring and device installation (APs are mounted to the ceiling in strategic locations as indicated by a completed heat-mapping project).

## 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.**

While this has been a critical project, we have not requested funds from donors for this purpose. Our priority has been to raise revenue for operational expenses. Our operational costs have continued to increase throughout COVID. Our first and foremost priority is to raise funds so that our services remain free.

## 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 project will decrease ongoing operating costs because it will create an efficient and robust wireless network that will not require the constant maintenance and troubleshooting that our current failing network is causing. Constant service calls to our IT company are billed for time and materials. Families are not satisfied with the current service and staff often spend time trying to assist families in connecting, resetting routers, etc. Our failing network also poses a risk to business continuity among staff. As we try to embrace technology to streamline our processes and move from a paper-based process, we need a network that can support this. An example is using paperless registration forms on a tablet as opposed to printing and having staff put together registration packets. It will also allow us to fulfill our mission by keeping families close – whether this means that a parent can be present for care by working remotely, or a sibling attending virtual school.

## Organization Documentation

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**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.

2022 Condensed Budget for Grants.xlsx

### Board of Directors List\*

Please upload your Board of Directors list.

Excel, Word, and PDF file formats are accepted.

2022 Board List.xlsx

### 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.

Ronald McDonald House Charities of Tampa 2021 Form 990 PDC.pdf  
You will find our most recent 990 forms attached.

### **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.

2021 Audited Financials.pdf  
You will find the 2021 audited financials attached.

## ***Insurance Requirements***

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### **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.**

2022 -2023 RMHC Tampa Bay Property Insurance Summary.pdf  
We are insured through Besnard & Associates. They have been a long-time partner of RMHC Tampa Bay.

### **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*

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### **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](mailto:rcervantes@pinellascf.org).

Yes, I agree to submit this grant agreement and impact report within the specified timeframes.

## *Additional Information*

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### **Budget Summary**

**NO LONGER USED, REPLACED IN APP WITH UPLOAD FIELD INCLUDED**

**Please use THIS TEMPLATE to indicate costs and any cash match your organization may have for the proposed purchases.**

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.

### **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

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### *Applicant File Uploads*

- RMHC Tampa Bay Covid Impact Report- ARPA Grant.pdf
- RMHC Tampa Bay Technology Bids.pdf
- Ronald McDonald House- Budget-Template-Small-Capital-Purchases.xlsx
- 2022 Condensed Budget for Grants.xlsx
- 2022 Board List.xlsx
- Ronald McDonald House Charities of Tampa 2021 Form 990 PDC.pdf
- 2021 Audited Financials.pdf
- 2022 -2023 RMHC Tampa Bay Property Insurance Summary.pdf



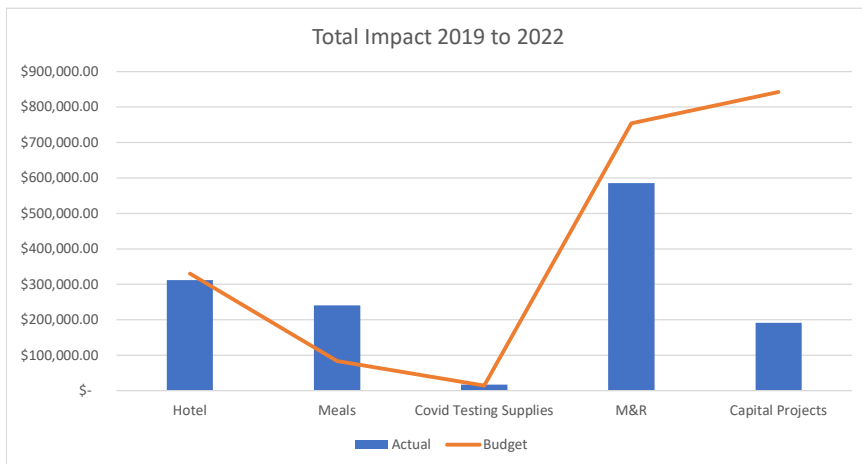
RMHC Tampa Bay COVID Impact							
ACTUAL	2019	2020	%Change	2021	%Change	(AS OF 9.7.22)	%Change
Hotel	\$ -	\$ 96,520.31	96520%	\$ 172,145.94	78%	\$ 42,793.98	-75%
Meals	\$ -	\$ 78,811.04	78811%	\$ 95,540.11	21%	\$ 66,234.96	-31%
Covid Testing Supplies	\$ -	\$ -	0%	\$ 3,063.09	3063%	\$ 14,004.47	357%
M&R	\$ 177,040.75	\$ 123,689.66	-30%	\$ 106,950.70	-14%	\$ 178,181.26	67%
Capital Projects	\$ 16,920.00	\$ 23,990.00	42%	\$ 67,197.00	180%	\$ 82,980.45	23%
BUDGET							
	2019	2020		2021		2022	%Change
Hotel	\$ -	\$ -	0%	\$ 240,000.00	240000%	\$ 90,000.00	-63%
Meals	\$ -	\$ -	0%	\$ 42,000.00	42000%	\$ 42,000.00	0%
Covid Testing Supplies	\$ -	\$ -	0%	\$ 6,250.00	6250%	\$ 8,000.00	28%
M&R	\$ 185,300.00	\$ 150,000.00	-19%	\$ 145,000.00	-3%	\$ 274,000.00	89%
Capital Projects	\$ 300,480.00	\$ 300,480.00	0%	\$ 77,500.00	-74%	\$ 164,000.00	112%
IMPACT							
	2019	2020	%Change	2021	%Change	2022	%Change
Hotel Impact	\$ -	\$ 96,520.31	96520%	\$ (67,854.06)	-170%	\$ (47,206.02)	-30%
Meals Impact	\$ -	\$ 78,811.04	78811%	\$ 53,540.11	-32%	\$ 24,234.96	-55%
Covid Testing supplies	\$ -	\$ -	0%	\$ (3,186.91)	-3187%	\$ 6,004.47	-288%
M&R Impact	\$ (8,259.25)	\$ (26,310.34)	219%	\$ (38,049.30)	45%	\$ (95,818.74)	152%
Capital Projects Impact	\$ (283,560.00)	\$ (276,490.00)	-2%	\$ (10,303.00)	-96%	\$ (81,019.55)	686%



2019 Capital Budget carried over to 2020 and then halted due to Covid. Budget decreased to account for emergency repairs only so funds could be allocated to program expenses to cover family needs for stays, meals, and supplies.

2022 Actual to Budget reflects projects not yet completed and the result shows \$81,019.55 under the budget year to date. 2021 we were over \$10,000 under budget. With upcoming capital projects needed, we anticipate the overall percentage change to drastically decrease and result in a negative change which will indicate increased capital project expenditures.

	Actual	Budget
Hotel	\$ 311,460.23	\$ 330,000.00
Meals	\$ 240,586.11	\$ 84,000.00
Covid Testing Supplies	\$ 17,067.56	\$ 14,250.00
M&R	\$ 585,862.37	\$ 754,300.00
Capital Projects	\$ 191,087.45	\$ 842,460.00



# BID #1-Devices & Installation



We have prepared a quote for you

**ST Pete East Building:: 48Port Switch**

Quote # AF001396  
Version 1

Prepared for:

**Ronald McDonald House Charities of Tampa**

Christopher Lauth  
clauth@rmhctampabay.org

## Hardware

Description	Price	Qty	Ext. Price
<b>HP48 Port Managed POE Switch with Lifetime warranty (secondary market)</b>	\$1,500.00	1	\$1,500.00
<b>Ruckus Wireless Unleashed R610 IEEE 802.11ac 1.86 Gbit/s Wireless Access Point - 2.40 GHz, 5 GHz - MIMO Technology - 2 x Network (RJ-45) - Wall Mountable (secondary market)</b>	\$595.00	10	\$5,950.00
Ruckus ZoneFlex R610 - Unleashed - wireless access point - 802.11ac Wave 2 - Wi-Fi - Dual Band			
<b>Subtotal:</b>			<b>\$7,450.00</b>

## Services

Description	Price	Qty	Ext. Price
<b>Project :: Big Sur Consulting Project :: Switch Consolidation</b>	\$700.00	1	\$700.00
Project :: Big Sur Consulting Project			
<b>Project :: Big Sur Consulting Project :: Deploy Access Points</b>	\$1,750.00	1	\$1,750.00
Project :: Big Sur Consulting Project			
<b>Subtotal:</b>			<b>\$2,450.00</b>

## ST Pete East Building:: 48Port Switch



**Prepared by:**

**Big Sur Technologies**  
Amy Fabian  
813-269-9145  
Fax 813-849-1066  
amy@bigsurtech.com

**Prepared for:**

**Ronald McDonald House Charities of Tampa**  
35 Davis Blvd  
Tampa, FL 33606  
Christopher Lauth  
(727) 767-7683  
clauth@rmhctampabay.org

**Quote Information:**

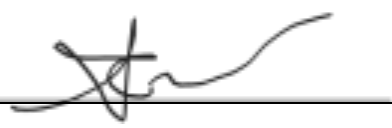
**Quote #: AF001396**  
Version: 1  
Delivery Date: 09/07/2022  
Expiration Date: 09/09/2022

### Quote Summary

Description	Amount
Hardware	\$7,450.00
Services	\$2,450.00
<b>Subtotal:</b>	<b>\$9,900.00</b>
<b>Shipping:</b>	<b>\$17.00</b>
<b>Total:</b>	<b>\$9,917.00</b>

Taxes, shipping, handling and other fees may apply. We reserve the right to cancel orders arising from pricing or other errors.

### Big Sur Technologies

Signature:   
Name: Amy Fabian  
Title: \_\_\_\_\_  
Date: 09/07/2022

### Ronald McDonald House Charities of Tampa

Signature: \_\_\_\_\_  
Name: Christopher Lauth  
Date: \_\_\_\_\_

## Global Terms & Conditions

**Prices.** Price of one-time engineering services are subject to change. Price for recurring services are subject to change. Price of hardware/software materials are subject to change. Customer must pay full price of quote to receive quoted services or hardware.

**Taxes.** Customer is expected to pay all taxes in accordance with local, state, and federal mandate. Tax Exemption Certificate must be provided to Big Sur Technologies prior to purchase. If any services or hardware is returned to Big Sur Technologies, applicable taxes may not be refunded.

**Late Payment Charges.** In addition to other remedies available to Big Sur, should Customer fail to pay any amount when due, Customer shall pay interest at the rate of 18% from the due date until fully paid.

**Returns.** No returns will be accepted without written agreements between Big Sur Technologies and Customer. Returns may be subject to a 15% restocking fee. Open product returns will not be accepted.

**Billing Discrepancies.** Big Sur Technologies will make best effort to accurately bill customer. Customer must submit a written dispute of any price discrepancies within thirty (30) days of the invoice date. If the customer fails to provide a written statement disputing the charges and setting forth specific reasons and supporting documentation of same within such time, Customer accepts all charges within and waives and all objections and further recourse with regard to such charges. Written Statements disputing charges must be sent to: Billing Department, Big Sur Technologies, 4631 Woodland Corporate Blvd #110, Tampa, FL 33614.

**Payment Terms.** (a) Payments shall be made in accordance with the schedule outlined in the Project Costs and Payments section. (b) If Customer cancels this Agreement before completion of Installation, Customer shall pay (1) the Big Sur's materials and labor costs for installation preparation, and (2) any loss of value of the equipment or an equipment restocking charge, subject to a minimum of 15% of the contract value, whichever is greater. Big Sur shall apply any payment received from Customer to payment of these costs and charges and shall refund any unapplied balance to Customer. Accordingly, where a deficiency results, Customer will pay such deficiency within thirty days of receipt of Big Sur's billing.

**Delayed Performance.** Big Sur will not be liable to Customer if Big Sur Technologies is unable to furnish the service described in this Agreement because Big Sur's efforts are impeded by causes beyond Big Sur's commercially reasonable control.

**Limitation of Liability.** Under no circumstances will Big Sur Technologies be liable for special or consequential or incidental damages in connection with performance, delayed performance or non-performance of this Agreement or any element thereof. Nor shall Big Sur be liable for loss of data or other loss or utility charges arising from designing, installation, or repair of the System. In any event, Big Sur's total aggregate liability to Customer for all damages of every kind and type (regardless of whether based in contract or tort) shall not exceed the purchase price for the System or the amount of the most recent invoice, whichever is less.

