

GRANT AGREEMENT

BY AND BETWEEN

PINELLAS COMMUNITY FOUNDATION

AND

RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.

THIS GRANT AGREEMENT (hereinafter “**Agreement**”), effective upon the last date executed below, by and between **PINELLAS COMMUNITY FOUNDATION**, a public charitable foundation established by Trust Agreement Dated January 1, 1969, as may have been amended from time to time, whose address is 17755 US Highway 19 North, Suite 150, Clearwater Florida 33764, (hereinafter, “**AGENCY**”) and **RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.**, whose address is 35 Davis Blvd Tampa, FL 33606 (hereinafter “**GRANTEE**”).

WITNESSETH:

WHEREAS, in response to the emergence of a novel coronavirus and the respiratory disease it causes (hereinafter, “**COVID-19**”), the World Health Organization (hereinafter, “**WHO**”) has officially characterized COVID-19 as a pandemic that constitutes a Public Health Emergency of International Concern; and

WHEREAS, on March 1, 2020, Governor Ron DeSantis issued Executive Order Number 20-51, declaring that appropriate measures to control the spread of COVID-19 in the State of Florida are necessary, and accordingly the State Surgeon General and State Health Officer declared that a Public Health Emergency exists in the State of Florida; and

WHEREAS, on March 9, 2020, Governor Ron DeSantis issued Executive Order Number 20-52 declaring a State of Emergency for the state of Florida in furtherance of efforts to respond to and mitigate the effects of COVID-19 throughout the state; and

WHEREAS, the Pinellas County Board of County Commissioners (hereinafter, “**Board**”) passed Resolution 20-60 to define, expand, and add critical programs and services to mitigate the devastating impacts of COVID-19 on Pinellas County residents; and

WHEREAS, nonprofit community partners have seen an increased demand for many services and assistance in response to impacts from COVID-19, particularly in the areas of food programs, homelessness, behavioral health, and legal assistance for evictions; and

WHEREAS, as a direct result of the COVID-19 Public Health Emergency, many individuals and families find themselves in precarious financial situations within Pinellas County, without expanded access to critical services leading to food insecurity, housing insecurity, and behavioral health challenges; and

WHEREAS, the threat to these vulnerable individuals and families constitutes a significant threat to public safety and welfare requiring rapid expansion of vital services to meet local needs; and

WHEREAS, **AGENCY** is a subrecipient of pass-thru funds awarded by the U.S. Treasury Department (hereinafter, “Treasury”) to Pinellas County (hereinafter, “County”) made available under section 601(a) of the Social Security Act as added by section 5001 of the CARES Act (hereinafter, “Coronavirus Relief Fund”); and

WHEREAS, the County in partnership with **AGENCY** wishes to quickly expand services in priority areas that mitigate COVID-19 related impacts within the community such as food

insecurity, housing insecurity, and access to behavioral health service through the Pinellas CARES Critical Service Expansion Program; and

WHEREAS, AGENCY has determined that **GRANTEE** has the experience and capacity to quickly administer and deliver awarded funds to assist in the goal of expanding services in one or more of the priority areas that mitigate COVID-19 related impacts within the community;

NOW THEREFORE, the parties hereto, mutually agree as follows:

1. Specific Grant Information:

This project shall be undertaken and accomplished in accordance with the terms and conditions specified herein and the Appendices named below, which are attached hereto and by reference incorporated herein:

a) Grantee's Name: **Ronald McDonald House Charities of Tampa Bay, Inc.**

b) Grantee's Contact and Notice Information:

Primary Contact Name: **Lisa Suprenand, Executive Director**

Address: **35 Davis Blvd Tampa, FL 33606**

Phone Number: **813-258-6430**

Grantee's Data Universal Numbering System (DUNS) number: **618424923**

c) Federal Award Identification Number: **Direct payment from the Department of the Treasury ('Treasury') pursuant to section 601(b) of the Social Security Act, as amended by section 5001 of the Coronavirus Aid, Relief, and Economic Security Act, Pub. L. No. 116-136, div. A, Title V (Mar. 27, 2020).**

d) Federal Award Date: **March 27, 2020**

e) Period of Grant Performance, Start and End Date: **November 19, 2020 - December 30, 2020**

g) Amount of Funds Awarded: **\$177,944.94** (hereinafter, “Awarded Funds”).

h) Name of Federal Awarding Agency, Pass-Through Entity, and Contact Information for Awarding Official of the Pass-Through Entity:

Federal Awarding Agency:

United States Department of Treasury

Pass-Through Entity:

Pinellas Community Foundation

Contact Information for Awarding Official of the Pass-Through Entity:

Duggan Cooley, CEO, Pinellas Community Foundation

17755 US Highway 19 N, Suite 150

Clearwater, FL 33764

i) CFDA Number and Name

CFDA Number (at time of disbursement): **21.019**

CFDA Name: **Coronavirus Relief Fund (CRF)**

j) Indirect Cost Rate for GRANTEE portion of the Federal Award: **0% of funding for expanded local services**

2. Scope of Services:

The **GRANTEE** shall administer the Pinellas CARES Critical Service expansion Program funds awarded from the **AGENCY** consistent with the purpose identified in the **GRANTEE’s** application for award of funds (attached as Appendix 4) and which are consistent with the purpose of mitigating COVID-19 related impacts within the community, including food insecurity, housing insecurity and or behavioral health access for COVID-19 affected residents.

- a) **GRANTEE** shall administer funding in an amount up to **one hundred seventy-seven thousand nine hundred forty-nine dollars and 94/100 cents (\$177,944.94)** for expanded local services with up to 0% or \$0.00 allowed for indirect costs.
- b) Of this funding, **GRANTEE** shall also be allowed up to thirty-three thousand five hundred fifty-four dollars and 14/100 cents (\$33,554.14) for allowable reimbursement of COVID-19 related costs which were incurred after 03/01/2020 but before the start of the grant performance period. The funds will only be provided, should appropriate documentation be provided by **GRANTEE**.
- c) **GRANTEE** agrees to monitor and deliver these funds pursuant to the following requirements:
 - i. Compliance with all rules and guidelines of the CARES Act including certifications and/or attestations of compliance where appropriate.
 - ii. Compliance with Appendix 1 - CARES Act Guidance and Requirements.
 - iii. Compliance with Appendix 2 – Attestation.
 - iv. Basic weekly reporting of service numbers by type of service and expanded monthly reporting of services, trends, expenditures, and other programmatic information.
 - v. Maintenance of service level information as appropriate for reporting upon request by the **AGENCY**, including services provided, outcomes and accounting of expenditures.
 - vi. **GRANTEE** understands and agrees that it may be required to adapt and/or respond during hurricane-related emergencies to help meet expanded needs and challenges of COVID-19.

vii. **GRANTEE** understands that priority service areas may be adjusted by written notice of the **AGENCY**.

3. Term of Agreement.

The services of the **GRANTEE** shall commence upon execution and the agreement shall expire on December 30, 2020. The expiration date of this Agreement may be extended, by mutual agreement of the parties in writing. This option shall be exercised only if all terms and conditions remain the same.

4. Compensation.

a) The **AGENCY** agrees to provide **GRANTEE** an amount not to exceed **one hundred seventy-seven thousand nine hundred forty-nine dollars and 94/100 cents (\$177,944.94)** as an award of the Pinellas CARES Nonprofit Partnership Fund for the services described in Section 2 of this Agreement. Up to Zero Dollars and 00/100 cents dollars (\$0.00) equivalent to 0% of the funding may be allowed for approved indirect costs in association with this program. The remainder of the funding will be for competitively awarded expansion of services as defined.

b) **GRANTEE** shall maintain a Budget Plan (Appendix 4) for anticipated direct costs which may be adjusted across budget categories as necessary to address direct costs incurred. Budget Plan modifications that do not result in an increase of funding, change the purpose of this Agreement, or otherwise amend the terms of this Agreement, shall be submitted in the format prescribed and provided by the **AGENCY** without the need to amend this Agreement. **GRANTEE** shall provide such changes to **AGENCY** in writing, and **AGENCY** will approve or deny such changes in writing.

c) The **AGENCY** shall determine which expenses in the Budget Plan (Appendix 4)

may be paid as an advance to the **GRANTEE**, if any, and which expenses will be paid on a cost-reimbursement basis, with the **GRANTEE** to submit invoices with supporting documentation to justify the reimbursement of expenses. If any amount is paid as an advance payment to **GRANTEE**, the **GRANTEE** must provide sufficient documentation of usage of the funds for allowed purposes under this agreement in order to receive any future payments.

d) Any funds expended in violation of this Agreement or in violation of appropriate Federal, State, and **AGENCY** requirements shall be refunded in full to the **AGENCY**. If this Agreement is still in force, future payments shall be withheld by the **AGENCY**.

5. Performance Measures.

The **GRANTEE** agrees to submit weekly reports on awards to **AGENCY** including name of **GRANTEE**, purpose of award, amount of award, and service numbers, as well as monthly expanded reports that demonstrate services delivered and service trends, and outcomes to **AGENCY**. The **AGENCY** reserves the right to request additional data elements, performance measures, or reports as necessary to ensure that the overall programmatic purpose is demonstrated, quantified, and achieved. This report shall be submitted to the **AGENCY** weekly or monthly, as defined and never later than five (5) business days if specifically requested by **AGENCY**. The report formats shall be prescribed and provided by the **AGENCY**.

6. Data Sharing.

The **GRANTEE** agrees to share data with the **AGENCY** as necessary for service validation, trend review, and performance monitoring.

7. Insurance.

GRANTEE will be required to maintain appropriate insurance to cover the Services funded for this Agreement. Before providing any funds under this Agreement, **AGENCY** will require

that **GRANTEE** provide it with proof of insurance covering the Services funded and with policy limits and deductible deemed appropriate by **AGENCY**. Whether **GRANTEE** has acceptable insurance coverage with appropriate limits and deductible is within the sole discretion of the **AGENCY**. Said insurance must remain in full force and effect during the term of this Agreement and may be not changed without written approval of **AGENCY**. Failure to maintain the insurance approved by **AGENCY** or any changes to the approved insurance without approval of **AGENCY** will result in termination of this Agreement.

8. Monitoring.

GRANTEE will work with **AGENCY** to meet the requirements of 2 C.F.R. § 200.328 (Monitoring and reporting program performance). This may include, but is not limited to, the following:

- a) The monitoring requirements set forth in Appendix 3 – Minimum Monitoring Requirements.
- b) **GRANTEE** will work with the **AGENCY** to establish policies and procedures as required.
- c) **GRANTEE** will cooperate in site visits including, but not limited to, review of staff, fiscal and client records, programmatic documents, and will provide related information at any reasonable time.
- d) **GRANTEE** will submit other reports and information in such formats and at such times as may be prescribed by the **AGENCY**.
- e) All monitoring reports will be as detailed as may be reasonably requested by the **GRANTEE** and will be deemed incomplete if not satisfactory to the **AGENCY** as determined in its sole reasonable discretion. Reports will contain the information or be in the format as may be

requested by the **AGENCY**.

9. Special Situations.

GRANTEE agrees to inform **AGENCY** within one (1) business day of any circumstances or events which may reasonably be considered to jeopardize its capability to continue to meet its obligations under the terms of this Agreement. Incidents may include, but are not limited to, those resulting in injury, media coverage or public reaction that may have an impact on the **AGENCY'S** or **GRANTEE'S** ability to protect and serve its participants, or other significant effect on the **AGENCY** or **GRANTEE**. Incidents shall be reported to the designated **AGENCY** contact below by phone or email only. Incident report information shall not include any identifying information of the participant.

10. Amendment/Modification.

In addition to applicable federal, state and local statutes and regulations, this Agreement expresses the entire understanding of the parties concerning all matters covered herein. No addition to, or alteration of, the terms of this Agreement, whether by written or verbal understanding of the parties, their officers, agents or employees, shall be valid unless made in the form of a written amendment to this Agreement and formally approved by the parties.

11. Closeout

a) Upon termination in whole or in part, the parties hereto remain responsible for compliance with the requirements in 2 C.F.R. Part 200.343 (Closeout) and 2 C.F.R. Part 200.344 (Post-closeout adjustments and continuing responsibilities).

b) This Agreement will not terminate, unless terminated as provided in Section 11, until Closeout is completed consistent with requirements detailed in the Appendices attached hereto, and to the satisfaction of the **AGENCY**. Such requirements shall include but are not limited

to submitting final reports and providing program deliverables and closeout information as requested by **AGENCY**, and/or the US Treasury Department or its authorized representatives, and reconciliation of program funding.

c) All invoices and requests for reimbursement shall be submitted within 30 days following the end of the project and budget period.

d) All un-spent funds must be reimbursed to the **AGENCY** by the **GRANTEE** by January 31, 2021.

e) This provision shall survive the expiration or termination of this Agreement.

12. Termination.

a) If the **GRANTEE** fails to fulfill or abide by any of the provisions of this Agreement, **GRANTEE** shall be considered in material breach of the Agreement. Where a material breach can be corrected, **GRANTEE** shall be given thirty (30) days to cure said breach. If **GRANTEE** fails to cure, or if the breach is of the nature that the harm caused cannot be undone, **AGENCY** may immediately terminate this Agreement, with cause, upon notice in writing to the **GRANTEE**.

b) In the event the **GRANTEE** uses any funds provided by this Agreement for any purpose or program other than authorized under this Agreement, the **GRANTEE** must repay such amount to the **AGENCY** and may in the **AGENCY'S** sole discretion, be deemed to have waived the right to additional funds under this Agreement.

c) In the event sufficient budgeted funds are not available for a new fiscal period or are otherwise encumbered, the **AGENCY** shall notify the **GRANTEE** of such occurrence and the Agreement shall terminate on the last day of the then current fiscal period without penalty or expense to the **AGENCY**.

d) The **AGENCY** or the United States Department of Treasury may terminate this agreement in accordance with 2 C.F.R. § 200.339 (Termination).

13. Assignment/Subcontracting.

a) This Agreement, and any rights or obligations hereunder, shall not be assigned, transferred or delegated to any other person or entity. Any purported assignment in violation of this section shall be null and void.

b) The **GRANTEE** is fully responsible for completion of the Services required by this Agreement and for completion of all subcontractor work, if authorized as provided herein. The **GRANTEE** shall not subcontract any work under this Agreement to any subcontractor other than the subcontractors specified in the proposal and previously approved by the **AGENCY**, without the prior written consent of the **AGENCY**, which shall be determined by the **AGENCY** in its sole discretion.

14. Indemnification.

The **GRANTEE** agrees to indemnify, pay the cost of defense, including attorney's fees, and hold harmless the **AGENCY**, its officers, employees and agents from all damages, suits, actions or claims, including reasonable attorney's fees incurred by the **AGENCY**, of any character brought on account of any injuries or damages received or sustained by any person, persons, or property, or in any way relating to or arising from the Agreement; or on account of any act or omission, neglect or misconduct of **GRANTEE**; or by, or on account of, any claim or amounts recovered under the Workers' Compensation Law or of any other laws, regulations, ordinance, order or decree; or arising from or by reason of any actual or claimed trademark, patent or copyright infringement or litigation based thereon; except only such injury or damage as shall have been occasioned by the sole negligence of the **AGENCY**.

15. Business Practices.

- a) The **GRANTEE** must utilize financial procedures in accordance with generally accepted accounting procedures and Florida Statutes, including adequate supporting documents, to account for the use of the funds provided by the **AGENCY**.
- b) The **GRANTEE** must retain all records (programmatic, property, personnel, and financial) relating to this Agreement for five (5) years after final payment is made.
- c) All **GRANTEE** records relating to this Agreement are subject to audit by the federal government or its representatives, or the **AGENCY** and its representatives.

16. Nondiscrimination.

- a) The **GRANTEE** shall not discriminate against any applicant for employment or employee with respect to hire, tenure, terms, conditions or privileges of employment or any matter directly or indirectly related to employment or against any client because of age, sex, race, ethnicity, color, religion, national origin, disability, marital status, or sexual orientation.
- b) The **GRANTEE** shall not discriminate against any person on the basis of age, sex, race, ethnicity, color, religion, national origin, disability, marital status or sexual orientation in admission, treatment, or participation in its programs, services and activities.
- c) The **GRANTEE** shall, during the performance of this Agreement, comply with all applicable provisions of federal, state and local laws and regulations pertaining to prohibited discrimination.

17. Independent Contractor.

It is expressly understood and agreed by the parties that **GRANTEE** is at all times hereunder acting and performing as an independent contractor and not as an agent, servant, or

employee of the **AGENCY**. No agent, employee, or servant of the **GRANTEE** shall be, or shall be deemed to be, the agent or servant of the **AGENCY**. None of the benefits provided by the **AGENCY** to their employees including, but not limited to, Worker's Compensation Insurance and Unemployment Insurance are available from **AGENCY** to the employees, agents, or servants of the **GRANTEE**

18. Additional Funding.

Funds from this Agreement may not be used as the matching portion for any federal grant except in the manner provided by Federal and State law and applicable Federal and State rules and regulations. The **GRANTEE** agrees to make all reasonable efforts to obtain funding from additional sources wherever said **GRANTEE** may qualify. Should this Agreement reflect a required match, documentation of said match is required to be provided to the **AGENCY**.

19. Governing Law.

The laws of the State of Florida shall govern this Agreement.

20. Conformity to the Law.

The **GRANTEE** shall comply with all federal, state and local laws and ordinances and any rules or regulations adopted thereunder, including but not limited to section 601(a) of the Social Security Act as added by section 5001 of the CARES Act and regulations applicable thereto.

21. Prior Agreement, Waiver, and Severability.

This Agreement supersedes any prior Agreements between the Parties and is the sole basis for agreement between the Parties. The waiver of either party of a violation or default of any provision of this Agreement shall not operate as, or be construed to be, a waiver of any subsequent violation or default hereof. If any provision, or any portion thereof, contained in this Agreement

is held unconstitutional, invalid, or unenforceable, the remainder of this Agreement, or portion thereof, shall be deemed severable, shall not be affected, and shall remain in full force and effect.

22. Agreement Management.

Pinellas Community Foundation designates the following person(s) as the liaison for the

AGENCY:

Duggan Cooley, CEO
Pinellas Community Foundation
17755 US Highway 19 North, Suite 150
Clearwater FL 33764
727-531-0058

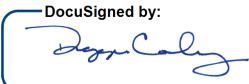
GRANTEE designates the following person(s) as the liaison for the **GRANTEE:**

Lisa Suprenand, Executive Director
Ronald McDonald House Charities Tampa Bay
35 Davis Blvd
Tampa, FL 33606
813-258-6430

SIGNATURE PAGE FOLLOWS

IN WITNESS WHEREOF, the parties hereto have caused this instrument to be executed on the day and year written below.

Pinellas Community Foundation

By: 
528C89A7304941D...

Duggan Cooley
CEO

12/4/2020
Date: _____


GRANTEE: Ronald McDonald House Charities of Tampa Bay, Inc.

By: 
48B98D3BF6F840E...

Edward Ameen, Chairman of the Board
eameen.ea@gmail.com

12/4/2020
Date: _____

GRANTEE: Ronald McDonald House Charities of Tampa Bay, Inc.

By: 
1646512A7D3A454...

Lisa Suprenand, Executive Director
lsuprenand@rmhctampabay.org

12/4/2020
Date: _____

Schedule of Appendices

Appendix 1 – CARES Act Guidance and Requirements

Appendix 2 – Attestation

Appendix 3 – Minimum Monitoring Requirements

Appendix 4 – Application for Funding (including budget plan)

Appendix 1 - CARES Act Guidance and Requirements

- Coronavirus Relief Fund, Guidance for State, Territorial, Local,
and Tribal Governments
 - Coronavirus Relief Fund Frequently Asked Questions
 - Coronavirus Relief Fund Reporting and Record Retention
Requirements

Coronavirus Relief Fund
Guidance for State, Territorial, Local, and Tribal
Governments
Updated June 30, 2020

Coronavirus Relief Fund
Guidance for State, Territorial, Local, and Tribal Governments
Updated June 30, 2020¹

The purpose of this document is to provide guidance to recipients of the funding available under section 601(a) of the Social Security Act, as added by section 5001 of the Coronavirus Aid, Relief, and Economic Security Act (“CARES Act”). The CARES Act established the Coronavirus Relief Fund (the “Fund”) and appropriated \$150 billion to the Fund. Under the CARES Act, the Fund is to be used to make payments for specified uses to States and certain local governments; the District of Columbia and U.S. Territories (consisting of the Commonwealth of Puerto Rico, the United States Virgin Islands, Guam, American Samoa, and the Commonwealth of the Northern Mariana Islands); and Tribal governments.

The CARES Act provides that payments from the Fund may only be used to cover costs that—

1. are necessary expenditures incurred due to the public health emergency with respect to the Coronavirus Disease 2019 (COVID-19);
2. were not accounted for in the budget most recently approved as of March 27, 2020 (the date of enactment of the CARES Act) for the State or government; and
3. were incurred during the period that begins on March 1, 2020, and ends on December 30, 2020.²

The guidance that follows sets forth the Department of the Treasury’s interpretation of these limitations on the permissible use of Fund payments.

Necessary expenditures incurred due to the public health emergency

The requirement that expenditures be incurred “due to” the public health emergency means that expenditures must be used for actions taken to respond to the public health emergency. These may include expenditures incurred to allow the State, territorial, local, or Tribal government to respond directly to the emergency, such as by addressing medical or public health needs, as well as expenditures incurred to respond to second-order effects of the emergency, such as by providing economic support to those suffering from employment or business interruptions due to COVID-19-related business closures.

Funds may not be used to fill shortfalls in government revenue to cover expenditures that would not otherwise qualify under the statute. Although a broad range of uses is allowed, revenue replacement is not a permissible use of Fund payments.

The statute also specifies that expenditures using Fund payments must be “necessary.” The Department of the Treasury understands this term broadly to mean that the expenditure is reasonably necessary for its intended use in the reasonable judgment of the government officials responsible for spending Fund payments.

Costs not accounted for in the budget most recently approved as of March 27, 2020

The CARES Act also requires that payments be used only to cover costs that were not accounted for in the budget most recently approved as of March 27, 2020. A cost meets this requirement if either (a) the

¹ This version updates the guidance provided under “Costs incurred during the period that begins on March 1, 2020, and ends on December 30, 2020”.

² See Section 601(d) of the Social Security Act, as added by section 5001 of the CARES Act.

cost cannot lawfully be funded using a line item, allotment, or allocation within that budget *or* (b) the cost is for a substantially different use from any expected use of funds in such a line item, allotment, or allocation.

The “most recently approved” budget refers to the enacted budget for the relevant fiscal period for the particular government, without taking into account subsequent supplemental appropriations enacted or other budgetary adjustments made by that government in response to the COVID-19 public health emergency. A cost is not considered to have been accounted for in a budget merely because it could be met using a budgetary stabilization fund, rainy day fund, or similar reserve account.

Costs incurred during the period that begins on March 1, 2020, and ends on December 30, 2020

Finally, the CARES Act provides that payments from the Fund may only be used to cover costs that were incurred during the period that begins on March 1, 2020, and ends on December 30, 2020 (the “covered period”). Putting this requirement together with the other provisions discussed above, section 601(d) may be summarized as providing that a State, local, or tribal government may use payments from the Fund only to cover previously unbudgeted costs of necessary expenditures incurred due to the COVID-19 public health emergency during the covered period.

Initial guidance released on April 22, 2020, provided that the cost of an expenditure is incurred when the recipient has expended funds to cover the cost. Upon further consideration and informed by an understanding of State, local, and tribal government practices, Treasury is clarifying that for a cost to be considered to have been incurred, performance or delivery must occur during the covered period but payment of funds need not be made during that time (though it is generally expected that this will take place within 90 days of a cost being incurred). For instance, in the case of a lease of equipment or other property, irrespective of when payment occurs, the cost of a lease payment shall be considered to have been incurred for the period of the lease that is within the covered period, but not otherwise. Furthermore, in all cases it must be necessary that performance or delivery take place during the covered period. Thus the cost of a good or service received during the covered period will not be considered eligible under section 601(d) if there is no need for receipt until after the covered period has expired.

Goods delivered in the covered period need not be used during the covered period in all cases. For example, the cost of a good that must be delivered in December in order to be available for use in January could be covered using payments from the Fund. Additionally, the cost of goods purchased in bulk and delivered during the covered period may be covered using payments from the Fund if a portion of the goods is ordered for use in the covered period, the bulk purchase is consistent with the recipient’s usual procurement policies and practices, and it is impractical to track and record when the items were used. A recipient may use payments from the Fund to purchase a durable good that is to be used during the current period and in subsequent periods if the acquisition in the covered period was necessary due to the public health emergency.

Given that it is not always possible to estimate with precision when a good or service will be needed, the touchstone in assessing the determination of need for a good or service during the covered period will be reasonableness at the time delivery or performance was sought, *e.g.*, the time of entry into a procurement contract specifying a time for delivery. Similarly, in recognition of the likelihood of supply chain disruptions and increased demand for certain goods and services during the COVID-19 public health emergency, if a recipient enters into a contract requiring the delivery of goods or performance of services by December 30, 2020, the failure of a vendor to complete delivery or services by December 30, 2020, will not affect the ability of the recipient to use payments from the Fund to cover the cost of such goods or services if the delay is due to circumstances beyond the recipient’s control.

This guidance applies in a like manner to costs of subrecipients. Thus, a grant or loan, for example, provided by a recipient using payments from the Fund must be used by the subrecipient only to purchase (or reimburse a purchase of) goods or services for which receipt both is needed within the covered period and occurs within the covered period. The direct recipient of payments from the Fund is ultimately responsible for compliance with this limitation on use of payments from the Fund.

Nonexclusive examples of eligible expenditures

Eligible expenditures include, but are not limited to, payment for:

1. Medical expenses such as:
 - COVID-19-related expenses of public hospitals, clinics, and similar facilities.
 - Expenses of establishing temporary public medical facilities and other measures to increase COVID-19 treatment capacity, including related construction costs.
 - Costs of providing COVID-19 testing, including serological testing.
 - Emergency medical response expenses, including emergency medical transportation, related to COVID-19.
 - Expenses for establishing and operating public telemedicine capabilities for COVID-19-related treatment.
2. Public health expenses such as:
 - Expenses for communication and enforcement by State, territorial, local, and Tribal governments of public health orders related to COVID-19.
 - Expenses for acquisition and distribution of medical and protective supplies, including sanitizing products and personal protective equipment, for medical personnel, police officers, social workers, child protection services, and child welfare officers, direct service providers for older adults and individuals with disabilities in community settings, and other public health or safety workers in connection with the COVID-19 public health emergency.
 - Expenses for disinfection of public areas and other facilities, *e.g.*, nursing homes, in response to the COVID-19 public health emergency.
 - Expenses for technical assistance to local authorities or other entities on mitigation of COVID-19-related threats to public health and safety.
 - Expenses for public safety measures undertaken in response to COVID-19.
 - Expenses for quarantining individuals.
3. Payroll expenses for public safety, public health, health care, human services, and similar employees whose services are substantially dedicated to mitigating or responding to the COVID-19 public health emergency.
4. Expenses of actions to facilitate compliance with COVID-19-related public health measures, such as:
 - Expenses for food delivery to residents, including, for example, senior citizens and other vulnerable populations, to enable compliance with COVID-19 public health precautions.
 - Expenses to facilitate distance learning, including technological improvements, in connection with school closings to enable compliance with COVID-19 precautions.
 - Expenses to improve telework capabilities for public employees to enable compliance with COVID-19 public health precautions.

- Expenses of providing paid sick and paid family and medical leave to public employees to enable compliance with COVID-19 public health precautions.
 - COVID-19-related expenses of maintaining state prisons and county jails, including as relates to sanitation and improvement of social distancing measures, to enable compliance with COVID-19 public health precautions.
 - Expenses for care for homeless populations provided to mitigate COVID-19 effects and enable compliance with COVID-19 public health precautions.
5. Expenses associated with the provision of economic support in connection with the COVID-19 public health emergency, such as:
- Expenditures related to the provision of grants to small businesses to reimburse the costs of business interruption caused by required closures.
 - Expenditures related to a State, territorial, local, or Tribal government payroll support program.
 - Unemployment insurance costs related to the COVID-19 public health emergency if such costs will not be reimbursed by the federal government pursuant to the CARES Act or otherwise.
6. Any other COVID-19-related expenses reasonably necessary to the function of government that satisfy the Fund's eligibility criteria.

Nonexclusive examples of ineligible expenditures³

The following is a list of examples of costs that would *not* be eligible expenditures of payments from the Fund.

1. Expenses for the State share of Medicaid.⁴
2. Damages covered by insurance.
3. Payroll or benefits expenses for employees whose work duties are not substantially dedicated to mitigating or responding to the COVID-19 public health emergency.
4. Expenses that have been or will be reimbursed under any federal program, such as the reimbursement by the federal government pursuant to the CARES Act of contributions by States to State unemployment funds.
5. Reimbursement to donors for donated items or services.
6. Workforce bonuses other than hazard pay or overtime.
7. Severance pay.
8. Legal settlements.

³ In addition, pursuant to section 5001(b) of the CARES Act, payments from the Fund may not be expended for an elective abortion or on research in which a human embryo is destroyed, discarded, or knowingly subjected to risk of injury or death. The prohibition on payment for abortions does not apply to an abortion if the pregnancy is the result of an act of rape or incest; or in the case where a woman suffers from a physical disorder, physical injury, or physical illness, including a life-endangering physical condition caused by or arising from the pregnancy itself, that would, as certified by a physician, place the woman in danger of death unless an abortion is performed. Furthermore, no government which receives payments from the Fund may discriminate against a health care entity on the basis that the entity does not provide, pay for, provide coverage of, or refer for abortions.

⁴ See 42 C.F.R. § 433.51 and 45 C.F.R. § 75.306.

Coronavirus Relief Fund
Frequently Asked Questions
Updated as of July 8, 2020

**Coronavirus Relief Fund
Frequently Asked Questions
Updated as of July 8, 2020**

The following answers to frequently asked questions supplement Treasury’s Coronavirus Relief Fund (“Fund”) Guidance for State, Territorial, Local, and Tribal Governments, dated April 22, 2020, (“Guidance”).¹ Amounts paid from the Fund are subject to the restrictions outlined in the Guidance and set forth in section 601(d) of the Social Security Act, as added by section 5001 of the Coronavirus Aid, Relief, and Economic Security Act (“CARES Act”).

Eligible Expenditures

Are governments required to submit proposed expenditures to Treasury for approval?

No. Governments are responsible for making determinations as to what expenditures are necessary due to the public health emergency with respect to COVID-19 and do not need to submit any proposed expenditures to Treasury.

The Guidance says that funding can be used to meet payroll expenses for public safety, public health, health care, human services, and similar employees whose services are substantially dedicated to mitigating or responding to the COVID-19 public health emergency. How does a government determine whether payroll expenses for a given employee satisfy the “substantially dedicated” condition?

The Fund is designed to provide ready funding to address unforeseen financial needs and risks created by the COVID-19 public health emergency. For this reason, and as a matter of administrative convenience in light of the emergency nature of this program, a State, territorial, local, or Tribal government may presume that payroll costs for public health and public safety employees are payments for services substantially dedicated to mitigating or responding to the COVID-19 public health emergency, unless the chief executive (or equivalent) of the relevant government determines that specific circumstances indicate otherwise.

The Guidance says that a cost was not accounted for in the most recently approved budget if the cost is for a substantially different use from any expected use of funds in such a line item, allotment, or allocation. What would qualify as a “substantially different use” for purposes of the Fund eligibility?

Costs incurred for a “substantially different use” include, but are not necessarily limited to, costs of personnel and services that were budgeted for in the most recently approved budget but which, due entirely to the COVID-19 public health emergency, have been diverted to substantially different functions. This would include, for example, the costs of redeploying corrections facility staff to enable compliance with COVID-19 public health precautions through work such as enhanced sanitation or enforcing social distancing measures; the costs of redeploying police to support management and enforcement of stay-at-home orders; or the costs of diverting educational support staff or faculty to develop online learning capabilities, such as through providing information technology support that is not part of the staff or faculty’s ordinary responsibilities.

Note that a public function does not become a “substantially different use” merely because it is provided from a different location or through a different manner. For example, although developing online instruction capabilities may be a substantially different use of funds, online instruction itself is not a substantially different use of public funds than classroom instruction.