**No Warranties.** The software, hardware, and services provided by Big Sur under this Agreement are being provided "as is" without warranty of any kind, either express or implied, including without limitation any implied warranties of condition, uninterrupted use, merchantability, fitness for a particular purpose, or non-infringement.

**Assignment.** Customer may assign this Agreement upon Big Sur's written consent, which consent shall be given or withheld at the sole discretion of Big Sur. Big Sur may assign this Agreement or subcontract its performance on notice to Customer.

**Indemnification.** (a) Customer will indemnify and defend Big Sur from and against claims arising out of alleged infringement of any United States patent or copyright due to the installation of hardware or software provided by Customer. (b) Customer will indemnify and hold Big Sur harmless from liabilities, claims, or demands from persons not a party to this Agreement and all costs and expenses in connection therewith, arising out of any personal injury or death or any damage to such third party arising out of the Customer's use of the products or services provided by Big Sur.

**Completion.** Installation shall be deemed complete when the System is in operating condition as signified by Big Sur's Certificate of Acceptance/Completion. Minor omissions not materially affecting system functionality shall be noted on Big Sur's Certificate of Acceptance/Completion and shall be promptly remedied by Big Sur Technologies but shall not postpone completion and payment.

**Default.** If Customer does not remit payments when due, or otherwise materially breaches a provision of this Agreement, Customer shall be in default. If Customer's default continues after written notice from Big Sur, all sums unpaid shall become immediately due and payable and Big Sur shall have the right to withhold further performance until fully paid. In addition, Big Sur shall have all rights and remedies provided under the applicable Uniform Commercial Code and any applicable state or federal law. Big Sur's remedies shall be cumulative, and Customer shall reimburse Big Sur for all costs, including reasonable attorney's fees, incurred in enforcing this Agreement against Customer.

**Governing Law.** This Agreement shall be governed by and construed according to the laws of the state of Florida.

**Choice of Venue.** Any action arising out of this Agreement shall be brought in a court of competent jurisdiction in Hillsborough County, Florida, and such court(s) shall have exclusive jurisdiction over any such action. Customer specifically waives any right to challenge venue in Pinellas County, Florida, including but not limited to personal jurisdiction and forum non convenience.

**Entire Agreement.** This Agreement, and all attachments designated on the face of this Agreement as included, shall constitute the entire Agreement of the parties and shall supersede all prior negotiations, proposals, and representations whether written or oral. Field sales personnel of Big Sur are not authorized to modify or alter the terms of this Agreement by written or oral representation. Any alteration or modification of this Agreement must be in writing signed by both parties.

**Severability.** The invalidity or unenforceability of any provisions of this Agreement shall not affect the validity or enforceability of any other provision of this Agreement, which shall remain in full force and effect.

## Global Terms & Conditions

**No Third-Party Beneficiaries.** The parties specifically disclaim any intent to benefit any third party by entering into this Agreement.

**Headings.** The section headings contained in this Agreement are for reference purposes only and shall not affect in any way the meaning or interpretation of this Agreement.

**Passwords.** Big Sur acknowledges that it must have access to any and all systems and resources to perform their duties under this agreement. As such, it must have access to any and all passwords.

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**Consultant No-Hire.** Customer agrees that former Big Sur employees or contractors shall not be allowed to work indirectly or directly for Customer until a period of six months after termination of this contract. Without limiting the generality of the foregoing, it shall include, but not be limited to, employment by Customer, employment by another party who contracts with Customer, contracting, sub-contracting, agency, partnership, or any other association - where Customer or the party is contracting the individual to Customer in an IT role similar to the role previously contracted through Big Sur. Should Customer breach this covenant (which covenant shall survive the termination of the Contract), Customer shall pay to Big Sur as liquidated damages and not a penalty, an amount equal to 30% of the engineer's annual compensation package to Big Sur Technologies within 15 days of the employee leaving Big Sur Technologies. Additionally, it is agreed that Big Sur may enforce this covenant by an injunction or otherwise.

**No Waiver.** The Failure of Big Sur Technologies to enforce any right of provision of the Agreement shall not constitute a waiver of such right or provision.



We have prepared a quote for you

**ST Pete West Building**


Quote # AF001409  
Version 1

Prepared for:

**Ronald McDonald House Charities of Tampa**

Christopher Lauth  
clauth@rmhctampabay.org

Hardware

Description	Recurring	Price	Qty	Ext. Recurring	Ext. Price
<b>Ruckus Wireless Unleashed R610 IEEE 802.11ac 1.86 Gbit/s Wireless Access Point - 2.40 GHz, 5 GHz - MIMO Technology - 2 x Network (RJ-45) - Wall Mountable (secondary market)</b>  Ruckus ZoneFlex R610 - Unleashed - wireless access point - 802.11ac Wave 2 - Wi-Fi - Dual Band	\$0.00	\$595.00	10	\$0.00	\$5,950.00
<b>HP 24 Port Managed POE Switch with Lifetime warranty (secondary market)</b>	\$0.00	\$800.00	1	\$0.00	\$800.00
<b>SonicWall TZ270 FWaaS (part of original agreement)</b> Firewall as a Service (SonicWall TZ270)	\$85.00	\$0.00	1	\$85.00	\$0.00

None Subtotal: **\$85.00**

Subtotal: **\$6,750.00**

Services

Description	Price	Qty	Ext. Price
<b>Project :: Big Sur Consulting Project :: Deploy Equipment</b> Project :: Big Sur Consulting Project	\$3,500.00	1	\$3,500.00

Subtotal: **\$3,500.00**



## ST Pete West Building



**Prepared by:**

**Big Sur Technologies**  
Amy Fabian  
813-269-9145  
Fax 813-849-1066  
amy@bigsurtech.com

**Prepared for:**

**Ronald McDonald House Charities of Tampa**  
35 Davis Blvd  
Tampa, FL 33606  
Christopher Lauth  
(727) 767-7683  
clauth@rmhctampabay.org

**Quote Information:**

**Quote #: AF001409**  
Version: 1  
Delivery Date: 09/07/2022  
Expiration Date: 10/05/2022

### Quote Summary


Description	Amount
Hardware	\$6,750.00
Services	\$3,500.00
<b>Subtotal:</b>	<b>\$10,250.00</b>
<b>Shipping:</b>	<b>\$24.99</b>
<b>Total:</b>	<b>\$10,274.99</b>

### None Expenses Summary

Description	Amount
Hardware	\$85.00
<b>None Total:</b>	<b>\$85.00</b>

Taxes, shipping, handling and other fees may apply. We reserve the right to cancel orders arising from pricing or other errors.

### Big Sur Technologies

Signature:   
Name: Amy Fabian  
Title: \_\_\_\_\_  
Date: 09/07/2022

### Ronald McDonald House Charities of Tampa

Signature: \_\_\_\_\_  
Name: Christopher Lauth  
Date: \_\_\_\_\_

## Global Terms & Conditions

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# BID #2- Devices

## Devices – quoted on Amazon - RMHCTB



Ruckus Zoneflex R610 Wave 2 Access Point (Smart Wi-Fi 3x3, 802.11ac, BeamFlex, Adaptive Antenna, POE) 901-R610-US00

Brand: Ruckus

★★★★★ 13 ratings | 8 answered questions

Price: **\$899.99**

Not eligible for Amazon Prime. Available with free Prime shipping from other sellers on Amazon.

Brand	Ruckus
Frequency Band Class	Dual-Band
Wireless Communication Standard	801.11ac
Connectivity Technology	Wireless

### About this item

- HIGH PERFORMANCE, 802.11AC WAVE 2 MID-RANGE SMART WI-FI ACCESS POINTS WITH ADAPTIVE ANTENNA TECHNOLOGYThe Ruckus ZoneFlex R610 delivers high-performance and reliable 802.11ac wirele



HP JL357A 2540 48G PoE+ 4SFP+, Switch, 48 Ports, Managed, Rack-mountable

Visit the HP Store

★★★★★ 2 ratings

Price: **\$3,177.00**

Brand	HP
Number of Ports	48
Included Components	Accessories, Switch
Switch Type	Bipolar Transistor
Item Dimensions LxWxH	12 x 2 x 17 inches

### About this item

- Manufacturer- HP
- HP Part Number- JL357A
- Product Type- Network Switches



SonicWall TZ270 Network Security Appliance (02-SSC-2821)

Visit the SonicWall Store

★★★★★ 42 ratings | 16 answered questions

Price: ~~\$383.28~~  
Business Price ~ **\$355.32**  
You Save: \$27.96 (7%)

Not eligible for Amazon Prime. Available with free Prime shipping from other sellers on Amazon.

Brand	Sonicwall
Connectivity Technology	USB, Ethernet
Item Weight	0.82 Kilograms
Number of Ports	10
Control Method	App
Data Transfer Rate	1 Gigabits Per Second
Item Dimensions LxWxH	5.31 x 7.48 x 1.38 inches



<i>2022 Grants Budget</i>	
<b>INCOME</b>	<b>TOTALS</b>
Donations (Invdividuals & Corporations)	\$1,007,000
McDonald's Fundraisers	\$1,026,000
RMHCTB Fundraisers	\$775,000
Community Fundraisers	\$162,000
Grants - Restricted	\$150,000
RMHC Global Fundraisers	\$11,200
Adopt a Room	\$95,000
Wills & Trusts	\$400,000
Miscellaneous Income	\$30,000
Interest Income	\$400,000
<b>Total Income</b>	<b>\$4,056,200</b>
<b>EXPENSES</b>	<b>TOTALS</b>
Salaries	\$1,911,824
Payroll Tax Expense	\$149,106
Health Insurance	\$325,000
Workers Comp Insurance	\$9,290
Employee 401K	\$48,000
Employee Reimbursement	\$12,000
Utilities	\$162,091
House Supplies, Repairs & Services	\$373,023
Office Supplies & Expenses	\$123,000
Covid Hotel Expense	\$90,000
Covid Meals	\$42,000
Covid Testing & Supplies	\$8,000
Postage	\$10,000
Dues & Subscriptions	\$6,500
Advertising & Promotion	\$34,500
Cost of Items Sold	\$5,000
Fund Raising Expense	\$476,040
McDonald's Fundraisers Expenses	\$80,000
Red Shoe Council Expense	\$1,000
Volunteer Program	\$5,000
Meeting & Travel	\$36,000
House Insurance	\$55,000
Legal & Accounting	\$36,500
All Taxes & Licenses	\$1,000
Bank & Credit Card Fees	\$32,000
Capital Improvement Expense*	\$122,807
<b>Total Expenses</b>	<b>\$4,154,681</b>

\*Our budget reflects funds to catch up on capital improvement projects to maintain our assets.