¹ The Guidance is available at <https://home.treasury.gov/system/files/136/Coronavirus-Relief-Fund-Guidance-for-State-Territorial-Local-and-Tribal-Governments.pdf>.

May a State receiving a payment transfer funds to a local government?

Yes, provided that the transfer qualifies as a necessary expenditure incurred due to the public health emergency and meets the other criteria of section 601(d) of the Social Security Act. Such funds would be subject to recoupment by the Treasury Department if they have not been used in a manner consistent with section 601(d) of the Social Security Act.

May a unit of local government receiving a Fund payment transfer funds to another unit of government?

Yes. For example, a county may transfer funds to a city, town, or school district within the county and a county or city may transfer funds to its State, provided that the transfer qualifies as a necessary expenditure incurred due to the public health emergency and meets the other criteria of section 601(d) of the Social Security Act outlined in the Guidance. For example, a transfer from a county to a constituent city would not be permissible if the funds were intended to be used simply to fill shortfalls in government revenue to cover expenditures that would not otherwise qualify as an eligible expenditure.

Is a Fund payment recipient required to transfer funds to a smaller, constituent unit of government within its borders?

No. For example, a county recipient is not required to transfer funds to smaller cities within the county's borders.

Are recipients required to use other federal funds or seek reimbursement under other federal programs before using Fund payments to satisfy eligible expenses?

No. Recipients may use Fund payments for any expenses eligible under section 601(d) of the Social Security Act outlined in the Guidance. Fund payments are not required to be used as the source of funding of last resort. However, as noted below, recipients may not use payments from the Fund to cover expenditures for which they will receive reimbursement.

Are there prohibitions on combining a transaction supported with Fund payments with other CARES Act funding or COVID-19 relief Federal funding?

Recipients will need to consider the applicable restrictions and limitations of such other sources of funding. In addition, expenses that have been or will be reimbursed under any federal program, such as the reimbursement by the federal government pursuant to the CARES Act of contributions by States to State unemployment funds, are not eligible uses of Fund payments.

Are States permitted to use Fund payments to support state unemployment insurance funds generally?

To the extent that the costs incurred by a state unemployment insurance fund are incurred due to the COVID-19 public health emergency, a State may use Fund payments to make payments to its respective state unemployment insurance fund, separate and apart from such State's obligation to the unemployment insurance fund as an employer. This will permit States to use Fund payments to prevent expenses related to the public health emergency from causing their state unemployment insurance funds to become insolvent.

Are recipients permitted to use Fund payments to pay for unemployment insurance costs incurred by the recipient as an employer?

Yes, Fund payments may be used for unemployment insurance costs incurred by the recipient as an employer (for example, as a reimbursing employer) related to the COVID-19 public health emergency if such costs will not be reimbursed by the federal government pursuant to the CARES Act or otherwise.

The Guidance states that the Fund may support a “broad range of uses” including payroll expenses for several classes of employees whose services are “substantially dedicated to mitigating or responding to the COVID-19 public health emergency.” What are some examples of types of covered employees?

The Guidance provides examples of broad classes of employees whose payroll expenses would be eligible expenses under the Fund. These classes of employees include public safety, public health, health care, human services, and similar employees whose services are substantially dedicated to mitigating or responding to the COVID-19 public health emergency. Payroll and benefit costs associated with public employees who could have been furloughed or otherwise laid off but who were instead repurposed to perform previously unbudgeted functions substantially dedicated to mitigating or responding to the COVID-19 public health emergency are also covered. Other eligible expenditures include payroll and benefit costs of educational support staff or faculty responsible for developing online learning capabilities necessary to continue educational instruction in response to COVID-19-related school closures. Please see the Guidance for a discussion of what is meant by an expense that was not accounted for in the budget most recently approved as of March 27, 2020.

In some cases, first responders and critical health care workers that contract COVID-19 are eligible for workers’ compensation coverage. Is the cost of this expanded workers compensation coverage eligible?

Increased workers compensation cost to the government due to the COVID-19 public health emergency incurred during the period beginning March 1, 2020, and ending December 30, 2020, is an eligible expense.

If a recipient would have decommissioned equipment or not renewed a lease on particular office space or equipment but decides to continue to use the equipment or to renew the lease in order to respond to the public health emergency, are the costs associated with continuing to operate the equipment or the ongoing lease payments eligible expenses?

Yes. To the extent the expenses were previously unbudgeted and are otherwise consistent with section 601(d) of the Social Security Act outlined in the Guidance, such expenses would be eligible.

May recipients provide stipends to employees for eligible expenses (for example, a stipend to employees to improve telework capabilities) rather than require employees to incur the eligible cost and submit for reimbursement?

Expenditures paid for with payments from the Fund must be limited to those that are necessary due to the public health emergency. As such, unless the government were to determine that providing assistance in the form of a stipend is an administrative necessity, the government should provide such assistance on a reimbursement basis to ensure as much as possible that funds are used to cover only eligible expenses.

May Fund payments be used for COVID-19 public health emergency recovery planning?

Yes. Expenses associated with conducting a recovery planning project or operating a recovery coordination office would be eligible, if the expenses otherwise meet the criteria set forth in section 601(d) of the Social Security Act outlined in the Guidance.

Are expenses associated with contact tracing eligible?

Yes, expenses associated with contract tracing are eligible.

To what extent may a government use Fund payments to support the operations of private hospitals?

Governments may use Fund payments to support public or private hospitals to the extent that the costs are necessary expenditures incurred due to the COVID-19 public health emergency, but the form such assistance would take may differ. In particular, financial assistance to private hospitals could take the form of a grant or a short-term loan.

May payments from the Fund be used to assist individuals with enrolling in a government benefit program for those who have been laid off due to COVID-19 and thereby lost health insurance?

Yes. To the extent that the relevant government official determines that these expenses are necessary and they meet the other requirements set forth in section 601(d) of the Social Security Act outlined in the Guidance, these expenses are eligible.

May recipients use Fund payments to facilitate livestock depopulation incurred by producers due to supply chain disruptions?

Yes, to the extent these efforts are deemed necessary for public health reasons or as a form of economic support as a result of the COVID-19 health emergency.

Would providing a consumer grant program to prevent eviction and assist in preventing homelessness be considered an eligible expense?

Yes, assuming that the recipient considers the grants to be a necessary expense incurred due to the COVID-19 public health emergency and the grants meet the other requirements for the use of Fund payments under section 601(d) of the Social Security Act outlined in the Guidance. As a general matter, providing assistance to recipients to enable them to meet property tax requirements would not be an eligible use of funds, but exceptions may be made in the case of assistance designed to prevent foreclosures.

May recipients create a “payroll support program” for public employees?

Use of payments from the Fund to cover payroll or benefits expenses of public employees are limited to those employees whose work duties are substantially dedicated to mitigating or responding to the COVID-19 public health emergency.

May recipients use Fund payments to cover employment and training programs for employees that have been furloughed due to the public health emergency?

Yes, this would be an eligible expense if the government determined that the costs of such employment and training programs would be necessary due to the public health emergency.

May recipients use Fund payments to provide emergency financial assistance to individuals and families directly impacted by a loss of income due to the COVID-19 public health emergency?

Yes, if a government determines such assistance to be a necessary expenditure. Such assistance could include, for example, a program to assist individuals with payment of overdue rent or mortgage payments to avoid eviction or foreclosure or unforeseen financial costs for funerals and other emergency individual needs. Such assistance should be structured in a manner to ensure as much as possible, within the realm of what is administratively feasible, that such assistance is necessary.

The Guidance provides that eligible expenditures may include expenditures related to the provision of grants to small businesses to reimburse the costs of business interruption caused by required closures. What is meant by a “small business,” and is the Guidance intended to refer only to expenditures to cover administrative expenses of such a grant program?

Governments have discretion to determine what payments are necessary. A program that is aimed at assisting small businesses with the costs of business interruption caused by required closures should be tailored to assist those businesses in need of such assistance. The amount of a grant to a small business to reimburse the costs of business interruption caused by required closures would also be an eligible expenditure under section 601(d) of the Social Security Act, as outlined in the Guidance.

The Guidance provides that expenses associated with the provision of economic support in connection with the public health emergency, such as expenditures related to the provision of grants to small businesses to reimburse the costs of business interruption caused by required closures, would constitute eligible expenditures of Fund payments. Would such expenditures be eligible in the absence of a stay-at-home order?

Fund payments may be used for economic support in the absence of a stay-at-home order if such expenditures are determined by the government to be necessary. This may include, for example, a grant program to benefit small businesses that close voluntarily to promote social distancing measures or that are affected by decreased customer demand as a result of the COVID-19 public health emergency.

May Fund payments be used to assist impacted property owners with the payment of their property taxes?

Fund payments may not be used for government revenue replacement, including the provision of assistance to meet tax obligations.

May Fund payments be used to replace foregone utility fees? If not, can Fund payments be used as a direct subsidy payment to all utility account holders?

Fund payments may not be used for government revenue replacement, including the replacement of unpaid utility fees. Fund payments may be used for subsidy payments to electricity account holders to the extent that the subsidy payments are deemed by the recipient to be necessary expenditures incurred due to the COVID-19 public health emergency and meet the other criteria of section 601(d) of the Social Security Act outlined in the Guidance. For example, if determined to be a necessary expenditure, a government could provide grants to individuals facing economic hardship to allow them to pay their utility fees and thereby continue to receive essential services.

Could Fund payments be used for capital improvement projects that broadly provide potential economic development in a community?

In general, no. If capital improvement projects are not necessary expenditures incurred due to the COVID-19 public health emergency, then Fund payments may not be used for such projects.

However, Fund payments may be used for the expenses of, for example, establishing temporary public medical facilities and other measures to increase COVID-19 treatment capacity or improve mitigation measures, including related construction costs.

The Guidance includes workforce bonuses as an example of ineligible expenses but provides that hazard pay would be eligible if otherwise determined to be a necessary expense. Is there a specific definition of “hazard pay”?

Hazard pay means additional pay for performing hazardous duty or work involving physical hardship, in each case that is related to COVID-19.

The Guidance provides that ineligible expenditures include “[p]ayroll or benefits expenses for employees whose work duties are not substantially dedicated to mitigating or responding to the COVID-19 public health emergency.” Is this intended to relate only to public employees?

Yes. This particular nonexclusive example of an ineligible expenditure relates to public employees. A recipient would not be permitted to pay for payroll or benefit expenses of private employees and any financial assistance (such as grants or short-term loans) to private employers are not subject to the restriction that the private employers’ employees must be substantially dedicated to mitigating or responding to the COVID-19 public health emergency.

May counties pre-pay with CARES Act funds for expenses such as a one or two-year facility lease, such as to house staff hired in response to COVID-19?

A government should not make prepayments on contracts using payments from the Fund to the extent that doing so would not be consistent with its ordinary course policies and procedures.

Must a stay-at-home order or other public health mandate be in effect in order for a government to provide assistance to small businesses using payments from the Fund?

No. The Guidance provides, as an example of an eligible use of payments from the Fund, expenditures related to the provision of grants to small businesses to reimburse the costs of business interruption caused by required closures. Such assistance may be provided using amounts received from the Fund in the absence of a requirement to close businesses if the relevant government determines that such expenditures are necessary in response to the public health emergency.

Should States receiving a payment transfer funds to local governments that did not receive payments directly from Treasury?

Yes, provided that the transferred funds are used by the local government for eligible expenditures under the statute. To facilitate prompt distribution of Title V funds, the CARES Act authorized Treasury to make direct payments to local governments with populations in excess of 500,000, in amounts equal to 45% of the local government's per capita share of the statewide allocation. This statutory structure was based on a recognition that it is more administratively feasible to rely on States, rather than the federal government, to manage the transfer of funds to smaller local governments. Consistent with the needs of all local governments for funding to address the public health emergency, States should transfer funds to local governments with populations of 500,000 or less, using as a benchmark the per capita allocation formula that governs payments to larger local governments. This approach will ensure equitable treatment among local governments of all sizes.

For example, a State received the minimum \$1.25 billion allocation and had one county with a population over 500,000 that received \$250 million directly. The State should distribute 45 percent of the \$1 billion it received, or \$450 million, to local governments within the State with a population of 500,000 or less.

May a State impose restrictions on transfers of funds to local governments?

Yes, to the extent that the restrictions facilitate the State's compliance with the requirements set forth in section 601(d) of the Social Security Act outlined in the Guidance and other applicable requirements such as the Single Audit Act, discussed below. Other restrictions are not permissible.

If a recipient must issue tax anticipation notes (TANs) to make up for tax due date deferrals or revenue shortfalls, are the expenses associated with the issuance eligible uses of Fund payments?

If a government determines that the issuance of TANs is necessary due to the COVID-19 public health emergency, the government may expend payments from the Fund on the interest expense payable on TANs by the borrower and unbudgeted administrative and transactional costs, such as necessary payments to advisors and underwriters, associated with the issuance of the TANs.

May recipients use Fund payments to expand rural broadband capacity to assist with distance learning and telework?

Such expenditures would only be permissible if they are necessary for the public health emergency. The cost of projects that would not be expected to increase capacity to a significant extent until the need for distance learning and telework have passed due to this public health emergency would not be necessary due to the public health emergency and thus would not be eligible uses of Fund payments.

Are costs associated with increased solid waste capacity an eligible use of payments from the Fund?

Yes, costs to address increase in solid waste as a result of the public health emergency, such as relates to the disposal of used personal protective equipment, would be an eligible expenditure.

May payments from the Fund be used to cover across-the-board hazard pay for employees working during a state of emergency?

No. The Guidance says that funding may be used to meet payroll expenses for public safety, public health, health care, human services, and similar employees whose services are substantially dedicated to mitigating or responding to the COVID-19 public health emergency. Hazard pay is a form of payroll expense and is subject to this limitation, so Fund payments may only be used to cover hazard pay for such individuals.

May Fund payments be used for expenditures related to the administration of Fund payments by a State, territorial, local, or Tribal government?

Yes, if the administrative expenses represent an increase over previously budgeted amounts and are limited to what is necessary. For example, a State may expend Fund payments on necessary administrative expenses incurred with respect to a new grant program established to disburse amounts received from the Fund.

May recipients use Fund payments to provide loans?

Yes, if the loans otherwise qualify as eligible expenditures under section 601(d) of the Social Security Act as implemented by the Guidance. Any amounts repaid by the borrower before December 30, 2020, must be either returned to Treasury upon receipt by the unit of government providing the loan or used for another expense that qualifies as an eligible expenditure under section 601(d) of the Social Security Act. Any amounts not repaid by the borrower until after December 30, 2020, must be returned to Treasury upon receipt by the unit of government lending the funds.

May Fund payments be used for expenditures necessary to prepare for a future COVID-19 outbreak?

Fund payments may be used only for expenditures necessary to address the current COVID-19 public health emergency. For example, a State may spend Fund payments to create a reserve of personal protective equipment or develop increased intensive care unit capacity to support regions in its jurisdiction not yet affected, but likely to be impacted by the current COVID-19 pandemic.

May funds be used to satisfy non-federal matching requirements under the Stafford Act?

Yes, payments from the Fund may be used to meet the non-federal matching requirements for Stafford Act assistance to the extent such matching requirements entail COVID-19-related costs that otherwise satisfy the Fund's eligibility criteria and the Stafford Act. Regardless of the use of Fund payments for such purposes, FEMA funding is still dependent on FEMA's determination of eligibility under the Stafford Act.

Must a State, local, or tribal government require applications to be submitted by businesses or individuals before providing assistance using payments from the Fund?

Governments have discretion to determine how to tailor assistance programs they establish in response to the COVID-19 public health emergency. However, such a program should be structured in such a manner as will ensure that such assistance is determined to be necessary in response to the COVID-19 public health emergency and otherwise satisfies the requirements of the CARES Act and other applicable law. For example, a per capita payment to residents of a particular jurisdiction without an assessment of individual need would not be an appropriate use of payments from the Fund.

May Fund payments be provided to non-profits for distribution to individuals in need of financial assistance, such as rent relief?

Yes, non-profits may be used to distribute assistance. Regardless of how the assistance is structured, the financial assistance provided would have to be related to COVID-19.

May recipients use Fund payments to remarket the recipient's convention facilities and tourism industry?