## 2022 RMHC Board of Trustees Roster

NAME	COMPANY	POSITION	
Bean, Wes	PRESIDENT	Catalina Marketing	SVP Global Network Development
Laravie, Janel	VICE PRESIDENT	Chacka Marketing	Founder & CEO
Iwanicki, John	TREASURER	Protective Life Insurance	VP Government Affairs
Lynch, Ruth	SECRETARY		
O'Reilly, Kerry	PAST PRESIDENT	Tampa Bay Times	Marketing Director
Ameen, Edward	CHAIRMAN EMERITUS		
Barber, Pam		MOR /Hearst Television	President & General Manager
Barbaro, Mike		iHeart Media Markets Group	VP of Sales
Blankenship, Eric		Mind Stone Marketing	Owner/Marketing Executive
Boyle, Laetitia		Raymond James	SVP, Head of Sales, Education & Engagment
Casper, Blake		Caspers Company	CEO/McDonald's Owner/Operator
Catoe, Lauren		AECOM Hunt	Assistant General Council
Ford, Brian		Tampa Bay Buccaneers	COO
Frost, Chris		Frost Management	McDonald's Owner/Operator
Garner, Krista		PDR CPAs + Advisors	Audit Manager
Hames, Josh		Brown & Brown Insurance	Vice President
Hampton, Caycee		Carlton Fields	Associate
Hypes, Warren		Tampa Bay Rays	Creative Director
Larsen, Eric		Allianz Global Investors	VP External Investment Consultant
Leone, Dennis		Shankman Leone	Partner
Macogay, Melissa		Johns Hopkins All Childrens Hospital	Vice President & Chief Nursing Officer
Medefind, James		Marchus & Millichap   Medefind Retail Team	First VP Investments; Senior Dir Nat Retail Group
Pelleymounter, Travis		Tampa Bay Lightning	Vice President, Tickets Sales & Service
Ramsay, Marsha MD		Virginia Pediatrics, BayCare Medical Group	Pediatrician
Sears, Dr. Ruthmae		University of South Florida	Associate Professor in Mathematics Education
Sportsman, Tricia		Integrated Supply Network	VP, People & Culture
Tarlton, Daron	AUDIT CO-CHAIR	Dixon Hughes Goodman LLP	Partner
Vivas, Rudy		H&L Partners	Account Director
Vukmer, Sheila			
VanCuyk, Jamie	ADVISORY COUNCIL CHAIR, non-voting	Growing Your Team	Owner, Small Business Consultant
Suprenand, Lisa	CEO, non-voting	RMHC Tampa Bay	CEO

Total Board Members	29
Total Responses Recorded	29
<b>Age</b>	
18-24	0
25-34	2
35-44	9
45-54	10
55-64	4
Over 65	1
<b>Gender</b>	
Male	17
Female	12
<b>Race/Ethnicity</b>	
African American/Black	2
Asian/Pacific Islander	0
Caucasian/White	25
Latino/ Latin American/Hispanic	2
Native American/Indian	0



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

**2021**

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](http://www.irs.gov/Form990) for instructions and the latest information.

Open to Public Inspection

**A** For the **2021** calendar year, or tax year beginning \_\_\_\_\_ and ending \_\_\_\_\_

<b>B</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	<b>C</b> Name of organization <b>RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.</b>	<b>D</b> Employer identification number <b>59-1835985</b>
	Doing business as	<b>E</b> Telephone number <b>813-258-6430</b>
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>35 DAVIS BLVD</b>	<b>G</b> Gross receipts \$ <b>6,656,636.</b>
	City or town, state or province, country, and ZIP or foreign postal code <b>TAMPA, FL 33606</b>	<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
<b>F</b> Name and address of principal officer: <b>KRISTA GARNER</b> <b>35 DAVIS BLVD, TAMPA, FL 33606</b>		<b>H(c)</b> Group exemption number ▶
<b>I</b> 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		
<b>J</b> Website: ▶ <b>WWW.RMHCTAMPABAY.ORG</b>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <b>1978</b> <b>M</b> State of legal domicile: <b>FL</b>

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <b>PROVIDES A HOME-AWAY-FROM-HOME FOR FAMILIES OF PEDIATRIC PATIENTS IN AREA HOSPITALS.</b>		
	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	27
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	27
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	48
	6 Total number of volunteers (estimate if necessary)	6	249
	7 a 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)	3,389,415.	4,046,465.
	9 Program service revenue (Part VIII, line 2g)	24,017.	27,259.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	485,468.	1,009,404.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	105,762.	89,853.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,004,662.	5,172,981.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,884,587.	1,904,553.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>274,451.</b>		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,274,921.	1,346,588.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,159,508.	3,251,141.
19 Revenue less expenses. Subtract line 18 from line 12	845,154.	1,921,840.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 18,277,622.	End of Year 20,980,935.
	21 Total liabilities (Part X, line 26)	211,513.	204,558.
	22 Net assets or fund balances. Subtract line 21 from line 20	18,066,109.	20,776,377.

**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.

<b>Sign Here</b>	▶ <i>Krista Garner</i> Signature of officer	Date <b>6/17/22</b>			
	▶ <b>KRISTA GARNER, TREASURER</b> Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>SAM A. LAZZARA</b>	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN <b>P01342929</b>
	Firm's name ▶ <b>RIVERO, GORDIMER &amp; COMPANY, P.A.</b>	Firm's EIN ▶ <b>59-3040705</b>		Phone no. (813) <b>875-7774</b>	
Firm's address ▶ <b>P. O. BOX 172359 TAMPA, FL 33672</b>					

RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.

Form 990 (2021)

59-1835985 Page 2

**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:  
RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY CREATES, FINDS, AND  
SUPPORTS PROGRAMS THAT DIRECTLY IMPROVE THE HEALTH AND WELL-BEING OF  
CHILDREN AND THEIR FAMILIES.

**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 \$ 2,610,705. including grants of \$ \_\_\_\_\_) (Revenue \$ 415,287.)  
RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY SERVES THE MOST VULNERABLE  
POPULATION OF CHILDREN RECEIVING MEDICAL TREATMENT AND THEIR FAMILIES.

SINCE OPENING OUR ST. PETE HOUSE DOORS IN 1980 AS THE FIRST RONALD  
MCDONALD HOUSE IN THE STATE OF FLORIDA, WE HAVE GROWN FROM ONE TO FOUR  
HOUSES IN THE TAMPA BAY AREA AND HAVE SUPPORTED OVER 50,000 FAMILIES.  
OUR HOUSES PROVIDE A TOTAL OF 80 BEDROOMS PER NIGHT TO FAMILIES  
RECEIVING TREATMENT AT JOHNS HOPKINS ALL CHILDREN'S, TAMPA GENERAL, AND  
ST. JOSEPH'S CHILDREN'S HOSPITALS, AND OTHER LOCAL PEDIATRIC CARE  
CENTERS. WE PROVIDE ACCOMMODATIONS, MEALS, AND SUPPORT AT OUR HOUSES AT  
NO COST TO THE FAMILIES.

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

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

**4d** Other program services (Describe on Schedule O.)  
(Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

**4e** Total program service expenses **2,610,705.**

Form 990 (2021)

RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> 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> .....	<b>1</b> X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions .....	<b>2</b> X	
<b>3</b> 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> .....	<b>3</b>	X
<b>4 Section 501(c)(3) organizations.</b> 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> .....	<b>4</b>	X
<b>5</b> 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 Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i> .....	<b>5</b>	X
<b>6</b> 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> .....	<b>6</b>	X
<b>7</b> 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> .....	<b>7</b>	X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....	<b>8</b>	X
<b>9</b> 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> .....	<b>9</b>	X
<b>10</b> 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> .....	<b>10</b> X	
<b>11</b> 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.		
<b>a</b> 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> .....	<b>11a</b> X	
<b>b</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> .....	<b>11b</b> X	
<b>c</b> 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> .....	<b>11c</b>	X
<b>d</b> 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> .....	<b>11d</b>	X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....	<b>11e</b>	X
<b>f</b> 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> .....	<b>11f</b> X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....	<b>12a</b> X	
<b>b</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> .....	<b>12b</b>	X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....	<b>13</b>	X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....	<b>14a</b>	X
<b>b</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> .....	<b>14b</b>	X
<b>15</b> 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> .....	<b>15</b>	X
<b>16</b> 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> .....	<b>16</b>	X
<b>17</b> 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 .....	<b>17</b>	X
<b>18</b> 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> .....	<b>18</b> X	
<b>19</b> 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> .....	<b>19</b>	X
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....	<b>20a</b>	X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....	<b>20b</b>	
<b>21</b> 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> .....	<b>21</b>	X

**RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.**

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
<b>26</b> 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? If "Yes," complete Schedule L, Part II		X
<b>27</b> 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? If "Yes," complete Schedule L, Part III		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV		X
<b>b</b> A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
<b>b</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)? If "Yes," complete Schedule R, Part V, line 2		
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
<b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> 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
<b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		16
<b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		0
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
		1c

RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.

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

		Yes	No
<b>2a</b>	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		48
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
<b>b</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).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	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>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	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>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	N/A	
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	N/A	
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		N/A
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?		N/A
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		N/A
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	N/A	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	N/A	
<b>b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	N/A	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.		N/A
<b>b</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		
<b>c</b>	Enter the amount of reserves on hand		
	13c		
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		X
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		
<b>15</b>	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 the instructions and file Form 4720, Schedule N.		X
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		X
<b>17</b>	<b>Section 501(c)(21) organizations.</b> Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.		N/A

**RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.**

**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
<b>1a</b> 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.	<b>1a</b>	27	
<b>b</b> Enter the number of voting members included on line 1a, above, who are independent	<b>1b</b>	27	
<b>2</b> 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?	<b>2</b>		<b>X</b>
<b>3</b> 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?	<b>3</b>		<b>X</b>
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<b>4</b>		<b>X</b>
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?	<b>5</b>		<b>X</b>
<b>6</b> Did the organization have members or stockholders?	<b>6</b>	<b>X</b>	
<b>7a</b> 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?	<b>7a</b>	<b>X</b>	
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7b</b>		<b>X</b>
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
<b>a</b> The governing body?	<b>8a</b>	<b>X</b>	
<b>b</b> Each committee with authority to act on behalf of the governing body?	<b>8b</b>	<b>X</b>	
<b>9</b> 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	<b>9</b>		<b>X</b>

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

		Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates?	<b>10a</b>		<b>X</b>
<b>b</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?	<b>10b</b>		
<b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<b>11a</b>	<b>X</b>	
<b>b</b> Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13	<b>12a</b>	<b>X</b>	
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>12b</b>	<b>X</b>	
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	<b>12c</b>	<b>X</b>	
<b>13</b> Did the organization have a written whistleblower policy?	<b>13</b>	<b>X</b>	
<b>14</b> Did the organization have a written document retention and destruction policy?	<b>14</b>	<b>X</b>	
<b>15</b> 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?			
<b>a</b> The organization's CEO, Executive Director, or top management official	<b>15a</b>	<b>X</b>	
<b>b</b> Other officers or key employees of the organization	<b>15b</b>	<b>X</b>	
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	<b>16a</b>		<b>X</b>
<b>b</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?	<b>16b</b>		

**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 **LISA SUPRENAND, EXECUTIVE DIRECTOR - 813-258-6430**  
**35 DAVIS BLVD, TAMPA, FL 33606**

RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.

Form 990 (2021)

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**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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the 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 (list any hours for related organizations below 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) LISA SUPRENAND EXECUTIVE DIRECTOR	40.00			X			119,394.	0.	11,611.	
(2) PAM BARBER PAST PRESIDENT	1.00	X		X			0.	0.	0.	
(3) EDWARD AMEEN CHAIRMAN	10.00	X		X			0.	0.	0.	
(4) KERRY O'REILLY PRESIDENT	5.00	X		X			0.	0.	0.	
(5) WESLEY BEAN VICE PRESIDENT	5.00	X		X			0.	0.	0.	
(6) LAUREN CATOE SECRETARY	5.00	X		X			0.	0.	0.	
(7) KRISTA GARNER TREASURER	10.00	X		X			0.	0.	0.	
(8) ERIC BLANKENSHIP DIRECTOR	1.00	X					0.	0.	0.	
(9) BLAKE CASPER DIRECTOR	1.00	X					0.	0.	0.	
(10) MIKE BARBARO DIRECTOR	1.00	X					0.	0.	0.	
(11) BRIAN FORD DIRECTOR	1.00	X					0.	0.	0.	
(12) CHRIS FROST DIRECTOR	1.00	X					0.	0.	0.	
(13) JEFF HARRING DIRECTOR	1.00	X					0.	0.	0.	
(14) JOSH HAMES DIRECTOR	1.00	X					0.	0.	0.	
(15) CAYCEE HAMPTON DIRECTOR	1.00	X					0.	0.	0.	
(16) DAN PAONE DIRECTOR	1.00	X					0.	0.	0.	
(17) WARREN HYPES DIRECTOR	1.00	X					0.	0.	0.	

**RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(18) JANEL LARAVIE DIRECTOR	1.00	X						0.	0.	0.
(19) DENNIS LEONE DIRECTOR	1.00	X						0.	0.	0.
(20) RUTH LYNCH DIRECTOR	1.00	X						0.	0.	0.
(21) MELISSA MACOGAY DIRECTOR	1.00	X						0.	0.	0.
(22) JAMES MEDEFIND DIRECTOR	1.00	X						0.	0.	0.
(23) TRICIA SPORTSMAN DIRECTOR	1.00	X						0.	0.	0.
(24) TRAVIS PELLEYMOUNTER DIRECTOR	1.00	X						0.	0.	0.
(25) MARSHA RAMSAY DIRECTOR	1.00	X						0.	0.	0.
(26) SHEILA VUKMER DIRECTOR	1.00	X						0.	0.	0.
<b>1b Subtotal</b>								119,394.	0.	11,611.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								119,394.	0.	11,611.

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

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
<b>4</b> 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
<b>5</b> 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
NONE		

**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

**SEE PART VII, SECTION A CONTINUATION SHEETS**

Form **990** (2021)



RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(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			
(27) DARON TARLTON DIRECTOR	1.00	X						0.	0.	0.
(28) RUDY VIVAS DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c .....										

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RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.

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**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>	354,000.				
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	3,692,465.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 200,581.				
	<b>h Total.</b> Add lines 1a-1f		4,046,465.				
	<b>Program Service Revenue</b>	<b>2 a</b> GUEST DONATIONS	<b>Business Code</b>				
		624221	27,259.	27,259.			
<b>b</b>							
<b>c</b>							
<b>d</b>							
<b>e</b>							
<b>f</b> All other program service revenue							
<b>g Total.</b> Add lines 2a-2f		27,259.					
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		645,622.			645,622.	
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties						
	<b>6 a</b> Gross rents	<b>6a</b>	(i) Real				
			(ii) Personal				
	<b>b</b> Less: rental expenses	<b>6b</b>					
	<b>c</b> Rental income or (loss)	<b>6c</b>					
	<b>d</b> Net rental income or (loss)						
	<b>7 a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities	1,695,164.			
			(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses	<b>7b</b>	1,329,229.	2,153.			
	<b>c</b> Gain or (loss)	<b>7c</b>	365,935.	-2,153.			
	<b>d</b> Net gain or (loss)		363,782.	363,782.			
<b>8 a</b> Gross income from fundraising events (not including \$ 354,000. of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>		217,880.				
<b>b</b> Less: direct expenses	<b>8b</b>	152,273.					
<b>c</b> Net income or (loss) from fundraising events		65,607.			65,607.		
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>9a</b>						
<b>b</b> Less: direct expenses	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities							
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>						
<b>b</b> Less: cost of goods sold	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory							
<b>Miscellaneous Revenue</b>	<b>11 a</b> OTHER REVENUE	<b>Business Code</b>					
		900099	24,246.	24,246.			
	<b>b</b>						
	<b>c</b>						
	<b>d</b> All other revenue						
<b>e Total.</b> Add lines 11a-11d		24,246.					
<b>12 Total revenue.</b> See instructions		5,172,981.	415,287.	0.	711,229.		

**RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.**

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**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
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	119,394.	59,697.	35,818.	23,879.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	1,356,612.	1,146,266.	126,208.	84,138.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	49,487.	40,433.	5,432.	3,622.
<b>9</b> Other employee benefits	260,581.	229,516.	18,639.	12,426.
<b>10</b> Payroll taxes	118,479.	95,077.	14,041.	9,361.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal				
<b>c</b> Accounting	43,598.	14,399.	29,199.	
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees	85,525.		85,525.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)				
<b>12</b> Advertising and promotion	30,690.			30,690.
<b>13</b> Office expenses	48,420.	41,010.	4,446.	2,964.
<b>14</b> Information technology				
<b>15</b> Royalties				
<b>16</b> Occupancy	255,637.	235,384.	16,912.	3,341.
<b>17</b> Travel	20,358.	4,107.	11,376.	4,875.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings				
<b>20</b> Interest				
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	213,557.	198,972.	8,751.	5,834.
<b>23</b> Insurance	68,557.	56,014.	7,526.	5,017.
<b>24</b> 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.)				
<b>a</b> HOTEL EXPENSE	172,145.	172,145.		
<b>b</b> DONATED LINENS AND SUPP	128,422.	128,422.		
<b>c</b> FOOD SERVICE AND SUPPLI	107,637.	106,373.	1,264.	
<b>d</b> GENERAL FUNDRAISING EXP	88,304.			88,304.
<b>e</b> All other expenses	83,738.	82,890.	848.	
<b>25</b> Total functional expenses. Add lines 1 through 24e	3,251,141.	2,610,705.	365,985.	274,451.
<b>26</b> 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  if following SOP 98-2 (ASC 958-720)

**RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.**

Form 990 (2021)

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**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
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	917,600.	<b>1</b>	1,174,144.
	<b>2</b> Savings and temporary cash investments .....		<b>2</b>	
	<b>3</b> Pledges and grants receivable, net .....	135,347.	<b>3</b>	841,280.
	<b>4</b> Accounts receivable, net .....	276,266.	<b>4</b>	396,622.
	<b>5</b> 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 .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	17,770.	<b>9</b>	24,488.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	7,347,982.		
	<b>b</b> Less: accumulated depreciation .....	5,008,508.		
	<b>11</b> Investments - publicly traded securities .....	2,490,855.	<b>10c</b>	2,339,474.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	6,914,311.	<b>11</b>	7,908,538.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....	7,525,473.	<b>12</b>	8,296,389.
	<b>14</b> Intangible assets .....		<b>13</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....		<b>14</b>	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	18,277,622.	<b>15</b>	20,980,935.	
<b>17</b> Accounts payable and accrued expenses .....	206,713.	<b>16</b>	20,980,935.	
<b>18</b> Grants payable .....		<b>17</b>	189,058.	
<b>19</b> Deferred revenue .....	4,800.	<b>18</b>		
<b>20</b> Tax-exempt bond liabilities .....		<b>19</b>	15,500.	
<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>20</b>		
<b>22</b> 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 .....		<b>21</b>		
<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>22</b>		
<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>23</b>		
<b>25</b> 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 .....		<b>24</b>		
<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	211,513.	<b>25</b>	204,558.	
<b>27</b> <b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>		<b>26</b>	204,558.	
<b>28</b> Net assets without donor restrictions .....	16,001,018.	<b>27</b>	17,611,751.	
<b>29</b> Net assets with donor restrictions .....	2,065,091.	<b>28</b>	3,164,626.	
<b>30</b> <b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>				
<b>31</b> Capital stock or trust principal, or current funds .....		<b>29</b>		
<b>32</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>		
<b>33</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>		
<b>34</b> Total net assets or fund balances .....	18,066,109.	<b>32</b>	20,776,377.	
<b>35</b> Total liabilities and net assets/fund balances .....	18,277,622.	<b>33</b>	20,980,935.	

Form **990** (2021)

RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.

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**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	5,172,981.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,251,141.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,921,840.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	18,066,109.
5	Net unrealized gains (losses) on investments	5	788,428.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	20,776,377.

**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 on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
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		
b Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:		
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

Form 990 (2021)

Public Disclosure Copy

**SCHEDULE A**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021**

**Open to Public Inspection**

Name of the organization **RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.** Employer identification number **59-1835985**

**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2  A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_
- 10  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations \_\_\_\_\_
  - g Provide the following information about the supported organization(s).

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

**RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.**

**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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	2928954.	2737999.	2237204.	3218561.	2963182.	14085900.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	2928954.	2737999.	2237204.	3218561.	2963182.	14085900.
<b>5</b> 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) .....						2109672.
<b>6 Public support.</b> Subtract line 5 from line 4.						11976228.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>7</b> Amounts from line 4 .....	2928954.	2737999.	2237204.	3218561.	2963182.	14085900.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	353,256.	608,049.	569,556.	660,662.	645,622.	2837145.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	14,844.	17,635.	35,255.	31,570.	24,246.	123,550.
<b>11 Total support.</b> Add lines 7 through 10						17046595.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	
<b>13 First 5 years.</b> 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 <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)).....	<b>14</b>	70.26 %
<b>15</b> Public support percentage from 2020 Schedule A, Part II, line 14 .....	<b>15</b>	73.74 %
<b>16a 33 1/3% support test - 2021.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2020.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2021.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2020.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>

RONALD MCDONALD HOUSE CHARITIES  
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**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 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**

<b>15</b> Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2020 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2020 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2021.** 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 - 2020.** 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



**RONALD MCDONALD HOUSE CHARITIES  
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**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
<b>1</b> 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>		
<b>2</b> 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>		
<b>3a</b> 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>b</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>		
<b>c</b> 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>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<b>b</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>		
<b>c</b> 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>		
<b>5a</b> 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>b</b> <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c</b> <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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>		
<b>7</b> 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).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>9a</b> 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>b</b> Did one or more disqualified persons (as defined on 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>		
<b>c</b> Did a disqualified person (as defined on 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>		
<b>10a</b> 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>b</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>		

**RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.**

**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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.		
<b>1</b>		
<b>2</b> 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.		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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).		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>1</b>		
<b>2</b> 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).		
<b>2</b>		
<b>3</b> By reason of the relationship described on 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.		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
<b>2</b> Activities Test. Answer lines 2a and 2b below.		
<b>a</b> 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
<b>2a</b>		
<b>b</b> Did the activities described on 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.		
<b>2b</b>		
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.		
<b>a</b> 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.		
<b>3a</b>		
<b>b</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.		
<b>3b</b>		

**RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.**

**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.

<b>Section A - Adjusted Net Income</b>		(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	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

<b>Section B - Minimum Asset Amount</b>		(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	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 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	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

<b>Section C - Distributable Amount</b>		(A) Prior Year	(B) 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	<b>Distributable Amount.</b> 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).		

RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.

Schedule A (Form 990) 2021

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**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	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	<b>Total annual distributions.</b> Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2021		
a	From 2016		
b	From 2017		
c	From 2018		
d	From 2019		
e	From 2020		
f	<b>Total</b> of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2021 distributable amount		
i	Carryover from 2016 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2021 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2021 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	<b>Excess distributions carryover to 2022.</b> Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2017		
b	Excess from 2018		
c	Excess from 2019		
d	Excess from 2020		
e	Excess from 2021		

Schedule A (Form 990) 2021

RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.

**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.)

Public Disclosure Copy

**Schedule B**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990 or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

Name of the organization <b>RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.</b>	Employer identification number <b>59-1835985</b>
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Organization type (check one):

**Filers of:**

**Section:**

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

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

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

**General Rule**

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

**Special Rules**

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

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

Name of organization <b>RONALD MCDONALD HOUSE CHARITIES                  OF TAMPA BAY, INC.</b>	Employer identification number <b>59-1835985</b>
--	---

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 601,651.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 84,863.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 114,297.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 941,736.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Public Disclosure Copy

Name of organization <b>RONALD MCDONALD HOUSE CHARITIES                  OF TAMPA BAY, INC.</b>	Employer identification number <b>59-1835985</b>
--	---

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

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

Public Disclosure Copy



Name of organization <b>RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.</b>	Employer identification number <b>59-1835985</b>
---	---

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021**

Open to Public Inspection

Name of the organization **RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.** Employer identification number **59-1835985**

**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.

	(a) Donor advised funds	(b) Funds and other accounts
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? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No
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? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (for example, recreation or education)  Preservation of a historically important land area

Protection of natural habitat  Preservation of a certified historic structure

Preservation of open space

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.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register .....	2d

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? .....

Yes  No

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)? .....

Yes  No

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.

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.

b 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 .....

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

Schedule D (Form 990) 2021

RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.

**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:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**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	1,929,744.	1,897,576.	1,718,162.	1,879,784.	1,689,198.
b Contributions					
c Net investment earnings, gains, and losses	181,149.	72,168.	253,311.	-121,622.	150,586.
d Grants or scholarships					
e Other expenditures for facilities and programs		40,000.	73,897.		
f Administrative expenses					
g End of year balance	2,110,893.	1,929,744.	1,897,576.	1,718,162.	1,879,784.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment  .0000 %
  - b Permanent endowment  47.3700 %
  - c Term endowment  52.6300 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |  | Yes | No |
|--|-----|----|
| (i) Unrelated organizations  | X   |    |
| (ii) Related organizations   |     | X  |
| 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		515,000.		515,000.
b Buildings		4,724,248.	3,379,988.	1,344,260.
c Leasehold improvements		1,247,535.	982,473.	265,062.
d Equipment		861,199.	646,047.	215,152.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				2,339,474.

**RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.**

Schedule D (Form 990) 2021

59-1835985 Page **3**

**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>MUTUAL AND MONEY MARKET</b>		
(B) <b>FUNDS</b>	8,296,389.	<b>END-OF-YEAR MARKET VALUE</b>
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	8,296,389.	