Yes, if the costs of such remarketing satisfy the requirements of the CARES Act. Expenses incurred to publicize the resumption of activities and steps taken to ensure a safe experience may be needed due to

the public health emergency. Expenses related to developing a long-term plan to reposition a recipient's convention and tourism industry and infrastructure would not be incurred due to the public health emergency and therefore may not be covered using payments from the Fund.

May a State provide assistance to farmers and meat processors to expand capacity, such to cover overtime for USDA meat inspectors?

If a State determines that expanding meat processing capacity, including by paying overtime to USDA meat inspectors, is a necessary expense incurred due to the public health emergency, such as if increased capacity is necessary to allow farmers and processors to donate meat to food banks, then such expenses are eligible expenses, provided that the expenses satisfy the other requirements set forth in section 601(d) of the Social Security Act outlined in the Guidance.

The guidance provides that funding may be used to meet payroll expenses for public safety, public health, health care, human services, and similar employees whose services are substantially dedicated to mitigating or responding to the COVID-19 public health emergency. May Fund payments be used to cover such an employee's entire payroll cost or just the portion of time spent on mitigating or responding to the COVID-19 public health emergency?

As a matter of administrative convenience, the entire payroll cost of an employee whose time is substantially dedicated to mitigating or responding to the COVID-19 public health emergency is eligible, provided that such payroll costs are incurred by December 30, 2020. An employer may also track time spent by employees related to COVID-19 and apply Fund payments on that basis but would need to do so consistently within the relevant agency or department.

May Fund payments be used to cover increased administrative leave costs of public employees who could not telework in the event of a stay at home order or a case of COVID-19 in the workplace?

The statute requires that payments be used only to cover costs that were not accounted for in the budget most recently approved as of March 27, 2020. As stated in the Guidance, a cost meets this requirement if either (a) the cost cannot lawfully be funded using a line item, allotment, or allocation within that budget or (b) the cost is for a substantially different use from any expected use of funds in such a line item, allotment, or allocation. If the cost of an employee was allocated to administrative leave to a greater extent than was expected, the cost of such administrative leave may be covered using payments from the Fund.

Questions Related to Administration of Fund Payments

Do governments have to return unspent funds to Treasury?

Yes. Section 601(f)(2) of the Social Security Act, as added by section 5001(a) of the CARES Act, provides for recoupment by the Department of the Treasury of amounts received from the Fund that have not been used in a manner consistent with section 601(d) of the Social Security Act. If a government has not used funds it has received to cover costs that were incurred by December 30, 2020, as required by the statute, those funds must be returned to the Department of the Treasury.

What records must be kept by governments receiving payment?

A government should keep records sufficient to demonstrate that the amount of Fund payments to the government has been used in accordance with section 601(d) of the Social Security Act.

May recipients deposit Fund payments into interest bearing accounts?

Yes, provided that if recipients separately invest amounts received from the Fund, they must use the interest earned or other proceeds of these investments only to cover expenditures incurred in accordance with section 601(d) of the Social Security Act and the Guidance on eligible expenses. If a government deposits Fund payments in a government's general account, it may use those funds to meet immediate cash management needs provided that the full amount of the payment is used to cover necessary expenditures. Fund payments are not subject to the Cash Management Improvement Act of 1990, as amended.

May governments retain assets purchased with payments from the Fund?

Yes, if the purchase of the asset was consistent with the limitations on the eligible use of funds provided by section 601(d) of the Social Security Act.

What rules apply to the proceeds of disposition or sale of assets acquired using payments from the Fund?

If such assets are disposed of prior to December 30, 2020, the proceeds would be subject to the restrictions on the eligible use of payments from the Fund provided by section 601(d) of the Social Security Act.

Are Fund payments to State, territorial, local, and tribal governments considered grants?

No. Fund payments made by Treasury to State, territorial, local, and Tribal governments are not considered to be grants but are "other financial assistance" under 2 C.F.R. § 200.40.

Are Fund payments considered federal financial assistance for purposes of the Single Audit Act?

Yes, Fund payments are considered to be federal financial assistance subject to the Single Audit Act (31 U.S.C. §§ 7501-7507) and the related provisions of the Uniform Guidance, 2 C.F.R. § 200.303 regarding internal controls, §§ 200.330 through 200.332 regarding subrecipient monitoring and management, and subpart F regarding audit requirements.

Are Fund payments subject to other requirements of the Uniform Guidance?

Fund payments are subject to the following requirements in the Uniform Guidance (2 C.F.R. Part 200): 2 C.F.R. § 200.303 regarding internal controls, 2 C.F.R. §§ 200.330 through 200.332 regarding subrecipient monitoring and management, and subpart F regarding audit requirements.

Is there a Catalog of Federal Domestic Assistance (CFDA) number assigned to the Fund?

Yes. The CFDA number assigned to the Fund is 21.019.

If a State transfers Fund payments to its political subdivisions, would the transferred funds count toward the subrecipients' total funding received from the federal government for purposes of the Single Audit Act?

Yes. The Fund payments to subrecipients would count toward the threshold of the Single Audit Act and 2 C.F.R. part 200, subpart F re: audit requirements. Subrecipients are subject to a single audit or program-

specific audit pursuant to 2 C.F.R. § 200.501(a) when the subrecipients spend \$750,000 or more in federal awards during their fiscal year.

Are recipients permitted to use payments from the Fund to cover the expenses of an audit conducted under the Single Audit Act?

Yes, such expenses would be eligible expenditures, subject to the limitations set forth in 2 C.F.R. § 200.425.

If a government has transferred funds to another entity, from which entity would the Treasury Department seek to recoup the funds if they have not been used in a manner consistent with section 601(d) of the Social Security Act?

The Treasury Department would seek to recoup the funds from the government that received the payment directly from the Treasury Department. State, territorial, local, and Tribal governments receiving funds from Treasury should ensure that funds transferred to other entities, whether pursuant to a grant program or otherwise, are used in accordance with section 601(d) of the Social Security Act as implemented in the Guidance.

Coronavirus Relief Fund Reporting and Record
Retention Requirements
July 2, 2020



OFFICE OF
INSPECTOR GENERAL

DEPARTMENT OF THE TREASURY
WASHINGTON, D.C. 20220

July 2, 2020

OIG-CA-20-021

MEMORANDUM FOR CORONAVIRUS RELIEF FUND RECIPIENTS

FROM: Richard K. Delmar /s/
 Deputy Inspector General

SUBJECT: Coronavirus Relief Fund Reporting and Record Retention
 Requirements

Title VI of the Social Security Act, as amended by Title V of Division A of the *Coronavirus Aid, Relief, and Economic Security Act* (Public Law 115-136), provides that the Department of the Treasury (Treasury) Office of Inspector General (OIG) is responsible for monitoring and oversight of the receipt, disbursement, and use of Coronavirus Relief Fund payments. Treasury OIG also has authority to recover funds in the event that it is determined a recipient of a Coronavirus Relief Fund payment failed to comply with requirements of subsection 601(d) of the Social Security Act, as amended, (42 U.S.C. 801(d)). Accordingly, we are providing recipient reporting and record retention requirements that are essential for the exercise of these responsibilities, including our conduct of audits and investigations.

Reporting Requirements and Timelines

Each prime recipient of Coronavirus Relief Fund payments¹ shall report Coronavirus Disease 2019 (COVID-19) related "costs incurred" during the "covered period"² (the period beginning on March 1, 2020 and ending on December 30, 2020), in the manner of and according to the timelines outlined in this memorandum. As described below, each prime recipient shall report interim and quarterly data and other recipient data according to these requirements. Treasury OIG is working on development of a portal with GrantSolutions³ that is expected to be operational on

¹ Prime recipients include all 50 States, Units of Local Governments, the District of Columbia, U.S. Territories, and Tribal Governments that received a direct payment from Treasury in accordance with Title V.

² Refer to Treasury's guidance dated June 30, 2020 for more information on costs incurred and the covered period.

³ A grant management service provider under the U.S. Department of Health and Human Services.

September 1, 2020, for recipients to report data on a quarterly basis. Until the GrantSolutions portal is operational, each prime recipient shall follow the interim reporting requirements. Treasury OIG will notify each prime recipient when GrantSolutions is operational or of any changes to the expected September 1, 2020 start date.

Interim Reporting for the period March 1 through June 30, 2020

By no later than July 17, 2020, each prime recipient is responsible for reporting costs incurred during the period March 1 through June 30, 2020. For this interim report, prime recipients need only report totals by the following broad categories:

- a. Amount transferred to other governments;
- b. Amount spent on payroll for public health and safety employees;
- c. Amount spent on budgeted personnel and services diverted to a substantially different use;
- d. Amount spent to improve telework capabilities of public employees;
- e. Amount spent on medical expenses;
- f. Amount spent on public health expenses;
- g. Amount spent to facilitate distance learning;
- h. Amount spent providing economic support;
- i. Amount spent on expenses associated with the issuance of tax anticipation notes; and
- j. Amount spent on items not listed above.

Recipients should consult Treasury’s guidance and Frequently Asked Questions in reporting costs incurred during the period March 1 through June 30, 2020. The total of all categories must equal the total of all costs incurred during that period. A spreadsheet is attached for your use in providing the data. As discussed below, the prime recipient will be required to report information for the period March 1 through June 30, 2020 into GrantSolutions once it is operational.

Quarterly Reporting

Each prime recipient of Coronavirus Relief Fund payments shall report COVID-19 related costs into the GrantSolutions portal. Data required to be reported includes, but is not limited to, the following:

- 1. the total amount of payments from the Coronavirus Relief Fund received from Treasury;
- 2. the amount of funds received that were expended or obligated for each project or activity;
- 3. a detailed list of all projects or activities for which funds were expended or obligated, including:
 - a. the name of the project or activity;
 - b. a description of the project or activity; and

4. detailed information on any loans issued; contracts and grants awarded; transfers made to other government entities; and direct payments made by the recipient that are greater than \$50,000.

The prime recipient is responsible for reporting into the GrantSolutions portal information on uses of Coronavirus Relief Fund payments.

Recipient Portal Access: For future quarterly reporting, each prime recipient will have GrantSolutions portal access for three (3) individuals: two (2) designees (preparers) to input quarterly data and one (1) official authorized to certify that the data is true, accurate, and complete.⁴ **By no later than July 17, 2020**, please provide the name, title, email address, phone number, and postal address of these individuals so that portal access can be granted. After this information is received, guidance on the GrantSolutions portal access and data submission instructions will be issued separately.

Reporting timeline

By no later than September 21, 2020, recipients shall submit via the portal the first detailed quarterly report, which shall cover the period March 1 through June 30, 2020. Thereafter, quarterly reporting will be due no later than 10 days after each calendar quarter. For example, the period July 1 through September 30, 2020, must be reported no later than October 13, 2020 (Tuesday after the 10th day of October and the Columbus Day Holiday). Reporting shall end with either the calendar quarter after the COVID-19 related costs and expenditures have been liquidated and paid or the calendar quarter ending September 30, 2021, whichever comes first.

Record Retention Requirements

Recipients of Coronavirus Relief Fund payments shall maintain and make available to the Treasury OIG upon request all documents and financial records sufficient to establish compliance with subsection 601(d) of the Social Security Act, as amended, (42 U.S.C. 801(d)), which provides:

(d) USE OF FUNDS.—A State, Tribal government, and unit of local government shall use the funds provided under a payment made under this section to cover only those costs of the State, Tribal government, or unit of local government that—

1. are necessary expenditures incurred due to the public health emergency with respect to COVID-19;
2. were not accounted for in the budget most recently approved as of the date of enactment of this section for the State or government; and

⁴ The certifying official is an authorized representative of the recipient organization with the legal authority to give assurances, make commitments, enter into contracts, and execute such documents on behalf of the recipient.

3. were incurred⁵ during the period that begins on March 1, 2020, and ends on December 30, 2020.

Records to support compliance with subsection 601(d) may include, but are not limited to, copies of the following:

1. general ledger and subsidiary ledgers used to account for (a) the receipt of Coronavirus Relief Fund payments and (b) the disbursements from such payments to meet eligible expenses related to the public health emergency due to COVID-19;
2. budget records for 2019 and 2020;
3. payroll, time records, human resource records to support costs incurred for payroll expenses related to addressing the public health emergency due to COVID-19;
4. receipts of purchases made related to addressing the public health emergency due to COVID-19;
5. contracts and subcontracts entered into using Coronavirus Relief Fund payments and all documents related to such contracts;
6. grant agreements and grant subaward agreements entered into using Coronavirus Relief Fund payments and all documents related to such awards;
7. all documentation of reports, audits, and other monitoring of contractors, including subcontractors, and grant recipient and subrecipients;
8. all documentation supporting the performance outcomes of contracts, subcontracts, grant awards, and grant recipient subawards;
9. all internal and external email/electronic communications related to use of Coronavirus Relief Fund payments; and
10. all investigative files and inquiry reports involving Coronavirus Relief Fund payments.

Records shall be maintained for a period of five (5) years after final payment is made using Coronavirus Relief Fund monies. These record retention requirements are applicable to all prime recipients and their grantees and subgrant recipients, contractors, and other levels of government that received transfers of Coronavirus Relief Fund payments from prime recipients.

Thank you and we appreciate your assistance.

⁵ Refer to Treasury's guidance dated June 30, 2020 for more information on the definition of costs incurred.


Appendix 2 - Attestation

ATTESTATION

I, Lisa Suprenand, Executive Director, am the Title: Executive Director, RMHC Tampa Bay of Name of
Organization: Ronald McDonald House Charities of Tampa Bay, and I certify that:

1. I have the authority on behalf of Ronald McDonald House Charities of Tampa Bay
(Organization) to sign this Attestation.
2. I understand that the Pinellas Community Foundation will rely on this attestation as a material representation in making a direct payment to this Organization.
3. Ronald McDonald House Charities of Tampa Bay (Organization) attests that proposed expenditures of this grant are appropriate and aligned with the awarded proposal, are for services related COVID-19 impacts to residents and/or the community on or after March 1, 2020, do not supplant existing services or budgets, and are not reimbursable by alternate means.
4. Ronald McDonald House Charities of Tampa Bay (Organization) attests it will only expend funds from this grant which are appropriate and aligned with the awarded proposal, are for services related COVID-19 impacts to residents and/or the community on or after March 1, 2020, and do not supplant existing services or budgets, and are not reimbursable by alternate means.

By: Lisa Suprenand, Executive Director (Printed Name)

Signature: 
1646512A7D3A454

Title: Executive Director, RMHC Tampa Bay

Date: 12/4/2020

APPENDIX 3 – Minimum Monitoring Requirements

1. Mandatory training provided by PCF at onset of grant re: fiscal and accountability
2. Advanced funds or reimbursement-based payments
3. Monthly report showing all invoice support, including detail timesheets and paystub with allocation between payroll supporting this grant and others
4. For advanced funds, current balance remaining
5. Obtain close-out report from grantee and reconcile to internal records

Appendix 4 – Application for Funding (including budget plan)

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Basic Needs for Pediatric Patient Families During COVID-19

Pinellas CARES Nonprofit Partnership Fund

Ronald McDonald House Charities Tampa Bay

Mrs. Lisa Suprenand
35 Davis Blvd
Tampa, FL 33606

jbarnes@rmhctampabay.org
O: 813-258-6430



ASPOSE

Meghan Chisholm

mchisolm@rmhctampabay.org
O: 727-767-3026

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Application Form

Introduction

Beginning 12/4/2020 at 9 AM, all applications will be reimbursement only. That is, no funding for future programming may be requested.

As of 5 PM, 11/12/2020, Behavioral Health proposals for future programming will no longer be accepted. Under the Behavioral Health category, you may only apply for reimbursement of past expenses related to COVID-19.

December 10 at 12 PM is the cutoff to submit an application for ANY funding.

NOTE: If your organization is awarded a grant, it is likely to be issued on a cost-reimbursement basis. This is determined at the contracting stage. Please consider this when developing your request and project start date.

The submission of an application is not a guarantee or commitment of funding. This application will be made public, in its entirety, including any attachments or uploads.

To see the rubric by which your organization's application will be scored, [click here](#).

Please answer these questions FIRST, as the application will show you the required sections and fields to complete based on your answers.

Priority Funding Areas*

Please select the priority area(s) most relevant to your request (see the PCF website for examples).