**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)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (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...

Schedule D (Form 990) 2021

RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.

**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	6,263,995.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	788,428.	
b	Donated services and use of facilities	2b	235,838.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	1,024,266.	
3	Subtract line 2e from line 1	3	5,239,729.	
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	85,525.	
b	Other (Describe in Part XIII.)	4b	-152,273.	
c	Add lines 4a and 4b	4c	-66,748.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	5,172,981.	

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

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

1	Total expenses and losses per audited financial statements		1	3,553,727.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	235,838.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	152,273.	
e	Add lines 2a through 2d	2e	388,111.	
3	Subtract line 2e from line 1	3	3,165,616.	
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	85,525.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c	85,525.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	3,251,141.	

**Part XIII Supplemental Information.**

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

**PART X, LINE 2:**

THE ORGANIZATION ACCOUNTS FOR THE EFFECT OF ANY UNCERTAIN TAX POSITIONS BASED ON A "MORE LIKELY THAN NOT" THRESHOLD TO THE RECOGNITION OF THE TAX POSITIONS BEING SUSTAINED BASED ON THE TECHNICAL MERITS OF THE POSITION UNDER SCRUTINY BY THE APPLICABLE TAXING AUTHORITY. IF A TAX POSITION OR POSITIONS ARE DEEMED TO RESULT IN UNCERTAINTIES OF THOSE POSITIONS, THE UNRECOGNIZED TAX BENEFIT IS ESTIMATED BASED ON A "CUMULATIVE PROBABILITY ASSESSMENT" THAT AGGREGATES THE ESTIMATED TAX LIABILITY FOR ALL UNCERTAIN TAX POSITIONS. THE ORGANIZATION HAS IDENTIFIED ITS TAX STATUS AS A TAX-EXEMPT ENTITY AS ITS ONLY SIGNIFICANT TAX POSITION; HOWEVER, THE ORGANIZATION HAS DETERMINED THAT SUCH TAX POSITION DOES NOT RESULT IN AN UNCERTAINTY REQUIRING RECOGNITION. THE ORGANIZATION IS NOT CURRENTLY

RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.

**Part XIII** Supplemental Information (continued)

UNDER EXAMINATION BY ANY TAXING JURISDICTION. THE ORGANIZATION'S FEDERAL RETURNS ARE GENERALLY OPEN FOR EXAMINATION FOR THREE YEARS FOLLOWING THE DATE FILED. ACCORDINGLY, TAX YEARS AFTER 2017 REMAIN OPEN FOR EXAMINATION.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

COST OF DIRECT BENEFITS TO DONORS -152,273.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

COST OF DIRECT BENEFITS TO DONORS 152,273.

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**RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.**

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		STORYBOOK BALL	GOLF TOURNAMENT	2	(add col. (a) through col. (c))	
		(event type)	(event type)	(total number)		
Revenue	1	Gross receipts	249,980.	221,790.	100,110.	571,880.
	2	Less: Contributions	220,000.	98,000.	36,000.	354,000.
	3	Gross income (line 1 minus line 2)	29,980.	123,790.	64,110.	217,880.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	36,633.	70,532.	45,108.	152,273.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				152,273.
11	Net income summary. Subtract line 10 from line 3, column (d)				65,607.	

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

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

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_  
 a Is the organization licensed to conduct gaming activities in each of these states?  Yes  No  
 b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?  Yes  No  
 b If "Yes," explain: \_\_\_\_\_



RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.

Schedule G (Form 990) 2021

59-1835985 Page 3

- 11 Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13 Indicate the percentage of gaming activity conducted in:
- |                               |     |   |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility         | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_
- c If "Yes," enter name and address of the third party:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

\_\_\_\_\_

Director/officer       Employee       Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.

Schedule G (Form 990)

59-1835985 Page 4

**Part IV** Supplemental Information *(continued)*

Public Disclosure Copy

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2021**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization **RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.** Employer identification number **59-1835985**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	2	50,672.	STOCK MARKET
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory	X	100	39,853.	ESTIMATED VALUE
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ( PROMOTIONAL M )	X	100	21,487.	ESTIMATED VALUE
26 Other ( )				
27 Other ( )				
28 Other ( )				

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

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2021



**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

Open to Public  
Inspection

Name of the organization

RONALD MCDONALD HOUSE CHARITIES  
OF TAMPA BAY, INC.

Employer identification number  
59-1835985

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

FAMILIES ARE STRONGER WHEN THEY ARE TOGETHER, WHICH HELPS THE HEALING  
PROCESS. BY STAYING AT A RONALD MCDONALD HOUSE, PARENTS SLEEP BETTER,  
EAT BETTER, AND CAN COMMUNICATE EASIER WITH THEIR CHILD'S MEDICAL TEAM.  
THE HOUSES SERVE ANY FAMILY OF A PEDIATRIC PATIENT 21 AND UNDER  
REGARDLESS OF INCOME. AT RMHC WE STRIVE TO ALLEVIATE THE BURDEN FROM  
FAMILIES DURING THIS STRESSFUL TIME INCLUDING THE FINANCIAL BURDEN.

OUR CHAPTER'S VALUES ARE TO: FOCUS ON THE CRITICAL NEEDS OF CHILDREN;  
LEAD WITH COMPASSION, CELEBRATE THE DIVERSITY OF OUR PEOPLE AND  
PROGRAMS, OPERATE WITH ACCOUNTABILITY AND TRANSPARENCY.

FORM 990, PART VI, SECTION A, LINE 6:

THE ORGANIZATION HAS A BOARD OF TRUSTEES AND THEY ARE CONSIDERED MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7A:

BOARD OF TRUSTEES VOTES ON NEW MEMBERS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE AUDIT COMMITTEE, CHAIRMAN OF THE BOARD, TREASURER AND CEO REVIEW THE  
RETURN AND PROVIDE THE REVIEW AND RECOMMENDATION FOR APPROVAL OF THE IRS  
FORM 990 TO THE BOARD OF TRUSTEES.

FORM 990, PART VI, SECTION B, LINE 12C:

JANUARY OF EACH YEAR A CONFLICT OF INTEREST POLICY IS GIVEN TO EACH BOARD

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

Schedule O (Form 990) 2021

Name of the organization <b>RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.</b>	Employer identification number <b>59-1835985</b>
--	---

MEMBER. COPIES OF THE SIGNED POLICIES ARE KEPT ON FILE AND MAINTAINED BY THE EXECUTIVE DIRECTOR/CEO.

FORM 990, PART VI, SECTION B, LINE 15:

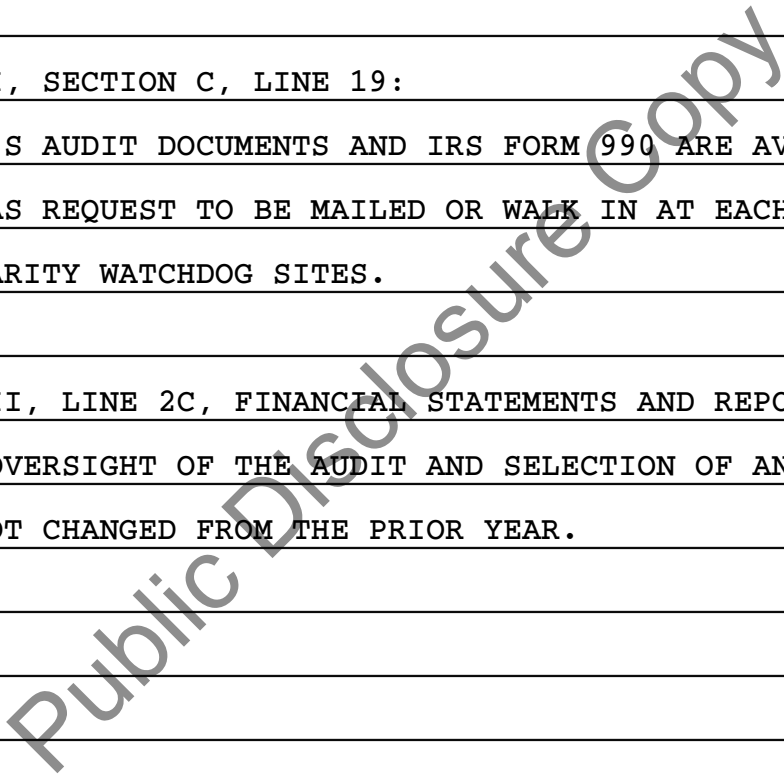
ANNUAL REVIEWS ARE PERFORMED EACH YEAR. THE CEO REVIEW IS CONDUCTED BY THE PRESIDENT AND COMPENSATION IS REVIEWED AND APPROVED BY THE EXECUTIVE COMMITTEE.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION'S AUDIT DOCUMENTS AND IRS FORM 990 ARE AVAILABLE ON OUR WEBSITE AS WELL AS REQUEST TO BE MAILED OR WALK IN AT EACH HOUSE FOR REVIEW AND LINKED TO CHARITY WATCHDOG SITES.

FORM 990, PART XII, LINE 2C, FINANCIAL STATEMENTS AND REPORTING:

THE PROCESS FOR OVERSIGHT OF THE AUDIT AND SELECTION OF AN INDEPENDENT ACCOUNTANT HAS NOT CHANGED FROM THE PRIOR YEAR.



Form **8868**  
(Rev. January 2022)

# Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-0047

Department of the Treasury  
Internal Revenue Service

► **File a separate application for each return.**  
► **Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.**

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits](http://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits).

**Automatic 6-Month Extension of Time.** Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

<b>Type or print</b>	Name of exempt organization or other filer, see instructions. <b>RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.</b>	Taxpayer identification number (TIN) <b>59-1835985</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>35 DAVIS BLVD</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>TAMPA, FL 33606</b>	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

**LISA SUPRENAND, EXECUTIVE DIRECTOR**

• The books are in the care of ► **35 DAVIS BLVD - TAMPA, FL 33606**

Telephone No. ► **813-258-6430**

Fax No. ► \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and TINs of all members the extension is for.

**1** I request an automatic 6-month extension of time until **NOVEMBER 15, 2022**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ►  calendar year **2021** or  
 ►  tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_.

**2** If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period

<b>3a</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	<b>0.</b>
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	<b>0.</b>
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	<b>0.</b>

**Caution:** If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

LHA **For Privacy Act and Paperwork Reduction Act Notice, see instructions.**

Form **8868** (Rev. 1-2022)

FINANCIAL STATEMENTS AND INDEPENDENT AUDITORS' REPORT

RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.

December 31, 2021



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## INDEPENDENT AUDITOR'S REPORT

Board of Directors  
Ronald McDonald House Charities of Tampa Bay, Inc.

### **Opinion**

We have audited the accompanying financial statements of Ronald McDonald House Charities of Tampa Bay, Inc. (a nonprofit organization) (the Organization), which comprise the statement of financial position as of December 31, 2021, and the related statement of activities, functional expenses, and cash flows, for the year then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Organization as of December 31, 2021, and the changes in net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

### **Responsibilities of Management for the Financial Statements**

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for 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.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Organization's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

### **Auditor's Responsibilities for the Audit of the Financial Statements**

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements, including omissions, are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.



In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit 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 Organization's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Organization's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

#### **Report on Summarized Comparative Information**

We have previously audited Ronald McDonald House Charities of Tampa Bay, Inc.'s 2020 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated May 27, 2021. In our opinion, the summarized comparative information presented herein as of and for the year ended December 31, 2020 is consistent, in all material respects, with the audited financial statements from which it has been derived.



Tampa, Florida  
May 26, 2022

Ronald McDonald House Charities of Tampa Bay, Inc.

STATEMENT OF FINANCIAL POSITION

December 31, 2021  
(With comparative total for December 31, 2020)

	Without Donor Restrictions	With Donor Restrictions	Total	
			2021	2020
<b>ASSETS</b>				
<b>CURRENT ASSETS</b>				
Cash	\$ 961,691	\$ 212,453	\$ 1,174,144	\$ 917,600
Contributions receivable, current	-	329,732	329,732	55,333
Other receivables	396,622	-	396,622	276,266
Prepaid expenses	24,488	-	24,488	17,770
Total current assets	1,382,801	542,185	1,924,986	1,266,969
Investments	14,094,034	2,110,893	16,204,927	14,439,784
Long-term contributions receivable, net	-	511,548	511,548	80,014
Property and equipment, net	2,339,474	-	2,339,474	2,490,855
<b>TOTAL ASSETS</b>	<b>\$ 17,816,309</b>	<b>\$ 3,164,626</b>	<b>\$ 20,980,935</b>	<b>\$ 18,277,622</b>
<b>LIABILITIES AND NET ASSETS</b>				
<b>CURRENT LIABILITIES</b>				
Accounts payable	\$ 30,364	\$ -	\$ 30,364	\$ 60,123
Accrued expenses	158,694	-	158,694	146,590
Deferred revenue	15,500	-	15,500	4,800
Total current liabilities	204,558	-	204,558	211,513
Long term liabilities	-	-	-	-
Total liabilities	204,558	-	204,558	211,513
<b>NET ASSETS</b>				
Net assets without donor restrictions	17,611,751	-	17,611,751	16,001,018
Net assets with donor restrictions	-	3,164,626	3,164,626	2,065,091
Total net assets	17,611,751	3,164,626	20,776,377	18,066,109
<b>TOTAL LIABILITIES AND NET ASSETS</b>	<b>\$ 17,816,309</b>	<b>\$ 3,164,626</b>	<b>\$ 20,980,935</b>	<b>\$ 18,277,622</b>

The accompanying notes are an integral part of this statement.

Ronald McDonald House Charities of Tampa Bay, Inc.

STATEMENT OF ACTIVITIES

For the year ended December 31, 2021  
(With comparative total for December 31, 2020)

	Without Donor Restrictions	With Donor Restrictions	Total	
			2021	2020
<b>OPERATING REVENUE</b>				
Contributions	\$ 2,574,013	\$ 968,543	\$ 3,542,556	\$ 2,695,636
Contributions - non-cash	385,747	-	385,747	486,611
Guest donations	27,259	-	27,259	24,017
Special events	571,880	-	571,880	301,824
Other revenue	24,246	-	24,246	31,570
Total operating revenue	<u>3,583,145</u>	<u>968,543</u>	<u>4,551,688</u>	<u>3,539,658</u>
Net assets released from restrictions	<u>50,156</u>	<u>(50,156)</u>	<u>-</u>	<u>-</u>
Total operating revenues and net assets released from restrictions	<u>3,633,301</u>	<u>918,387</u>	<u>4,551,688</u>	<u>3,539,658</u>
<b>EXPENSES</b>				
Program services	2,843,106	-	2,843,106	2,901,986
Management and general	282,522	-	282,522	225,217
Fundraising	275,826	-	275,826	265,853
Cost of direct benefits to donors	152,273	-	152,273	77,632
Total expenses	<u>3,553,727</u>	<u>-</u>	<u>3,553,727</u>	<u>3,470,688</u>
Change in net assets before nonoperating revenues and losses	<u>79,574</u>	<u>918,387</u>	<u>997,961</u>	<u>68,970</u>
<b>Nonoperating revenues (losses)</b>				
Gain on forgiveness of debt	-	-	-	362,300
Loss on disposal of fixed assets	(2,153)	-	(2,153)	(83,078)
Interest and dividends	467,319	92,778	560,097	551,534
Realized gain (loss) on investments	352,612	13,323	365,935	(54,572)
Unrealized gain on investments	713,381	75,047	788,428	545,722
	<u>1,531,159</u>	<u>181,148</u>	<u>1,712,307</u>	<u>1,321,906</u>
Change in net assets	<u>1,610,733</u>	<u>1,099,535</u>	<u>2,710,268</u>	<u>1,390,876</u>
Net assets at beginning of year	<u>16,001,018</u>	<u>2,065,091</u>	<u>18,066,109</u>	<u>16,675,233</u>
Net assets at end of year	<u>\$ 17,611,751</u>	<u>\$ 3,164,626</u>	<u>\$ 20,776,377</u>	<u>\$ 18,066,109</u>

The accompanying notes are an integral part of this statement.

Ronald McDonald House Charities of Tampa Bay, Inc.

STATEMENT OF FUNCTIONAL EXPENSES

For the year ended December 31, 2021  
(With comparative total for December 31, 2020)

	Program Services				Supporting Services		Cost of Direct Benefits to Donors	Total Expenses		
	Tampa House	St. Pete East House	St. Pete West House	Central House	Total Program Services	Management and General		Fundraising	2021	2020
Salaries	\$ 178,310	\$ 466,186	\$ 221,773	\$ 339,694	\$ 1,205,963	\$ 162,026	\$ 108,017	\$ -	\$ 1,476,006	\$ 1,478,844
Payroll taxes	14,121	36,828	17,582	26,546	95,077	14,041	9,361	-	118,479	116,122
Health insurance	27,055	131,577	52,148	18,736	229,516	18,639	12,426	-	260,581	247,823
Retirement plan expense	5,978	15,630	7,436	11,389	40,433	5,432	3,622	-	49,487	41,798
Total salaries and benefits	<u>225,464</u>	<u>650,221</u>	<u>298,939</u>	<u>396,365</u>	<u>1,570,989</u>	<u>200,138</u>	<u>133,426</u>	<u>-</u>	<u>1,904,553</u>	<u>1,884,587</u>
Advertising	-	-	-	-	-	-	30,690	-	30,690	68,200
Cost of items sold	-	865	-	-	865	-	-	-	865	5,456
Depreciation	43,613	129,762	21,699	3,898	198,972	8,751	5,834	-	213,557	231,247
Donated linens and supplies	21,382	64,038	11,320	31,682	128,422	-	-	-	128,422	160,624
Food service and supplies	4,845	62,568	10,469	28,491	106,373	1,264	-	-	107,637	100,359
General fundraising expenses	-	-	-	-	-	-	88,304	-	88,304	74,661
Hotel expense	790	111,437	15,817	44,101	172,145	-	-	-	172,145	96,659
House administration	14,332	34,805	18,426	14,332	81,895	-	-	-	81,895	70,011
Insurance	8,282	21,653	10,301	15,778	56,014	7,526	5,017	-	68,557	73,631
Legal and professional fees	4,201	5,061	4,373	4,201	17,836	31,261	1,375	-	50,472	65,849
Meetings and travel	3,613	170	113	211	4,107	11,376	4,875	-	20,358	11,721
Office expense	14,107	15,645	3,165	8,093	41,010	4,446	2,964	-	48,420	40,317
Rent	43,088	2,475	2,475	190,939	238,977	2,588	-	-	241,565	243,072
Repairs and maintenance	44,351	30,275	23,610	2,188	100,424	6,528	-	-	106,952	123,690
Special event expenses	-	-	-	-	-	-	-	152,273	152,273	77,632
Taxes and licenses	89	41	-	-	130	848	-	-	978	1,534
Utilities	30,828	52,472	23,555	18,092	124,947	7,796	3,341	-	136,084	141,438
	<u>233,521</u>	<u>531,267</u>	<u>145,323</u>	<u>362,006</u>	<u>1,272,117</u>	<u>82,384</u>	<u>142,400</u>	<u>152,273</u>	<u>1,649,174</u>	<u>1,586,101</u>
	<u>\$ 458,985</u>	<u>\$ 1,181,488</u>	<u>\$ 444,262</u>	<u>\$ 758,371</u>	<u>\$ 2,843,106</u>	<u>\$ 282,522</u>	<u>\$ 275,826</u>	<u>\$ 152,273</u>	<u>\$ 3,553,727</u>	<u>\$ 3,470,688</u>

The accompanying notes are an integral part of this statement.

Ronald McDonald House Charities of Tampa Bay, Inc.

STATEMENT OF CASH FLOWS

For the year ended December 31, 2021

Cash flows from operating activities	
Change in net assets	\$ 2,710,268
Adjustments to reconcile change in net assets to net cash provided by operating activities	
Depreciation	213,557
Loss on disposal of fixed assets	2,153
Unrealized gain on investments	(788,428)
Realized gain on investments	(365,935)
Increase in unconditional promises to give	(705,933)
Increase in other receivables	(120,356)
Increase in prepaid expenses	(6,718)
Decrease in accounts payable	(29,759)
Increase in accrued expenses	12,104
Increase in deferred revenue	10,700
	<hr/>
Net cash provided by operating activities	931,653
	<hr/>
Cash flows from investing activities	
Proceeds from sale of investments	1,695,164
Purchases of investments	(2,305,944)
Purchase of property and equipment	(64,329)
	<hr/>
Net cash used in investing activities	(675,109)
	<hr/>
Net increase in cash	256,544
Cash and cash equivalents at beginning of year	917,600
	<hr/>
Cash and cash equivalents at end of year	\$ 1,174,144
	<hr/>

The accompanying notes are an integral part of this statement.

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS

December 31, 2021

NOTE A - DESCRIPTION OF THE ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A description of the organization and a summary of its significant accounting policies consistently applied in the preparation of the accompanying financial statements follow:

1. Description of the Organization and Activities

Ronald McDonald House Charities of Tampa Bay, Inc. (the Organization) is a State of Florida chartered not-for-profit corporation. The mission of the Organization is to create, fund and support programs that directly improve the health and well-being of children. Guiding the Organization in this mission are the core values:

- Focusing on the critical needs of children
- Celebrating the diversity of our people and programs
- Valuing our heritage
- Operating with accountability and transparency

To achieve the mission, the Organization operates four Ronald McDonald Houses; three in St. Petersburg and one in Tampa, offering a total of 80 bedrooms with private baths. The Organization is supported by the local community and corporate sponsors.

2. Basis of Presentation

The financial statements of the Organization 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).

The Organization presents information regarding its financial position and activities according to two classes of net assets described as follows:

- *Net Assets Without Donor Restrictions* - Net assets without donor restrictions are net assets not subject to donor-imposed restrictions or the donor-imposed restrictions have expired. These net assets are available for use at the discretion of the Board of Directors (the Board) and/or management for general operating purposes.
- *Net Assets With Donor Restrictions* - Net assets with donor restrictions are net assets subject to donor-imposed stipulations that may be fulfilled by actions of the Organization to meet the stipulations, that may become undesignated by the passage of time, or that require net assets to be permanently maintained, thereby restricting the use of principal.



Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

NOTE A - DESCRIPTION OF THE ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

3. Use of Estimates

The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Accordingly, actual results could differ from those estimates. Significant estimates include useful lives on related assets, expenses by function, the discount rate for the present value of the unconditional promises to give, and fair value measurement of investments.

4. Fair Value Measurement

The financial statements are prepared in accordance with an accounting standard for all financial assets and liabilities and for nonfinancial assets and liabilities recognized or disclosed at fair value in the financial statements or on a recurring basis (at least annually). Fair value is defined as the exchange price that would be received for an asset or paid to transfer a liability (an exit price) in the principal or most advantageous market for the asset or liability in an orderly transaction between market participants on a measurement date. The standard also establishes a fair value hierarchy which requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs when measuring fair value.

There are three levels of inputs that may be used to measure fair value:

- Level 1: Quoted market prices in active markets for identical assets or liabilities.
- Level 2: Observable market-based inputs or unobservable inputs that are corroborated by market data.
- Level 3: Unobservable inputs that are not corroborated by market data.

5. Cash and Cash Equivalents

The Organization classifies all short-term investments with an original maturity of three months or less as cash equivalents.

Financial instruments which potentially subject the Organization to concentrations of credit risk consist principally of cash held in financial institutions in excess of federally insured limits. The Organization's cash balance may have exceeded the federally insured limit from time to time throughout the year ended December 31, 2021. However, the Organization has not experienced and does not expect to incur any losses in such accounts.

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

NOTE A - DESCRIPTION OF THE ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

6. Contributions Receivable

Unconditional contributions receivable that are expected to be collected within one year are recorded at net realizable value. Contributions receivable to give that are expected to be collected in future years are recorded at the present value of their estimated cash flows. Conditional promises to give are not included as support until the conditions are substantially met.