Food

Reimbursement*

The Pinellas CARES Nonprofit Partnership Fund allows requests to ask for reimbursement of expenditures related to COVID-19 programming within the Priority Funding Areas that took place between March 1, 2020 and the time of application.

Will your organization be applying for this cost reimbursement?

Yes

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Future Programming*

Will your organization be applying for funding for services to be delivered between the grant award decision and December 30, 2020?

As of 5 PM, 11/12/2020, you may no longer apply for future programming for Behavioral Health. You may only apply for reimbursement of already-rendered services related to COVID-19.

Yes

Project Name*

Basic Needs for Pediatric Patient Families During COVID-19

EIN*

59-1835985

DUNS Number*

Please provide your organization's DUNS number. This is the Data Universal Numbering System.

You can search for your DUNS number here: <https://www.dnb.com/duns-number/lookup.html>

If you do not have a DUNS number, you can apply for one here (it is free and may take 3-4 days for approval): <https://www.dnb.com/duns-number/get-a-duns.html>

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

618424923

Mission Statement*

The mission of Ronald McDonald House Charities is to create, find and support programs that directly improve the health and well being of children and their families.

Total Operating Expenditure*

What are your total annual operating expenses?

\$3,256,729.00

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Amount Requested*

Please review the entire application and its fiscal requirements before determining the total amount your organization will be requesting. This amount should include any reimbursements your organization is seeking for past COVID-19 programming.

Typical funding requests will range between \$25,000 and \$250,000. Amounts above and below are accepted, provided the request can be justified by community need.

Requests at the higher end, or above this range must have a significant and sustained impact on the vulnerable community being served. Your organization's capacity for spending a large amount of funds must also be justified.

\$193,229.13

If you are requesting more than \$250,000 or a large capital expenditure, please speak with PCF program staff to discuss the feasibility of your request **PRIOR TO submission**.

Priority Populations*

Please select the priority populations your programming will serve:

Note: Examples of "high-risk pandemic response jobs" include front-line workers, nurses, medical housekeeping staff, nonprofit employees, law-enforcement and medical first responders.

- Communities of color
- Children and/or the elderly
- Residents with language barriers
- Persons with disabilities
- Low-income families

Guiding Principles*

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.

From the priority populations you have indicated above, please explain to what extent one or more these populations are involved in the creation, design, and impact of your organization (or this specific project).

RMHC promotes an equitable space that is diverse in nature and where families are supported by each other. Particularly to attend to equity, we provide access to basic needs and also provide an inclusive environment where all families are respected while receiving medical care. Our diversity extends past where our families call home. Our 2019 data records indicated that 50% of our families were Caucasian, 20% was Latino/a, 15% was African American and the remaining 15% was other. We are saving families between \$1,200 to \$3,000, a month. This is approximately, one-month salary of the 30% of area median income for the state of Florida. The individuals that stay with us are siblings, parents, grandparents, extended family, adoptive parents and guardians. More importantly, they are the lifeline to their child. Furthermore, we have diverse representation in our board and advisory group to ensure the creation, design and impact of the organization are equitable in nature.

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Length of time operating program/project*

Please briefly explain how long you have been operating the program or project for which you are requesting funds. **This funding is for expansion of existing programming or sustaining an existing expansion to meet community needs.**

We began the program on March 19, 2020 when RMHCTB suspended services (new family intake, volunteers, meal groups, Day-Use program, etc). Hence, we are seeking funds to purchase food and provide lodging (inclusive of home and hotels) for families.

Service Area*

In which areas of the county do you physically provide services?

South County (locations such as St. Petersburg, Lealman, Kenneth City)

Impact on Organization*

What has been the impact of the coronavirus/COVID-19 on the services of your organization? (Example: inability to provide enough food, unable to provide behavioral health sessions, lack of volunteerism, etc.)

COVID-19 has drastically changed our service delivery and how we offer resources to families in need. Virtually overnight, our organization pivoted from having three donated meals daily, volunteers and chore groups to purchasing meals to meet the needs of our families. Hence, the day-to-day normalcy at the home was disrupted. Due to precautions surrounding the pandemic, we continue to be unable to allow volunteer meal groups to prepare food on-site, and many of our restaurant partners are no longer able to donate meals due to the economic toll of COVID-19.

Additionally, to prevent the spread of COVID-19, we halted all family intake during the nationwide shutdown; each of our three St. Petersburg Houses is in a different stage of reopening, however, none are presently able to operate at full capacity, and families checking-in must adhere to extremely strict guidelines that can be burdensome on a family that is already at its limits.

The benefits of having a home away from home, like RMH, which acts as a place of solace, is essential to supporting the family's overall well-being because it reduces the financial burden and provides basic needs. We have continued serving families through purchased meals, as well as hosting families that cannot meet our stringent intake process at local hotels.

Moreover, the staff had to consider creative ways to communicate and further support families during this time of crisis. For example, doing wellness checks, supporting families that are transitioning home and having financial challenges and providing the convenience of everyday delights, like a cup of coffee on a portable tray.

Fiscal Accountability

Federal Fund Disclosure*

If your organization is awarded this grant, you may be considered a subrecipient of federal funding. THEREFORE, if you are deemed a subrecipient and your organization reaches a threshold of having spent more than \$750,000 in

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federal funding this fiscal year (this INCLUDES other federally funded programs), it will be subject to requirements of the Federal Single Audit Act. This will require your organization to comply with Federal Compliance Requirements and may necessitate additional expenses for your organization and you should prepare for this.

It is advisable that you contact a certified public accountant (CPA) or other professional for guidance.

Yes, my organization understands and assumes all liabilities/costs in regards to federal funding.

Audited Financial Statements*

Does your organization routinely contract to have an audit conducted of its financial statements?

Yes

Most Recently Filed IRS Form 990*

Please upload a copy of the organization's most recently filed IRS Form 990. **This is absolutely required.**

2019 Ronald McDonald House IRS Form 990.pdf

Board-Approved Budget*

Please upload your most recently board-approved budget for this fiscal year in PDF format.

Ronald McDonald House Charities Tampa Bay 2020 Operating Budget.pdf

Audited Financial Statements

Most Recent Audited Financial Statements*

If your organization routinely contracts for an independent audit of its financial statements, including audits in accordance with Uniform Guidance and/or Chapter 10.650, Rules of the Auditor General, upload the most recent audit. The document should not be more than a year old.

RMHC Tampa Bay Audited 2019 Financial Statement.pdf

We have attached the independent audit that was conducted by Rivero, Gordimer & Company, P.A.

Management Letter*

Please provide a management letter indicating any findings from your organization's most recent independent audit.

If there is no management letter, please explain why.

Ronald McDonald House Charities Tampa Bay- Financials Communication Letter 2019.pdf

We have attached our most recent management letter.

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Expansion or Sustaining of Exact Programming Funded by Another Source

Existing Contract

If you are applying for funding to expand and/or sustain COVID-19 response programming that has already been funded by another source, please upload that contract here and provide a brief description of the funding source and relationship with the funder. Please note that any costs funded by another source are not allowed to be included in this application. Only the costs that are required to expand or sustain programs in excess of that funding will be considered for the purposes of this application.

RBC Foundation Grant- Ronald McDonald House.pdf

We received a \$5,000 grant from Royal Bank of Canada for COVID-19 cleaning supplies. We have a board member that works in the branch in St. Petersburg. The donation e-mail is attached to this proposal.

Reimbursement of COVID-19 Related Expenses

Your organization may seek reimbursement for COVID-19 related expenditures between March 1, 2020 and the time of submittal of this application. **This is NOT a replacement for the loss of revenue from canceled fundraising events or a decrease in private/public support.** These are costs already incurred and paid from reserves or rainy day funds that were used to deliver services within this funding's focus areas, *specifically* in response to the COVID-19 pandemic. These are funds that were NOT budgeted for use in this fiscal year.

Attestation*

I affirm that this funding was expended by my organization solely for program costs in relation to COVID-19, and is not being requested on a unit-of-service basis. None of these costs have been reimbursed by any other funding source.

Yes, I affirm the above is accurate and true.

Amount of Reimbursement Requested*

Please specify the total amount of reimbursement your organization is seeking.

\$70,676.54

Documentation of Expenses*

Please use this template to describe the expenses for which you are seeking reimbursement.

Upload records of expenses indicating the use of unbudgeted funds using some or all of the financial documents:

- Receipts documenting the purchase of unbudgeted items or service

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- Credit Card Statements showing payment of items (with MOST account numbers REDACTED)
- Bank Statements showing payment of credit cards (with MOST account numbers REDACTED)
- Financial reports that were presented to a Board of Directors
- Board minutes that show authorization of withdrawal(s) from reserve funds
- Bank statements with redacted account numbers indicating usage of unbudgeted funds

If you have selected more than one Priority Funding Area in the introductory section, please ensure to include information that separates the expenses. If necessary, use the textbox below to indicate any clarifying information regarding uploaded documentation.

RMHC Reimbursement Docs - Revised2.pdf

The attached documents are organized by the item description. Included in these sections are the receipts, credit card statements and payment. You will also find board minutes and financial reports provided to the Board of Trustees.

Meals- March (Pages 1-27)

Meals-April (Pages 28-50)

Meals – May (Pages 51-61)

Meals- June (Pages 62-71)

Meals- July (Pages 72-84)

Meals- August (Pages 85-95)

Meals-September (Pages 96-132)

Hyatt Place Hotel (Pages 133-135)

Candlewood Suites Hotel (Pages 136-152)

Board minutes and financial reports (Pages 153-163)



Number Served by Funding Area*

Please *briefly* specify how many people were served by the programming for which you are seeking reimbursement. If you are applying for reimbursement in multiple Funding Areas, *be sure* to provide numbers for each one. Numbers do not need to be unduplicated.

Example

Food: 1250 people

Behavioral Health: 250 people

Food: 4,480 people

Hotels: 228 people

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Funding and Usage

Client Service Delivery*

Briefly describe the services to be delivered under the programming for which you are requesting funding. Please include when and where the services will occur, how the target population will access the services, and the length of time the services will be provided. **Please specify the zip codes of participants. If not available, specify the zip codes of service delivery points.**

To abate some of the growing concerns (i.e. stress, financial burdens, meal insecurity, etc) among our families, we would like to facilitate a COVID-19 program that meets the basic human needs of food and shelter, and support family's overall wellness. Based on current COVID restrictions we can operate at 25% capacity. All these costs were not budgeted.

We intend to provide breakfasts and dinners daily for families that are staying bedside at our hospital partner (John's Hopkins All Children's Hospital-JHACH). Additionally, Ronald McDonald House will continue purchasing meals for our in-house residents throughout the remainder of 2020 since we cannot have any volunteer meal groups on site. Finally, through prior research, RMHCTB has determined to purchase groceries upon check-out for our families since they are often heading home with no paycheck in-hand and no food at their residence. We will order and provide a cooler worth of groceries for the families in these most dire circumstances.

We also began hosting more families in nearby hotels (i.e. Candlewood & Hyatt Place), allowing the families to still have a respite without the potential of spreading germs to other residents and/or staff. Additionally, we offer transportation to and from the hospital for follow-up care. Particularly, we created an Uber account to provide transportation services to families.

All services will occur within our 3 RMHC houses in St. Petersburg, which are located next to JHACH, as well as inside the hospital. The services offered will generally be in house and the delivery point for items received will be our houses located in zip code 33705. The target population will receive lodging (228 people), meals (4,480 people), groceries (480 people) and transportation (200 people) services.

RMHCTB allows families to stay with us as long as the child is still receiving medical treatment, no matter the length. This is the same for families that are staying bedside and need meals.

Communication/Outreach and Community Engagement Efforts*

In what ways is your organization marketing and communicating its available programming to the community it serves? How will you ensure that your target population is aware of your services and utilizes them?

Our main way of marketing our services is through our hospital partners. The social workers and other hospital staff refer families to stay with us. We also have signage in the hospital and are on the hospital TV channel for families to contact us directly. When we provide meals to families staying bedside, we also have a small flyer that shares some more information about Ronald McDonald House to encourage families to call us if they did not hear about our services when arriving to the hospital.

Once families stay with us, we will work to qualify them for additional support such as providing groceries upon checking out of the Ronald McDonald House or providing transportation support for them to return home. The social work team will also assist in qualifying what families need this additional support. The staff will speak with families throughout their stay to make sure they utilize all the services we can provide.

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Hurricane Preparedness*

If a hurricane-related emergency were to strike Pinellas County this year and cause an interruption in your organization's normal programming, how would you return to offering the programming, and continue to spend awarded funds from this grant?

There is an expectation that your programming will be able to continue in the event of a hurricane-related emergency.

If your organization has a COOP (Continuity of Operations Plan), you may upload it here instead of providing a text answer. You may redact sensitive information from your organization's COOP.

Ronald McDonald House is a shelter. Hence, our goal will remain the same, in which we assist families with children in the hospital and provide them with basic needs like meals and lodging. We have a hurricane emergency plan to manage our operations if something were to happen. If it was a significant storm and had to close our facilities, we would arrange for hotel accommodations for the families currently residing in the house and continue to purchase and deliver meals. This would mean we would continue to provide lodging and meals since Johns Hopkins All Children's Hospital and other hospital partners would stay open as well.

Moreover, we monitor the weather forecast and adhere to emergency personnel recommendation to be responsive in a timely fashion to ensure the well being of all parties. Hence, we will seek to be proactive in implementing a strategic emergency response to reduce the likelihood our services are interrupted.

Evidence of Insurance Coverage*

Grantees of the Pinellas CARES Nonprofit Partnership Fund will be required to maintain appropriate insurance to cover the services proposed in this application. PCF will determine whether this coverage is appropriate.

Please upload evidence of insurance policies that cover the programming for which your organization is requesting funds.

If there is no insurance coverage for this programming, please provide an explanation as to why.

Ronald McDonald House of Charities of Tampa Bay, Inc - COI Pinellas Community Foundation.pdf
We have property insurance with the coverages attached. We are insured by Besnard Insurance. We have listed the Pinellas Community Foundation as an additional insured through our liability insurance.

Insurance Requirement*

If you are awarded a contract for the Pinellas CARES Nonprofit Partnership Fund, you will be required to list Pinellas Community Foundation as an additional insured through your general liability insurance. If you would like to begin this process now, please contact your general liability insurance carrier.

Here is the information for your carrier:

Pinellas Community Foundation
17755 US Highway 19 N

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Meghan Chisholm

Ronald McDonald House Charities Tampa Bay

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.

Yes, I understand this requirement.

The Budget Summary and Budget Narrative sections are absolutely critical to a successful application. Improperly completed forms will be returned to you to fix, and will delay a funding decision being made on your application. Please see the examples in each section. To avoid rejection of your organization's application, PCF HIGHLY recommends you watch this short, instructional video as well: Budget Narrative/Summary Instructions

Update as of 9/25/2020: Due to new U.S. Department of the Treasury guidance, the CARES Act does not cover *any* administrative or indirect costs. The Budget Narrative and Summary have been updated. CFO, CEO, and other types of "administrative" time must be documented as a **direct cost on an hourly basis** under Personnel or Contracted Services. The above webinar will be updated shortly.

If your organization is awarded a grant, it is likely to be issued on a cost-reimbursement basis. Please consider this when developing your budget narrative and summary.

Note about Hazard Pay: Hazard pay will not automatically be approved as a budget item. Hazard pay is only for hazardous duty or work involving physical hardship, in each case that is related to COVID-19. Much of the immediate hazards of COVID-19 can be mitigated by appropriate use of PPE and/or regular sanitizing of spaces. The threshold for approval of hazard pay is high. It is best that you inquire in advance of adding this to a budget in your grant application.

If you would like to use a unit of service cost as a basis for your budget, you **MUST** contact Pinellas Community Foundation program staff FIRST to discuss this possibility.

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Budget Summary*

Please download the budget summary template [HERE](#) and complete it. **If you have selected multiple Priority Fund Areas, you should include ALL costs in this summary.**

Capital includes buildings, vehicles, equipment at \$3,000 or more per item. The purchase of capital must represent the lower cost option for the period during which the purchased asset would be used for COVID-response activities. Outright purchase must be less than the cost of renting or leasing OR if renting or leasing is not available.

CLICK HERE TO SEE AN EXAMPLE OF A PROPERLY COMPLETED BUDGET SUMMARY.

Please export as a PDF and upload it.