Unconditional contributions receivable due in more than one year are reflected at the present value of estimated future cash flows using current risk-free rates of return based on the U.S. Treasury Securities yield with maturity dates similar to the expected contribution collection period. The rate applied for the year ended December 31, 2021 was 2.5%. The Organization uses the allowance method to determine uncollectible contributions receivable. The allowance is based on prior years' experience and management's analysis of specific promises made. No allowance was deemed necessary at December 31, 2021.

7. Investments

Investments in debt and equity securities and mutual funds are stated at fair value in the statements of financial position. Investment income or loss (including gains or losses on investments, interest, and dividends) is included in the statement of activities as increases or decreases in unrestricted net assets unless the income or loss is restricted by donor or law.

Investment income and gains earned on the endowment fund are reported as increases in net assets with donor restrictions in the reporting period in which the income and gains are recognized and released from restrictions when distributed for operating purposes.

8. Property and Equipment

Property and equipment expenditures in excess of \$5,000 are capitalized at cost when purchased or, if donated, at estimated fair value. Improvements and betterments that materially prolong the useful lives of assets are capitalized. Depreciation is computed using the straight-line method over the estimated useful lives which range from five to forty years.

9. Impairment of Long-Lived Assets

The Organization evaluates its long-lived assets for any events or changes in circumstances which indicate that the carrying amount of such assets may not be fully recoverable. The Organization evaluates the recoverability of long-lived assets by measuring the carrying amount of such assets against the estimated undiscounted future cash flows associated with them. At the time such evaluation indicates that the future undiscounted cash flows of certain long-lived assets are not sufficient to recover the carrying value of such assets, the assets are adjusted to their fair values.

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

NOTE A - DESCRIPTION OF THE ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

10. Revenue Recognition

Contributions received are recorded as without donor restrictions or with donor restrictions, depending on the existence and/or nature of any donor restrictions.

All donor-restricted contributions are reported as increases in net assets with donor restrictions. When a restriction expires (that is, when a stipulated time restriction ends or the purpose of the restriction is accomplished), net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of activities as net assets released from restrictions.

11. Donated Premises, Services, and Materials

Donated materials are recorded as support at their fair value at the date of donation. Contributions of services are recorded as support at their estimated fair value if the services received create or enhance non-financial assets or require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation.

For the year ended December 31, 2021, the value of contributed services meeting the requirements for recognition in the financial statements has been recorded as support without restrictions. In addition, many individuals volunteer their time and perform a variety of tasks that assist the Organization, but these services do not meet the criteria for recognition as contributed services under U.S. GAAP.

12. Expense Allocation

The costs of providing the various programs and other activities have been summarized on a functional basis in the accompanying statements of activities and functional expenses. Expenses are allocated among program, management and general, fundraising and the cost of direct benefits to donors, based on management's estimate of the time, number of rooms per house and related square footage, and direct expenses spent for each of the functions. These functions are defined as follows:

- Program services - the costs associated with the Organization's efforts to achieve the stated mission and goals.
- Management and general - the costs of operating the Organization's offices, including gathering, processing, and maintaining financial information.
- Fundraising - the costs associated with soliciting contributions or holding special events for the benefit of the Organization.

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

NOTE A - DESCRIPTION OF THE ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

- Cost of Direct Benefits to Donors - costs associated with facilities, entertainment, meals, etc. for special events intended to raise awareness and support the mission of the organization.

13. Advertising

Advertising costs are expensed as incurred and were approximately \$31,000 for the year ended December 31, 2021.

14. Income Tax Status

The Organization is a not-for-profit organization that is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code.

15. Uncertain Tax Positions

The Organization accounts for the effect of any uncertain tax positions based on a “more likely than not” threshold to the recognition of the tax positions being sustained based on the technical merits of the position under scrutiny by the applicable taxing authority. If a tax position or positions are deemed to result in uncertainties of those positions, the unrecognized tax liability is estimated based on a “cumulative probability assessment” that aggregates the estimated tax liability for all uncertain tax positions.

The Organization has identified its tax status as a tax-exempt entity as its only significant tax position; however, the Organization has determined that such a tax position does not result in an uncertainty requiring recognition. The Organization is not currently under examination by any taxing jurisdiction. The Organization’s federal returns are generally open for examination for three years following the date filed. Accordingly, tax years after 2017 remain open for examination.

16. Summarized Comparative Information

The financial statements include certain prior year summarized comparative information in total but not by net asset class. Such information does not include sufficient detail to constitute a presentation in conformity with U.S. GAAP. Accordingly, such information should be read in conjunction with the Organization’s financial statements for the year ended December 31, 2020, from which the summarized information was derived.

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

NOTE A - DESCRIPTION OF THE ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

17. Reclassification

Certain prior year information was reclassified to conform to current year classifications. The reclassifications have no impact on previously reported changes in net assets.

NOTE B - LIQUIDITY AND AVAILABILITY OF RESOURCES

As a part of the Organization's liquidity management, it invests cash in excess of daily requirements in short-term investments. The Organization also has a line of credit to draw upon at management discretion. See Note I.

The following reflects the Organization's financial assets as of December 31, 2021, reduced by amounts not available for general use because of contractual or donor-imposed restrictions within one year of statement of financial position date.

Amounts not available include amounts restricted by time or purpose and amounts restricted by donors in perpetuity:

Cash and cash equivalents	\$ 1,174,144
Investments - money market funds	1,069,089
Investments - stocks and mutual funds	13,423,036
Investments - other	1,712,802
Contributions receivable, current	329,732
Other receivables	<u>396,622</u>
Total financial assets available within one year	<u>18,105,425</u>
Less:	
Amounts unavailable for general expenditures within one year, due to:	
Time restrictions	(20,000)
Accumulated earnings on endowments	(1,110,893)
Restricted by donors for specific purpose	(1,033,733)
Restricted by donors in perpetuity	<u>(1,000,000)</u>
Total amounts unavailable for general expenditures within one year	<u>(3,164,626)</u>
Total financial assets available to management for expenditure within one year	<u>\$ 14,940,799</u>

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

NOTE B - LIQUIDITY AND AVAILABILITY OF RESOURCES - Continued

As part of the Organization's liquidity management, it has a policy to structure its financial assets to be available as its general expenditures, liabilities, and other obligations become due. The Organization invests cash in excess of daily requirements in highly liquid investments held in a regulated brokerage account.

NOTE C - CONTRIBUTIONS RECEIVABLE

Contributions receivable consist of the following at December 31, 2021:

Gross contributions receivable	\$	874,413
Less unamortized discount		<u>(33,133)</u>
Net contributions receivable	\$	<u>841,280</u>
Amount due in		
Less than one year	\$	329,732
One to five years		<u>544,681</u>
	\$	<u>874,413</u>

NOTE D - PROPERTY AND EQUIPMENT

Property and equipment consist of the following at December 31, 2021:

Land - St. Petersburg - East	\$	515,000
St. Petersburg Houses and improvements		3,568,752
Central House improvements		340,567
Tampa House and improvements		2,194,218
Tampa administrative office		<u>729,445</u>
		7,347,982
Less accumulated depreciation		<u>(5,008,508)</u>
	\$	<u>2,339,474</u>

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

NOTE E - INVESTMENTS

Investments are carried at fair value and are as follows:

Unrestricted		
Money market funds	\$	937,130
Equity securities		5,673,706
Preferred stock		50,672
Exchange-trade and closed-end funds		47,187
Debt securities		835,246
Corporate fixed income		754,300
Mutual funds		5,795,793
		<u>14,094,034</u>
Restricted		
Money market funds		131,959
Equity securities		471,358
Mutual funds		1,431,507
Corporate fixed income		76,069
		<u>2,110,893</u>
	\$	<u>16,204,927</u>

The components of investment income are summarized as follows for the year ended December 31, 2021:

Interest and dividends	\$	560,097
Realized gains		365,935
Unrealized gains		788,428
		<u>1,714,460</u>
	\$	<u>1,714,460</u>

Expenses related to investment revenue, including custodial fees and investment advisory fees, amounted to approximately \$85,500 for the year ended December 31, 2021.

NOTE F - FAIR VALUE MEASUREMENT

The Organization's investments are reported at fair value in the accompanying statements of financial position. Following is a description of valuation methodologies used for investments measured at fair value. There have been no changes in the methodology used at December 31, 2021.

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

NOTE F - FAIR VALUE MEASUREMENT - Continued

- Money market funds: Valued at the net asset value (NAV) of shares held by the Organization at year-end.
- Equity securities: Comprised of common stock valued at the closing price reported in the active market in which the individual securities are traded.
- Preferred stock: Comprised of preferred stock valued based on pricing models that use inputs such as recent transactions for identical securities and quoted prices of similar securities that are traded in the active market.
- Corporate fixed income and debt securities: Valued at the closing quoted price reported in the active market using market pricing and other observable inputs for similar securities obtained from industry standard data providers.
- Mutual funds: Valued at the net asset value (NAV) of shares held by the Organization at year-end based on quoted prices of the various funds in active markets.
- Exchange-traded and closed-end funds: Valued at the net asset value (NAV) of shares held by the Organization at year-end based on quoted prices of each fund's securities, cash, and other assets traded in active markets less all of its liabilities divided by the total number of shares outstanding.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although management believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date. The fair value by investment assets at December 31, 2021 is as follows:

	Level 1	Level 2	Level 3	Total
Money market funds	\$ 1,069,089	\$ -	\$ -	\$ 1,069,089
Equity securities	6,145,064	-	-	6,145,064
Preferred stocks	-	50,672	-	50,672
Exchange-trade and closed-end funds	47,187	-	-	47,187
Mutual funds	7,227,300	-	-	7,227,300
Corporate fixed income	-	830,369	-	830,369
Debt securities	-	835,246	-	835,246
	<u>\$ 14,488,640</u>	<u>\$ 1,716,287</u>	<u>\$ -</u>	<u>\$ 16,204,927</u>



Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

NOTE G - ENDOWMENT FUND

The Organization's endowment consists of a gift of McDonald's Corporation stock received from Mrs. Joan Kroc in 1994. The terms of this \$1 million gift created an endowment fund which requires the principal to be held in perpetuity for the benefit of the Ronald McDonald Houses in St. Petersburg and Tampa. Only income from the endowment fund may be used for operating expenses of the Houses. The Organization has now sold 100% of the McDonald's stock and has reinvested the proceeds in other income producing investments as allowed by the terms of the gift. The endowment is comprised of donor-restricted endowment funds. As required by accounting principles generally accepted in the United States of America, net assets associated with endowment funds are classified and reported based on the existence or absence of donor-imposed restrictions.

*Interpretation of Relevant Law*

The Organization has interpreted the Florida Uniform Prudent Management of Institutional Funds Act (FUPMIFA) as requiring the preservation of the fair value of the original gift as of the gift date of the donor-restricted endowment funds absent explicit donor stipulations to the contrary. As a result of this interpretation, the Organization classifies as net assets with donor restrictions restricted in perpetuity (a) the original value of gifts donated to the permanent endowment, (b) the original value of subsequent gifts to the permanent endowment and (c) accumulations to the permanent endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund.

The remaining portion of the donor-restricted endowment fund that is not classified as with donor restrictions in perpetuity is classified as with donor restrictions until those amounts are appropriated for expenditure by the Organization in a manner consistent with the standard of prudence prescribed by FUPMIFA.

In accordance with FUPMIFA, the Organization considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds:

- The duration and preservation of the fund
- The purposes of the Organization and the donor-restricted endowment fund
- General economic conditions
- The possible effect of inflation and deflation
- The expected total return from income and the appreciation of investments
- Other resources of the Organization
- The investment policies of the Organization

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

NOTE G - ENDOWMENT FUND - Continued

For the year ended December 31, 2021, the Organization has elected not to add appreciation for cost of living or other spending policies to its endowment restricted in perpetuity for inflation and other economic conditions.

Changes in endowment net assets as of December 31, 2021 are as follows:

	Without donor restrictions	With donor restrictions	With donor restrictions - in perpetuity	Total
Endowment net assets, beginning	\$ -	\$ 929,744	\$ 1,000,000	\$ 1,929,744
Withdrawals	-	-	-	-
Investments earnings, net	-	92,779	-	92,779
Investment appreciation	-	88,370	-	88,370
Endowment net assets, ending	<u>\$ -</u>	<u>\$ 1,110,893</u>	<u>\$ 1,000,000</u>	<u>\$ 2,110,893</u>

*Return Objectives, Risk Parameters, and Strategies*

The Organization has adopted an investment and spending policy for endowment assets that attempts to preserve the real (inflation adjusted) value of endowment assets, increase the real value of the portfolio and facilitate a potential distribution to support some level of future operations. Endowment assets include those assets of donor-restricted funds that the Organization must hold in perpetuity or for a donor-specified period(s). The terms of the operating policies of the endowment fund (the Fund) requires that the Fund will be managed by the Investment Committee and approved by the Board of Directors. The Investment Committee is responsible to oversee the portfolio's investments and monitor the investments on an ongoing basis to ensure that long-term objectives are being met. The Investment Committee has agreed to a target asset allocation for the portfolio's assets and seeks advice from professional investment managers which hold the assets. The Fund is to invest funds in accordance with the standards set forth in the Organization's investment policy.

*Spending Policy*

The Organization is operating under an approved endowment policy that seeks to preserve the purchasing power of the Fund while providing income at the highest attainable level. The endowment fund may distribute income and dividends. Under Florida UPMIFA capital gains may also be distributed. Investment earnings and capital gains are accumulated in net assets with donor restrictions. Distributions are considered as a release from restriction from the net assets with donor restrictions. There is to be no invasion of the original principal of the gift given to the Organization unless the donor instructs otherwise.

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

NOTE H - LEASES

The Organization leases land from the City of Tampa, Florida on which a building owned by the Organization was constructed. The lease originated in 1989 and calls for an annual payment of \$1 per year. In 2019, the option to renew for an additional twenty years was exercised and the lease extended to 2038. The Organization recorded an in-kind donation and rent expense on the land at its net realizable value estimated by management at \$40,500 for the year ended December 31, 2021. The City of Tampa has the right to terminate the lease with 60 days advance notice. No amount has been recorded in the accompanying financial statements for the future fair value of the lease agreement as the value cannot be estimated and the right to terminate the lease renders it conditional.

The Organization leases space from Johns Hopkins All Children's Hospital in St. Petersburg, Florida for the Central House that opened in 2010. The lease originated in 2009 and calls for annual payments of \$1 per year over fifteen years. In 2020, the option to renew for an additional ten years was exercised and the lease extended to 2035. This 7,319 square foot space is donated by All Children's Hospital and recorded at its net realizable value as an in-kind donation and rent expense of \$188,464 for the year ended December 31, 2021. Both parties have the right to terminate the lease.

No amount has been recorded in the accompanying financial statements for the future fair value of the lease agreement, as the value cannot be estimated, the term is not substantiated, and the right to terminate the lease renders it conditional.

The Organization also leases various office equipment. The total lease expense for these leased items was approximately \$12,600 for the year ended December 31, 2021.

NOTE I - LINE-OF-CREDIT

The Organization entered into a \$2,500,000 line-of-credit with a financial institution in December 2016. The line-of-credit is collateralized by the non-endowment fund investment accounts of the Organization. There was no balance outstanding at December 31, 2021.

NOTE J - CONCENTRATIONS OF CREDIT RISK

The majority of the Organization's revenue, both from contributions and from fundraising events, is from businesses and individuals in the Tampa Bay area.

NOTE K - RETIREMENT PLAN

Effective January 1, 2016, the Organization adopted a plan covered under Section 401(k) of the Internal Revenue Code. The 401(k) plan allows participants to defer some of their compensation by electing to make contributions into the plan. The plan has a nonelective safe harbor provision requiring a 3% annual employer contribution to eligible employees. The plan covers all employees at least 21 years of age after completing one year of service. Contributions to the plan totaled \$49,487 during the year ended December 31, 2021.

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

NOTE L - NET ASSETS WITH DONOR RESTRICTIONS

Net assets with donor restrictions at December 31, 2021 were as follows:

Accumulated earnings on endowment	\$	1,110,893
Capital projects		968,543
Adopt A Room		65,190
Other time restrictions		<u>20,000</u>
Total net assets with time and purpose restrictions		2,164,626
Net assets restricted in perpetuity		<u>1,000,000</u>
Total net assets with donor restrictions	\$	<u><u>3,164,626</u></u>

NOTE M - NET ASSETS RELEASED FROM RESTRICTIONS

Net assets released from donor restrictions were comprised of the following:

Time restrictions expired on pledges	\$	<u>50,156</u>
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NOTE N - RISKS AND UNCERTAINTIES

On January 30, 2020, the World Health Organization declared the coronavirus (COVID-19) outbreak a Public Health Emergency of International Concern and on March 11, 2020, declared it to be a global pandemic. Actions taken around the world to help mitigate the spread of the coronavirus include restrictions on travel, and quarantines in certain areas and forces closures of certain types of public places and businesses. The coronavirus and actions taken to mitigate it have and are expected to continue to have an adverse impact on the economies and financial markets of many countries, including the geographical area in which the Organization operates. It is unknown how long these conditions will last and what the complete financial effect will be to the Organization.

As a result, the Organization was impacted and could continue to experience a certain degree of business interruption. The extent to which the COVID-19 outbreak impacts the Organization's operations will depend on future developments, which are uncertain as of May 26, 2022, the date financial statements were available to be used.

NOTE O - SUBSEQUENT EVENTS

The Organization has evaluated events and transactions occurring subsequent to December 31, 2021 as of May 26, 2022 which is the date the financial statements were available to be issued.

# Insurance Proposal for Ronald McDonald House Charities of Tampa Bay, Inc.

Policy Effective:  
June 1, 2022- June 1, 2023



Presented by:

**Besnard Insurance**

3000 Bayport Drive, Suite 400

Tampa, FL 33607

Phone: 813-287-1721 FAX: 813-287-1850



**NAMED INSURED AND EXPOSURES****RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.****Named Insured Schedule:**

<b>Named Insured</b>	<b>FEIN</b>
Ronald McDonald House Charities of Tampa Bay, Inc.	59-1835985

**Exposures:**

<b>Address</b>	<b>2022 Exposure Description</b>	<b>2022 Exposure</b>
<b>All Locations</b>	Building	\$6,725,000
	Business Personal Property	\$970,000
	Business Income/Extra Expense	\$670,000
	<b>Property Total Insured Value</b>	<b>\$8,365,000</b>

## PREMIUM SUMMARY

### RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY INC.

Property:	2021	2022
Carrier:	Mt. Hawley Insurance Co.	Mt. Hawley Insurance Co.
A.M. Best Rating	A+ (Superior)	A+ (Superior)
Premium	\$39,291.00	\$51,236.00
Taxes/Fees/Surcharges	\$1,977.30	\$2,828.30
<b>Total Cost</b>	<b>\$41,443.30</b>	<b>\$54,064.30</b>
General Liability & Improper Sexual Abuse:	2021	2022
Carrier:	Alliance of Non-Profits	Alliance of Non-Profits
A.M. Best Rating	A+ (Excellent)	A+ (Excellent)
<b>Total Cost</b>	<b>\$7,334.00</b>	<b>\$7,311.56</b>
Business Auto: (HNOA)	2021	2022
Carrier:	Alliance of Non-Profits	Alliance of Non-Profits
A.M. Best Rating	A (Excellent)	A (Excellent)
<b>Total Cost</b>	<b>\$250.00</b>	<b>\$250.00</b>
Crime:	2021	2022
Carrier:	Federal Insurance Co.	Federal Insurance Co.
A.M. Best Rating	A++ (Superior)	A++ (Superior)
<b>Total Cost</b>	<b>\$283.00</b>	<b>\$283.00</b>
Cyber:	2021	2022
Carrier:	Lloyd's of London	Lloyd's of London
A.M. Best Rating	A+ (Excellent)	A+ (Excellent)
Premium	\$1,680.00	\$1,750.00
Taxes/Fees/Surcharges	\$40.00	\$127.50
<b>Total Cost</b>	<b>\$1,720.00</b>	<b>\$1,877.50</b>
Umbrella:	2021	2022
Carrier:	Landmark American	Landmark American
A.M. Best Rating	A+ (Excellent)	A+ (Excellent)
Premium	\$4,300.00	\$4,300.00
Taxes/Fees/Surcharges	\$219.30	\$219.30
<b>Total Cost</b>	<b>\$4,519.30</b>	<b>\$4,519.30</b>
Directors & Officers:	2021	2022
Carrier:	Philadelphia	Philadelphia
A.M. Best Rating	A+ (Excellent)	A+ (Excellent)
<b>Total Cost</b>	<b>\$2,909.00</b>	<b>\$3,013.95</b>
<b>TOTAL:</b>	<b>\$58,458.60</b>	<b>\$71,319.61</b>

## PROPERTY

## RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.

Location	Description	Renewal	Deductible
835 7 <sup>th</sup> Street (Night Manager's House)	Building	\$225,000	\$5,000
	Business Personal Property	\$20,000	\$5,000
	Business Income & Extra Expense	\$20,000	Actual Loss Sustained
702 8 <sup>th</sup> Avenue (St. Pete West -All Children's)	Building	\$1,500,000	\$5,000
	Business Personal Property	\$170,000	\$5,000
	Business Income & Extra Expense	\$150,000	Actual Loss Sustained
35 Columbia Dr. (Tampa General)	Building	\$1,500,000	\$5,000
	Business Personal Property	\$210,000	\$5,000
	Business Income & Extra Expense	\$150,000	Actual Loss Sustained
28 Columbia Dr. (Storage)	Building	\$200,000	\$5,000
	Business Personal Property	N/A	N/A
	Business Income & Extra Expense	\$10,000	Actual Loss Sustained
401 7 <sup>th</sup> Avenue (St. Pete East-All Children's)	Building	\$2,800,000	\$5,000
	Business Personal Property	\$400,000	\$5,000
	Business Income & Extra Expense	\$250,000	Actual Loss Sustained
30 Columbia Dr. (Night Manager's House)	Building	\$200,000	\$5,000
	Business Personal Property	\$20,000	\$5,000
	Business Income & Extra Expense	\$20,000	Actual Loss Sustained
601 5 <sup>th</sup> Street (St. Pete Central)	Building	N/A	N/A
	Business Personal Property	\$100,000	\$5,000
	Business Income & Extra Expense	\$50,000	Actual Loss Sustained
35 Davis Blvd. (Administration Office)	Building	\$300,000	\$5,000
	Business Personal Property	\$50,000	\$5,000
	Business Income & Extra Expense	\$20,000	\$5,000
<b>TOTAL INSURED VALUE (TIV)</b>	<b>Building</b>	<b>\$6,725,000</b>	
	<b>Business Personal Property</b>	<b>\$970,000</b>	
	<b>Business Income &amp; Extra Expense</b>	<b>\$670,000</b>	
	<b>TOTAL</b>	<b>\$8,365,000</b>	



<b>Coverage Terms &amp; Conditions</b>	
Perils Covered	Special Excluding Flood & Earthquake
Valuation	Replacement Cost
Co-Insurance	<b>N/A</b>
Business Income & Extra Expense Valuation	Actual Loss Sustained
All Other Perils Deductible	\$5,000 per occurrence Except:
All Other Wind/Hail Deductible	\$25,000 per Occurrence
Named Storm Deductible	3% of TIV per Location at the time of loss or damage subject to a \$50,000 minimum per occurrence

<b>Additional Terms and Conditions</b>
35% Minimum Earned Premium
75% Minimum Earned Premium if effective for 50 or more days during June 1 through November 1
Terrorism coverage can be added for an additional premium of \$3,500 plus taxes & fees
Equipment Breakdown Included
Protective Safeguards: <ul style="list-style-type: none"> <li>• BR-1- Central Station Automatic Burglar Alarm</li> <li>• SD-1- Smoke Detector Device</li> </ul>
Roof, Roof Coatings, Roof Canopies, or any other materials or components used in conjunction with roof construction or roof re-covering including, but not limited to shingles, shakes, flashing, insulation, and membrane(s), if, at the time of loss, the roof is determined to be over 15 years old will be Actual Cash Value.
Asbestos Exclusion
Communicable Disease Exclusion
Cyber and Computer Related Loss Exclusion
Exclusion of Cosmetic Damage to Roof Surfacing
Nuclear, Biological, Chemical or Radioactive Exclusion
Total Pollution Exclusion
Water Exclusion