11.25.20%20CARES-Partnership-Fund-Budget-Summary-Grant-Ronald%20McDonald%20House%20Charities%20Final.xlsx

Budget Narrative*

Please download the budget narrative template [HERE](#) and complete it.

The budget narrative needs to do more than define the expenses. It should clearly state what is going to be paid using CARES funds and then justify the expenses as a program expansion (or sustaining an already expanded program) as a result of COVID-19. Do not bold, underline, or italicize. Use dollar amounts that match your Budget Summary.

If you have selected multiple Priority Fund Areas, you should include ALL costs in this narrative.

CLICK HERE TO SEE AN EXAMPLE OF A PROPERLY COMPLETED BUDGET NARRATIVE.

Capital includes buildings, vehicles, equipment at \$3,000 or more per item. The purchase of capital must represent the lower cost option for the period during which the purchased asset would be used for COVID-response activities. Outright purchase must be less than the cost of renting or leasing OR if renting or leasing is not available.

Please export as a PDF and upload it.

11.25.20%20CARES-Partnership-Fund-Budget-Narrative-Ronald%20McDonald%20House%20Charities%20Final%20%281%29.docx

Capital Requests

If you are requesting funding for capital expenses, please upload bids/estimates/rental agreements to match the expenses described in your budget summary and narrative.

Please upload in PDF format.

Logistical partner organizations (LPOs) are considered to be a critical part of service delivery strategy for this grant program, and using them is highly encouraged. Typical LPOs are:

- Grassroots organizations with small annual operating budgets (under \$50,000)
- Churches and other faith-based organizations

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- Neighborhood associations
- Social organizations/collaboratives
- Resident councils in low-income house communities
- Neighborhood family centers
- Senior centers

Their essential role is to serve as outreach, information, referral and service delivery sites for food distribution, legal aid counseling to prevent evictions and behavioral health services, consistent with the three priority need areas in the grant specifications.

Are you going to use LPOs in this programming?*

Yes

Logistical Partner Organizations (LPOs)

LPO List*

Please upload a list with entity names and primary contact information for each LPO. If there is additional information to provide, do so in the text box below.

Ronald McDonald House-Logistical Partner Organizations & Letter of Support.pdf

You will find a list of our Logistical Partner Organizations attached. This also includes a letter of support from Dr. Katzenstein, Director of Psychology and Neuropsychology, and Director of Social Work at Johns Hopkins All Children's Hospital.

Role in Programming*

Please describe the role(s) of specified LPOs in the programming proposed in this application.

The role of the LPO is to partner with us to provide a very structured and fluid coordination of resources with the opportunity to provide normalcy for families. We collaborate with local hospitals and outpatient centers in the Pinellas County area. The hospital allows us access to patients to provide a variety of services. Moreover, the hospital provides the social workers who help to connect patient families needing a place to stay with RMHCTB. The social workers will also partner with us to determine what families need additional support, such as providing families with groceries upon check out or transportation services.

Additionally, we are collaborating with the hospital with scheduling and accommodations to provide bedside meals to families while maintaining patient privacy and confidentiality. Furthermore, the hospital helps to advertise RMHC initiatives so that families can reach out to us for additional support.

Moreover, the feedback received from the social workers is used formatively to improve the quality of services of the patient families in an effort to support overall wellness while seeking medical care. We also seek to align our efforts with Maslow's hierarchy of needs. Particularly, providing physiological needs, safety needs, a sense of love and belonging, developing self-esteem and encouraging self-actualization despite challenges faced. By collaborating, RMHC works to provide a safe space, provide basic needs and protect the overall well-being of children.

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Food

This grant will require weekly reporting on the following measures:

- **Number of Pinellas County residents** accepting food by zip code of participant or distribution point (participant zip code is preferred)

Affirmation of Reporting*

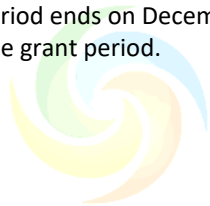
I affirm that my organization is capable of providing weekly reports on the above measures.

Yes

Number of Pinellas County Residents Served During Grant Period - Food*

This grant period ends on December 30, 2020. Please estimate the number of clients that will be served **food** by the end of the grant period.

4480



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September 2020 Projections - Food*

Please estimate the number of individuals to be served **food** by this funding in **September 2020**.

0

October 2020 Projections - Food*

Please estimate the number of individuals to be served **food** by this funding in **October 2020**.

0

November 2020 Projections - Food*

Please estimate the number of individuals to be served **food** by this funding in **November 2020**.

2240

December Projections - Food*

Please estimate the number of individuals to be served **food** by this funding in **December 2020**.

2240

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Funder Involvement

Which of the funders have provided a grant to your organization within the last three years?*

None of the above

Other Funding Sources

If your organization has submitted applications to other funders or has received funding in response to coronavirus/COVID-19 from another funder, please briefly describe below:

Corrective Action*

Is your organization currently under a corrective action agreement with any funder (including but not limited to those listed above)? If yes, please explain in detail, including the status of the corrective action. If no, state **No**.

No



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Your File Format APIs

Confirmation

Signature and Affirmation*

By submitting this application, I hereby swear that executive leadership is aware of this request for funding, and if this funding is approved, my organization will be able to use these funds in the manner described in the application.

Please type your name as an electronic signature and the date on which you are submitting this application.

Joseph M. Citro 11/4/2020

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File Attachment Summary

Applicant File Uploads

- 2019 Ronald McDonald House IRS Form 990.pdf
- Ronald McDonald House Charities Tampa Bay 2020 Operating Budget.pdf
- RMHC Tampa Bay Audited 2019 Financial Statement.pdf
- Ronald McDonald House Charities Tampa Bay- Financials Communication Letter 2019.pdf
- RBC Foundation Grant- Ronald McDonald House.pdf
- RMHC Reimbursement Docs - Revised2.pdf
- Ronald McDonald House of Charities of Tampa Bay, Inc - COI Pinellas Community Foundation.pdf
- 11.25.20%20CARES-Partnership-Fund-Budget-Summary-Grant-%20Ronald%20McDonald%20House%20Charities%20Final.xlsx
- 11.25.20%20CARES-Partnership-Fund-Budget-Narrative-Ronald%20McDonald%20House%20Charities%20Final%20%281%29.docx
- Ronald McDonald House-Logistical Partner Organizations & Letter of Support.pdf



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**** PUBLIC DISCLOSURE COPY ****

Form 990
(Rev. January 2020)
Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2019

Open to Public Inspection

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2019 calendar year, or tax year beginning and ending

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

C Name of organization
RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.
 Doing business as
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
35 DAVIS BLVD
 City or town, state or province, country, and ZIP or foreign postal code
TAMPA, FL 33606

D Employer identification number
59-1835985

E Telephone number
813-258-6430

G Gross receipts \$ **7,944,029.**

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

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

J Website: **WWW.RMHCTAMPABAY.ORG**

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: **1978** **M** State of legal domicile: **FL**

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: PROVIDES A HOME-AWAY-FROM-HOME FOR FAMILIES OF PEDIATRIC PATIENTS IN AREA HOSPITALS.	
	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)	20
	4	Number of independent voting members of the governing body (Part VI, line 1b)	20
	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	49
	6	Total number of volunteers (estimate if necessary)	0
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0.
	7b	Net unrelated business taxable income from Form 990-T, line 39	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year: 2,737,999. Current Year: 2,237,204.
	9	Program service revenue (Part VIII, line 2g)	92,197. 97,817.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	608,049. 335,910.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9e, 10e, and 11e)	398,943. 459,136.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,837,188. 3,130,067.
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)	1,925,053. 1,977,193.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0. 0.
	16b	Total fundraising expenses (Part IX, column (D), line 25)	237,234.
Net Assets or Fund Balances	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,422,135. 1,202,278.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,347,188. 3,179,471.
	19	Revenue less expenses. Subtract line 18 from line 12	490,000. -49,404.
	20	Total assets (Part X, line 16)	Beginning of Current Year: 15,142,835. End of Year: 16,896,226.
	21	Total liabilities (Part X, line 26)	234,364. 220,993.
22	Net assets or fund balances. Subtract line 21 from line 20	14,908,471. 16,675,233.	

Part II Signature Block

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

Sign Here: **KRISTA GARNER** (Signature of officer) Date: **6/2/2020**
KRISTA GARNER, TREASURER (Type or print name and title)

Paid Preparer Use Only: Print/Type preparer's name: **SAM A. LAZZARA** Preparer's signature: [Signature] Date: [Date] Check if self-employed: PTIN: **P01342929**
 Firm's name: **RIVERO, GORDIMER & COMPANY, P.A.** Firm's EIN: **59-3040705**
 Firm's address: **P. O. BOX 172359 TAMPA, FL 33672** Phone no.: **(813) 875-7774**

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

RONALD MCDONALD HOUSE CHARITIES
OF TAMPA BAY, INC.

Form 990 (2019)

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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 \$ 2,680,968. including grants of \$) (Revenue \$ 133,072.)
RONALD MCDONALD HOUSE CHARITIES TAMPA BAY HAS BEEN HELPING CHILDREN
WITH CRITICAL MEDICAL NEEDS, AND THEIR FAMILIES, STAY CLOSE TOGETHER
WHILE RECEIVING TREATMENT. SINCE 1980, OUR FOUR TAMPA BAY RONALD
MCDONALD HOUSES HAVE COMFORTED AND CARED FOR MORE THAN 50,000 SICK
CHILDREN AND THEIR FAMILIES. OUR ORGANIZATION IS COMPRISED OF FOUR
HOUSES, THREE IN ST. PETERSBURG AND ONE IN TAMPA, OFFERING A TOTAL OF
80 BEDROOMS WITH PRIVATE BATHS. MANY FAMILIES TRAVEL FAR FROM HOME TO
GET TREATMENT FOR THEIR SERIOUSLY ILL OR INJURED CHILD. THE TREATMENT
MAY LAST A DAY, A MONTH, OR OVER THE COURSE OF MANY YEARS. RONALD
MCDONALD HOUSE OFFERS FAMILIES A PLACE TO STAY TOGETHER IN THE
PROXIMITY TO THE TREATMENT HOSPITAL.

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 2,680,968.

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SEE SCHEDULE O FOR CONTINUATION(S)

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

Form 990 (2019)

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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	X	
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.

Form 990 (2019)

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38. Includes questions about grants, compensation, tax-exempt bonds, excess benefit transactions, and contributions.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question, Yes, No. Rows 1a, 1b, 1c. Includes questions about Form 1096, Forms W-2G, and backup withholding rules.

RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.

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

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 16 regarding employee reporting, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
1a			20
b	Enter the number of voting members included on line 1a, above, who are independent		20
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

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

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 (2019)

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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 instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) PAM BARBER PRESIDENT	5.00	X		X				0.	0.	0.
(2) EDWARD AMEEN CHAIRMAN	10.00	X		X				0.	0.	0.
(3) DAN PAONE PAST PRESIDENT	5.00	X		X				0.	0.	0.
(4) CLAUDIA STRAW TREASURER	10.00	X		X				0.	0.	0.
(5) DIANE KEANE SECRETARY	5.00	X		X				0.	0.	0.
(6) KERRY O'REILLY VICE-PRESIDENT	1.00	X		X				0.	0.	0.
(7) ERIC BLANKENSHIP DIRECTOR	1.00	X						0.	0.	0.
(8) TATE CASPER DIRECTOR	1.00	X						0.	0.	0.
(9) LAUREN CATOE DIRECTOR	1.00	X						0.	0.	0.
(10) BRIAN FORD DIRECTOR	1.00	X						0.	0.	0.
(11) CHRIS FROST DIRECTOR	1.00	X						0.	0.	0.
(12) JEFF HARRING DIRECTOR	1.00	X						0.	0.	0.
(13) CHRIS LAFACE DIRECTOR	1.00	X						0.	0.	0.
(14) JOHN IWANICKI DIRECTOR	1.00	X						0.	0.	0.
(15) BONNIE PATCHEN DIRECTOR	1.00	X						0.	0.	0.
(16) TOM POWERS DIRECTOR	1.00	X						0.	0.	0.
(17) BOB SANDERS DIRECTOR	1.00	X						0.	0.	0.

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

Form 990 (2019)

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)	(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			
(18) ANA WALLRAPP DIRECTOR	1.00	X						0.	0.	0.
(19) JULIE STAFF DIRECTOR	1.00	X						0.	0.	0.
(20) RUTH LYNCH DIRECTOR	1.00	X						0.	0.	0.
(21) LISA SUPRENAND EXECUTIVE DIRECTOR	40.00			X				111,039.	0.	14,678.
1b Subtotal								111,039.	0.	14,678.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								111,039.	0.	14,678.

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

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

Section B. Independent Contractors

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

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

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

Form 990 (2019)

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	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	157,900.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2,079,304.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 119,360.				
	h Total. Add lines 1a-1f			2,237,204.			
Program Service Revenue	2 a GUEST DONATIONS	Business Code					
		624221	97,817.	97,817.			
	b						
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f			97,817.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		569,556.			569,556.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real (ii) Personal				
		b Less: rental expenses	6b				
		c Rental income or (loss)	6c				
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities (ii) Other				
		b Less: cost or other basis and sales expenses	7b	4,235,164.			
		c Gain or (loss)	7c	4,468,810.			
	d Net gain or (loss)			-233,646.		-233,646.	
	8 a Gross income from fundraising events (not including \$ 157,900. of contributions reported on line 1c). See Part IV, line 18	8a		769,033.			
		b Less: direct expenses	8b	345,152.			
	c Net income or (loss) from fundraising events			423,881.		423,881.	
	9 a Gross income from gaming activities. See Part IV, line 19	9a					
b Less: direct expenses		9b					
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
	b Less: cost of goods sold	10b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a OTHER REVENUE	Business Code					
		900099	35,255.	35,255.			
	b						
	c						
	d All other revenue						
e Total. Add lines 11a-11d			35,255.				
12 Total revenue. See instructions			3,130,067.	133,072.	0.	759,791.	

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

Form 990 (2019)

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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
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	111,039.	99,177.	7,117.	4,745.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,429,745.	1,277,010.	91,641.	61,094.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	38,542.	34,425.	2,470.	1,647.
9 Other employee benefits	280,670.	253,114.	16,534.	11,022.
10 Payroll taxes	117,197.	104,942.	7,353.	4,902.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	38,641.	12,026.	26,615.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	58,201.		58,201.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion	6,365.			6,365.
13 Office expenses	124,865.	110,429.	9,368.	5,068.
14 Information technology				
15 Royalties				
16 Occupancy	302,442.	294,982.	4,997.	2,463.
17 Travel	35,995.	9,445.	18,585.	7,965.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	272,137.	251,280.	12,514.	8,343.
23 Insurance	79,459.	70,971.	5,093.	3,395.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a GENERAL FUNDRAISING EXP	120,225.			120,225.
b DONATED LINENS AND SUPP	101,542.	101,542.		
c FOOD AND HOUSE SUPPLIES	31,088.	31,088.		
d CONTRACT SERVICES	22,534.	22,471.	63.	0.
e All other expenses	8,784.	8,066.	718.	
25 Total functional expenses. Add lines 1 through 24e	3,179,471.	2,680,968.	261,269.	237,234.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

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

Form 990 (2019)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing	409,737.	1	410,890.	
	2 Savings and temporary cash investments		2		
	3 Pledges and grants receivable, net	208,293.	3	188,289.	
	4 Accounts receivable, net	271,242.	4	184,474.	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5		
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges	52,433.	9	9,762.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	8,663,722.			
	b Less: accumulated depreciation	5,889,942.			
	11 Investments - publicly traded securities	2,988,557.	10c	2,773,780.	
	12 Investments - other securities. See Part IV, line 11	4,806,460.	11	6,472,822.	
	13 Investments - program-related. See Part IV, line 11	6,406,113.	12	6,856,209.	
	14 Intangible assets		13		
	15 Other assets. See Part IV, line 11		14		
16 Total assets. Add lines 1 through 15 (must equal line 33)	15,142,835.	15	16,896,226.		
Liabilities	17 Accounts payable and accrued expenses	224,864.	17	213,249.	
	18 Grants payable		18		
	19 Deferred revenue	9,500.	19	7,744.	
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22		
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25		
	26 Total liabilities. Add lines 17 through 25	234,364.	26	220,993.	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.				
	27 Net assets without donor restrictions	12,779,134.	27	14,331,886.	
	28 Net assets with donor restrictions	2,129,337.	28	2,343,347.	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
	29 Capital stock or trust principal, or current funds		29		
	30 Paid-in or capital surplus, or land, building, or equipment fund		30		
	31 Retained earnings, endowment, accumulated income, or other funds		31		
	32 Total net assets or fund balances	14,908,471.	32	16,675,233.	
33 Total liabilities and net assets/fund balances	15,142,835.	33	16,896,226.		

Form 990 (2019)

**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	3,130,067.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,179,471.
3	Revenue less expenses. Subtract line 2 from line 1	3	-49,404.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	14,908,471.
5	Net unrealized gains (losses) on investments	5	1,816,166.
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	16,675,233.

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
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 (2019)

PUBLIC DISCLOSURE COPY

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

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

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support. Includes a Total row at the bottom.

RONALD MCDONALD HOUSE CHARITIES

Schedule A (Form 990 or 990-EZ) 2019 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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2557755.	2918006.	2928954.	2737999.	2237204.	13379918.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	2557755.	2918006.	2928954.	2737999.	2237204.	13379918.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						945,036.
6 Public support. Subtract line 5 from line 4.						12434882.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	2557755.	2918006.	2928954.	2737999.	2237204.	13379918.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	283,768.	345,635.	353,256.	608,049.	569,556.	2160264.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	19,817.	13,604.	14,844.	17,635.	35,255.	101,155.
11 Total support. Add lines 7 through 10						15641337.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	79.50 %
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	84.84 %
16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Schedule A (Form 990 or 990-EZ) 2019

RONALD MCDONALD HOUSE CHARITIES

Schedule A (Form 990 or 990-EZ) 2019 OF TAMPA BAY, INC.

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support

Table with 7 columns: (a) 2015, (b) 2016, (c) 2017, (d) 2018, (e) 2019, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2015, (b) 2016, (c) 2017, (d) 2018, (e) 2019, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, 11, and 12.)

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

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f)) 15%. Row 16: Public support percentage for 2018 Schedule A, Part III, line 15 16%.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f)) 17%. Row 18: Investment income percentage from 2018 Schedule A, Part III, line 17 18%.

19a 33 1/3% support tests - 2019. 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 - 2018. 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

Schedule A (Form 990 or 990-EZ) 2019 OF TAMPA BAY, INC.

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
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)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? 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.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

RONALD MCDONALD HOUSE CHARITIES

Schedule A (Form 990 or 990-EZ) 2019 OF TAMPA BAY, INC.

Part IV Supporting Organizations (continued)

- 11 Has the organization accepted a gift or contribution from any of the following persons?
 - a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?
 - b A family member of a person described in (a) above?
 - c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

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

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

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

	Yes	No
1		

Section D. All Type III Supporting Organizations

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

	Yes	No
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

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

- 2 Activities Test. Answer (a) and (b) below.
 - a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
 - b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
 - a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
 - b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

	Yes	No
2a		
2b		
3a		
3b		

RONALD MCDONALD HOUSE CHARITIES

Schedule A (Form 990 or 990-EZ) 2019 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.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

RONALD MCDONALD HOUSE CHARITIES

Schedule A (Form 990 or 990-EZ) 2019 OF TAMPA BAY, INC.

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

RONALD MCDONALD HOUSE CHARITIES

Schedule A (Form 990 or 990-EZ) 2019 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, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

- ▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
- ▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Name of the organization RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.	Employer identification number 59-1835985
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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 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

Name of organization RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.	Employer identification number 59-1835985
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 55,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 51,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 65,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 490,569.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 55,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Name of organization RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.	Employer identification number 59-1835985
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 48,010.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

PUBLIC DISCLOSURE COPY

Name of organization RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.	Employer identification number 59-1835985
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

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

PUBLIC DISCLOSURE COPY

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

PUBLIC DISCLOSURE COPY

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2019

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

▶ \$

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

Schedule D (Form 990) 2019

59-1835985 Page 2

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	1,718,162.	1,879,784.	1,689,198.	1,554,664.	1,737,748.
b Contributions	0.				
c Net investment earnings, gains, and losses	253,311.	-121,622.	150,586.	134,534.	-75,043.
d Grants or scholarships					
e Other expenditures for facilities and programs	73,897.				108,041.
f Administrative expenses					
g End of year balance	1,897,576.	1,718,162.	1,879,784.	1,689,198.	1,554,664.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 00 %
 - b Permanent endowment 53.00 %
 - c Term endowment 47.00 %
- 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		4,723,620.	3,349,857.	1,373,763.
c Leasehold improvements		1,361,663.	1,075,033.	286,630.
d Equipment		2,063,439.	1,465,052.	598,387.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				2,773,780.

Schedule D (Form 990) 2019

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

Schedule D (Form 990) 2019

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) MUTUAL AND MONEY MARKET		
(B) FUNDS	6,856,209.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	6,856,209.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (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)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

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

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

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

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

Schedule D (Form 990) 2019

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	5,170,647.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
	a Net unrealized gains (losses) on investments	2a	1,816,166.
	b Donated services and use of facilities	2b	282,615.
	c Recoveries of prior year grants	2c	
	d Other (Describe in Part XIII.)	2d	
	e Add lines 2a through 2d	2e	2,098,781.
3	Subtract line 2e from line 1	3	3,071,866.
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	58,201.
	b Other (Describe in Part XIII.)	4b	
	c Add lines 4a and 4b	4c	58,201.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3,130,067.

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	3,403,885.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
	a Donated services and use of facilities	2a	282,615.
	b Prior year adjustments	2b	
	c Other losses	2c	
	d Other (Describe in Part XIII.)	2d	
	e Add lines 2a through 2d	2e	282,615.
3	Subtract line 2e from line 1	3	3,121,270.
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	58,201.
	b Other (Describe in Part XIII.)	4b	
	c Add lines 4a and 4b	4c	58,201.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	3,179,471.

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.

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SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

► Attach to Form 990 or Form 990-EZ.

► Go to 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

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

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

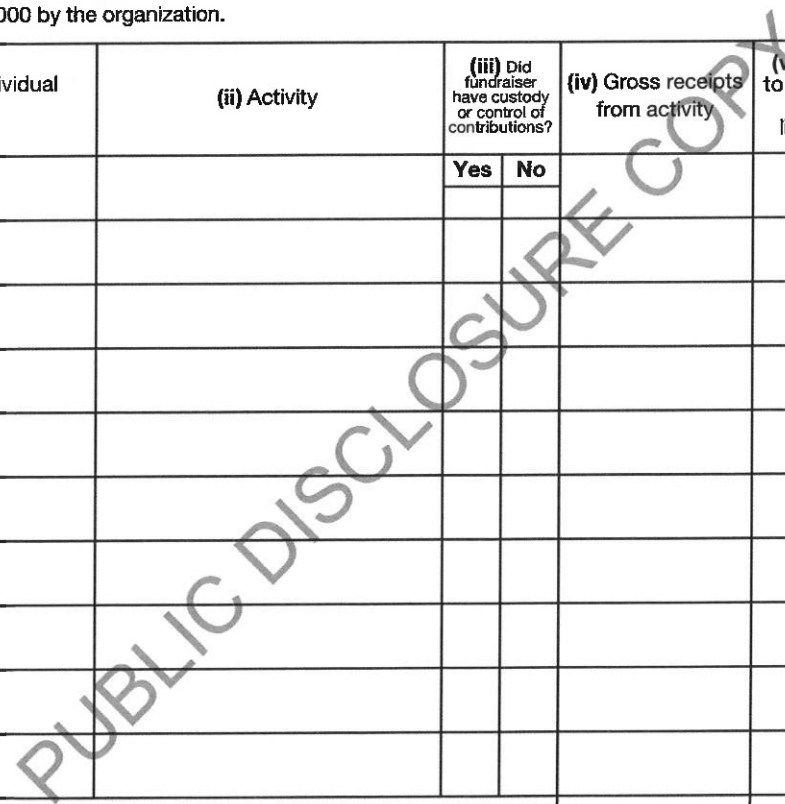
- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

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

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

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

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



RONALD MCDONALD HOUSE CHARITIES

Schedule G (Form 990 or 990-EZ) 2019 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 (add col. (a) through col. (c))	
		STORYBOOK BALL (event type)	GOLF TOURNAMENT (event type)	2 (total number)		
Revenue	1	Gross receipts	657,607.	169,856.	99,470.	926,933.
	2	Less: Contributions	127,900.	30,000.		157,900.
	3	Gross income (line 1 minus line 2)	529,707.	139,856.	99,470.	769,033.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	254,942.	76,150.	14,060.	345,152.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				345,152.
	11	Net income summary. Subtract line 10 from line 3, column (d)				423,881.

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))	
Revenue	1	Gross revenue				
	2	Cash prizes				
Direct Expenses	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

Schedule G (Form 990 or 990-EZ) 2019 OF TAMPA BAY, INC.

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.

RONALD MCDONALD HOUSE CHARITIES
OF TAMPA BAY, INC.

Schedule G (Form 990 or 990-EZ)

59-1835985 Page 4

Part IV Supplemental Information (continued)

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SCHEDULE L
(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No. 1545-0047

2019

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

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

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

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

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

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

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
Total												

Part III Grants or Assistance Benefiting Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

RONALD MCDONALD HOUSE CHARITIES

Schedule L (Form 990 or 990-EZ) 2019 OF TAMPA BAY, INC.

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
CLAUDIA STRAW	VOTING BOARD MEMBER	21,000.	ACCOUNTING		X

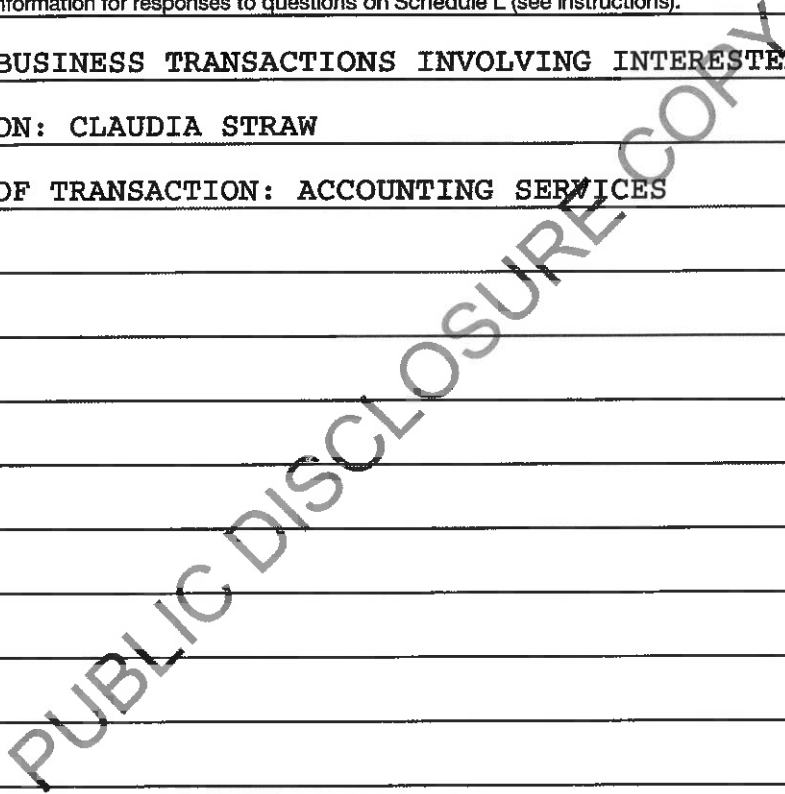
Part V Supplemental Information.

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

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: CLAUDIA STRAW

(D) DESCRIPTION OF TRANSACTION: ACCOUNTING SERVICES



**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

**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 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	71	22,592	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	22,100	ESTIMATED VALUE
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (MISC HOUSEHOL)	X	100	74,668	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 IV, Donee Acknowledgement **29**

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

	Yes	No
30a		X
31		X
32a		X

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

Schedule M (Form 990) 2019

RONALD MCDONALD HOUSE CHARITIES

Schedule M (Form 990) 2019

OF TAMPA BAY, INC.

59-1835985

Page 2

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

Multiple horizontal lines for supplemental information.

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public
Inspection

Name of the organization	RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.	Employer identification number	59-1835985
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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. THERE IS NO CHARGE FOR A FAMILY TO STAY, BUT
 FAMILIES MAY MAKE A DONATION. 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:

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

Schedule O (Form 990 or 990-EZ) (2019)

932211 09-06-19

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

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

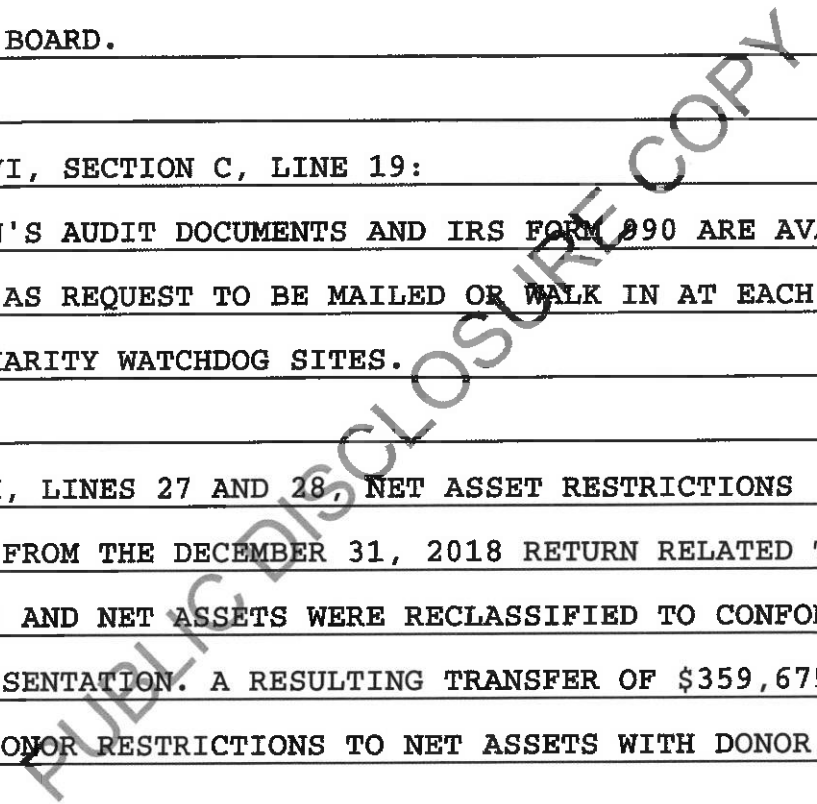
ANNUAL REVIEWS ARE PERFORMED EACH YEAR. THE CEO REVIEW IS CONDUCTED BY THE PRESIDENT AND REVIEWED BY THE EXECUTIVE COMMITTEE WITH THE COMPENSATION APPROVED BY THE BOARD.

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 X, LINES 27 AND 28, NET ASSET RESTRICTIONS

CERTAIN AMOUNTS FROM THE DECEMBER 31, 2018 RETURN RELATED TO ENDOWMENT FUND INVESTMENTS AND NET ASSETS WERE RECLASSIFIED TO CONFORM TO THE CURRENT YEAR PRESENTATION. A RESULTING TRANSFER OF \$359,675 OF NET ASSETS WITHOUT DONOR RESTRICTIONS TO NET ASSETS WITH DONOR RESTRICTION TOOK PLACE.



Form **8868**
(Rev. January 2020)

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 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.

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.

Type or print	Name of exempt organization or other filer, see instructions. RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.	Taxpayer identification number (TIN) 59-1835985
	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. 35 DAVIS BLVD
		City, town or post office, state, and ZIP code. For a foreign address, see instructions. TAMPA, FL 33606

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 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

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 16, 2020**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ► calendar year **2019** 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

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

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

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

Form **8868** (Rev. 1-2020)

Ronald McDonald House Charities Tampa Bay 2020 Operating Budget

2020 Budget	
<u>INCOME</u>	TOTALS
Donations (Individuals & Corporations)	\$840,000
McDonald's Fundraisers	\$608,500
RMHCTB Fundraisers	\$817,000
Community Fundraisers	\$219,410
Grants	\$85,500
RMHC Global Fundraisers	\$22,319
Adopt a Room	\$80,000
Wills & Trusts	\$150,000
Miscellaneous Income	\$34,000
Interest Income	\$400,000
Total Income	\$3,256,729
<u>EXPENSES</u>	TOTALS
Salaries	\$1,669,460
Payroll Tax Expense	\$122,000
Health Insurance	\$341,000
Workers Comp Insurance	\$9,000
Employee 401K	\$44,500
Employee Reimbursement	\$5,790
Utilities	\$170,613
House Supplies, Repairs & Services	\$175,000
Office Supplies & Expenses	\$67,000
Postage	\$18,000
Dues & Subscriptions	\$1,000
Advertising & Promotion	\$12,000
Cost of Items Sold	\$4,500
Fund Raising Expense	\$40,000
McDonald's Fundraisers Expenses	\$90,000
Red Shoe Council Expense	\$4,400
Special Event Expenses	\$295,000
Grant - Coke Expense	\$13,000
Volunteer Program	\$10,000
Meeting & Travel	\$38,500
House Insurance	\$70,000
Parking	\$3,750
Legal & Accounting	\$44,000
All Taxes & Licenses	\$2,000
Bank & Credit Card Fees	\$20,000
Capital Improvement Expense	\$300,480
Total Expenses 2020	\$3,570,993

FINANCIAL STATEMENTS AND INDEPENDENT AUDITORS' REPORT
RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.

December 31, 2019

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Statement of Activities	6
Statement of Functional Expenses	7
Statement of Cash Flows	8
Notes to Financial Statements	9 - 23



RIVERO, GORDIMER & COMPANY, P.A.

Member
American Institute of Certified Public Accountants
Florida Institute of Certified Public Accountants

Herman V. Lazzara Stephen G. Douglas
Marc D. Sasser Michael E. Helton
Sam A. Lazzara Christopher F. Terrigino
Kevin R. Bass James K. O'Connor
Jonathan E. Stein David M. Bohnsack
Richard B. Gordimer, of Counsel
Cesar J. Rivero, in Memoriam (1942-2017)

INDEPENDENT AUDITOR'S REPORT

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

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, 2019, and the related statement of activities, functional expenses, and cash flows, for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

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

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




Opinion

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, 2019, and the changes in its net assets and its cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

Report on Summarized Comparative Information

We have previously audited Ronald McDonald House Charities of Tampa Bay, Inc. 2018 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated May 23, 2019. In our opinion, the summarized comparative information presented herein as of and for the year ended December 31, 2018 is consistent, in all material respects, with the audited financial statements from which it has been derived.

A handwritten signature in black ink that reads "Buicio, Gordinier & Company, P.A." The signature is written in a cursive, flowing style.

Tampa, Florida
May 28, 2020

Ronald McDonald House Charities of Tampa Bay, Inc.

STATEMENT OF FINANCIAL POSITION

December 31, 2019
(With comparative total for December 31, 2018)

	Without Donor Restrictions	With Donor Restrictions	Total	
			2019	2018
ASSETS				
Cash (note A6)	\$ 153,408	\$ 257,482	\$ 410,890	\$ 409,737
Unconditional promises to give, net (notes A7 and C)	-	188,289	188,289	208,293
Other receivables	184,474	-	184,474	271,242
Prepaid expenses	9,762	-	9,762	52,433
Investments (notes A5, A8, E and F)	11,431,455	1,897,576	13,329,031	11,212,573
Property and equipment, net (notes A9 and D)	2,773,780	-	2,773,780	2,988,557
TOTAL ASSETS	\$ 14,552,879	\$ 2,343,347	\$ 16,896,226	\$ 15,142,835
LIABILITIES AND NET ASSETS				
LIABILITIES				
Line of credit (note I)	\$ -	\$ -	\$ -	\$ -
Accounts payable	129,441	-	129,441	149,732
Accrued expenses	83,808	-	83,808	75,132
Deferred revenue	7,744	-	7,744	9,500
Total liabilities	220,993	-	220,993	234,364
NET ASSETS				
Net assets without donor restrictions	14,331,886	-	14,331,886	12,779,134
Net assets with donor restrictions	-	2,343,347	2,343,347	2,129,337
Total net assets	14,331,886	2,343,347	16,675,233	14,908,471
TOTAL LIABILITIES AND NET ASSETS	\$ 14,552,879	\$ 2,343,347	\$ 16,896,226	\$ 15,142,835

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, 2019
(With comparative total for December 31, 2018)

	Without Donor Restrictions	With Donor Restrictions	Total	
			2019	2018
OPERATING REVENUE				
Contributions	\$ 1,743,171	\$ 239,365	\$ 1,982,536	\$ 2,374,859
Contributions - non-cash	379,383	-	379,383	580,929
Guest donations	97,817	-	97,817	92,197
Special events, net of direct costs of \$345,152	497,781	84,000	581,781	521,308
Other revenue	35,255	-	35,255	17,635
Total operating revenue	<u>2,753,407</u>	<u>323,365</u>	<u>3,076,772</u>	<u>3,586,928</u>
Net assets released from restrictions (note M)	<u>362,666</u>	<u>(362,666)</u>	<u>-</u>	<u>-</u>
Total operating revenues and net assets released from restrictions	<u>3,116,073</u>	<u>(39,301)</u>	<u>3,076,772</u>	<u>3,586,928</u>
EXPENSES				
Program services	2,951,843	-	2,951,843	3,031,692
Management and general	210,088	-	210,088	201,418
Fundraising	241,954	-	241,954	336,611
Unallocated payments to RMHC Global	-	-	-	78,575
Total expenses	<u>3,403,885</u>	<u>-</u>	<u>3,403,885</u>	<u>3,648,296</u>
Change in net assets before nonoperating revenues and losses	<u>(287,812)</u>	<u>(39,301)</u>	<u>(327,113)</u>	<u>(61,368)</u>
Nonoperating revenues (losses)				
Investment income	412,086	99,269	511,355	470,122
Realized (loss) gain on investments	(180,836)	(52,810)	(233,646)	81,246
Unrealized gain (loss) on investments	1,609,314	206,852	1,816,166	(1,286,922)
	<u>1,840,564</u>	<u>253,311</u>	<u>2,093,875</u>	<u>(735,554)</u>
Change in net assets	<u>1,552,752</u>	<u>214,010</u>	<u>1,766,762</u>	<u>(796,922)</u>
Net assets at beginning of year	<u>12,779,134</u>	<u>2,129,337</u>	<u>14,908,471</u>	<u>15,705,393</u>
Net assets at end of year	<u>\$ 14,331,886</u>	<u>\$ 2,343,347</u>	<u>\$ 16,675,233</u>	<u>\$ 14,908,471</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, 2019
(With comparative total for December 31, 2018)

	Program Services				Total Program Services	Supporting Services		Total Expenses	
	Tampa House	St. Pete East House	St. Pete West House	Central House		Management and General	Fundraising	2019	2018
Salaries	\$ 228,509	\$ 619,374	\$ 215,874	\$ 312,429	\$ 1,376,186	\$ 98,758	\$ 65,839	\$ 1,540,783	\$ 1,491,580
Payroll taxes	17,383	47,389	16,416	23,754	104,942	7,353	4,902	117,197	114,174
Health insurance	55,904	102,190	55,120	39,899	253,113	16,534	11,022	280,669	279,587
Retirement plan expense	5,716	15,493	5,400	7,815	34,424	2,470	1,647	38,541	39,710
Total salaries and benefits	<u>307,512</u>	<u>784,446</u>	<u>292,810</u>	<u>383,897</u>	<u>1,768,665</u>	<u>125,115</u>	<u>83,410</u>	<u>1,977,190</u>	<u>1,925,051</u>
Advertising	-	-	-	-	-	-	6,365	6,365	4,339
Cost of items sold	300	5,886	300	300	6,786	-	-	6,786	4,064
Depreciation	55,783	129,120	24,340	42,037	251,280	12,514	8,343	272,137	265,976
Donated linens and supplies	17,770	43,155	22,847	17,770	101,542	-	-	101,542	314,161
Food service and supplies	2,557	18,754	3,740	6,037	31,088	-	-	31,088	32,016
General fundraising expenses	-	-	-	-	-	-	120,225	120,225	220,079
House administration	15,097	36,664	19,410	15,097	86,268	-	-	86,268	69,429
Insurance	11,784	31,941	11,133	16,112	70,970	5,093	3,395	79,458	73,709
Legal and professional fees	7,232	11,564	8,098	7,232	34,126	26,615	-	60,741	65,150
Meetings and travel	2,135	3,455	88	3,767	9,445	18,585	7,965	35,995	31,668
Office expense	4,827	8,893	5,641	4,800	24,161	9,368	5,068	38,597	23,529
Outside services	14,874	13,115	6,593	2,065	36,647	7,081	4,720	48,448	61,295
Rent	43,248	2,845	2,772	194,100	242,965	-	-	242,965	237,130
Repairs and maintenance	41,446	54,218	25,116	6,509	127,289	1,302	-	128,591	68,393
Taxes and licenses	314	969	-	-	1,283	720	-	2,003	2,023
Utilities	40,090	68,013	31,399	19,826	159,328	3,695	2,463	165,486	171,709
	<u>257,457</u>	<u>428,592</u>	<u>161,477</u>	<u>335,652</u>	<u>1,183,178</u>	<u>84,973</u>	<u>158,544</u>	<u>1,426,695</u>	<u>1,644,670</u>
	<u>\$ 564,969</u>	<u>\$ 1,213,038</u>	<u>\$ 454,287</u>	<u>\$ 719,549</u>	<u>\$ 2,951,843</u>	<u>\$ 210,088</u>	<u>\$ 241,954</u>	<u>3,403,885</u>	<u>3,569,721</u>
Unallocated payments to RMHC Global								-	78,575
Total expenses								<u>\$ 3,403,885</u>	<u>\$ 3,648,296</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, 2019

Cash flows from operating activities	
Change in net assets	\$ 1,766,762
Adjustments to reconcile change in net assets to net cash provided by operating activities	
Depreciation	272,137
Unrealized gain on investments	(1,816,166)
Realized loss on investments	233,646
Decrease in unconditional promises to give	20,004
Decrease in other receivables	86,768
Decrease in prepaid expenses	42,671
Decrease in accounts payable	(20,291)
Increase in accrued expenses	8,676
Decrease in deferred revenue	(1,756)
Net cash provided by operating activities	<u>592,451</u>
Cash flows from investing activities	
Proceeds from sale of investments	4,119,971
Purchases of investments	(4,653,909)
Purchase of property and equipment	<u>(57,360)</u>
Net cash used in investing activities	<u>(591,298)</u>
Net increase in cash	1,153
Cash and cash equivalents at beginning of year	<u>409,737</u>
Cash and cash equivalents at end of year	<u>\$ 410,890</u>
Supplemental disclosures of cash flow information	
Cash paid during the year	
Interest	<u>\$ -</u>
Income taxes	<u>\$ -</u>

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, 2019

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, 2019

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

3. Change in Accounting Standard

During 2019, the Organization adopted ASU 2018-08, *Clarifying the Scope of the Accounting Guidance for Contributions Received and Contributions made* as well as ASU 2014-09 *Revenue from Contracts with Customers*. The Organization adopted ASU 2018-08 and 2014-09 using the retrospective method. The adoption of these standards did not result in significant changes to the Organization's accounting policies or impact its financial position, results of operations, or cash flows. As such, prior period financial statements were not restated and there was no cumulative effect adjustment upon adoption.

4. 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.

5. 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.

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2019

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

6. 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, 2019. However, the Organization has not experienced and does not expect to incur any losses in such accounts.

7. Unconditional Promises to Give

Unconditional promises to give that are expected to be collected within one year are recorded as contributions receivable at net realizable value. Unconditional promises 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 promises to give 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, 2019 was 2.5%. The Organization uses the allowance method to determine uncollectible unconditional promises. The allowance is based on prior years' experience and management's analysis of specific promises made. No allowance was deemed necessary at December 31, 2019.

8. 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.

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2019

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

9. Property and Equipment

Property and equipment expenditures in excess of \$1,000 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.

10. 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.

11. 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.

12. 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, 2019, 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.

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2019

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

13. 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, and fundraising 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.

14. Advertising

Advertising costs are expensed as incurred and were approximately \$6,400 for the year ended December 31, 2019.

15. 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.

16. 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 2015 remain open for examination.

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2019

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

17. Summarized Comparative Information

The consolidated 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 accounting principles generally accepted in the United States of America. Accordingly, such information should be read in conjunction with the Organization's consolidated financial statements for the year ended December 31, 2018, from which the summarized information was derived.

18. Reclassifications

Certain amounts from the December 31, 2018 financial statements related to endowment fund investments and net assets were reclassified to conform to the current year presentation as follows:

	Without donor restrictions	With donor restrictions	Total
Net assets, previously stated	\$ 13,138,809	\$ 1,769,662	\$ 14,908,471
Reclassification	<u>(359,675)</u>	<u>359,675</u>	<u>-</u>
Net assets, as restated	<u>\$ 12,779,134</u>	<u>\$ 2,129,337</u>	<u>\$ 14,908,471</u>

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 also Note I.

The following reflects the Organization's financial assets as of December 31, 2019, 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:

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2019

NOTE B - LIQUIDITY AND AVAILABILITY OF RESOURCES - Continued

Cash and cash equivalents	\$ 410,890
Investments - money market funds	420,126
Investments - stocks and mutual funds	11,030,332
Investments - other	1,878,573
Unconditional promises to give	188,289
Other receivables	<u>184,474</u>
Total financial assets available within one year	<u>14,112,684</u>
Less:	
Amounts unavailable for general expenditures within one year, due to:	
Time restrictions	(84,000)
Accumulated earnings on endowments	(897,576)
Restricted by donors for specific purpose	(361,771)
Restricted by donors in perpetuity	<u>(1,000,000)</u>
Total amounts unavailable for general expenditures within one year	<u>(2,343,347)</u>
Total financial assets available to management for expenditure within one year	<u><u>\$ 11,769,337</u></u>

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 - UNCONDITIONAL PROMISES TO GIVE

Unconditional promises to give consist of the following at December 31, 2019:

Gross unconditional promises to give	\$ 194,362
Less unamortized discount	<u>(6,073)</u>
Net unconditional promises to give	<u><u>\$ 188,289</u></u>
Amount due in	
Less than one year	\$ 60,445
One to five years	<u>133,917</u>
	<u><u>\$ 194,362</u></u>

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2019

NOTE D - PROPERTY AND EQUIPMENT

Property and equipment consist of the following at December 31, 2019:

Land - St. Petersburg - East	\$ 515,000
St. Petersburg Houses and improvements	4,374,567
Central House improvements	403,167
Tampa House and improvements	2,853,593
Tampa administrative office	517,395
	<u>8,663,722</u>
Less accumulated depreciation	<u>(5,889,942)</u>
	<u><u>\$ 2,773,780</u></u>

NOTE E - INVESTMENTS

Investments are carried at fair value and are as follows:

Unrestricted	
Money market funds	\$ 362,112
Equity securities	3,957,795
Preferred stock	405,449
Exchange-trade and closed-end funds	70,956
Debt securities	803,035
Corporate fixed income	1,004,582
Mutual funds	4,827,526
	<u>11,431,455</u>
Permanently and temporarily restricted	
Money market funds	58,014
Equity securities	231,005
Mutual funds	1,608,557
	<u>1,897,576</u>
	<u><u>\$ 13,329,031</u></u>

The components of investment income are summarized as follows for the year ended December 31, 2019:

Interest and dividends	\$ 511,355
Realized losses	(233,646)
Unrealized gains	1,816,166
	<u>2,093,875</u>
	<u><u>\$ 2,093,875</u></u>

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2019

NOTE E - INVESTMENTS - Continued

Expenses related to investment revenue, including custodial fees and investment advisory fees, amounted to approximately \$58,200 for the year ended December 31, 2019.

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, 2019.

- 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.

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2019

NOTE F - FAIR VALUE MEASUREMENT - Continued

The fair value by investment assets at December 31, 2019 is as follows:

	Level 1	Level 2	Level 3	Total
Money market funds	\$ 420,126	\$ -	\$ -	\$ 420,126
Equity securities	4,188,800	-	-	4,188,800
Preferred stocks	-	405,449	-	405,449
Exchange-traded and closed-end funds	70,956	-	-	70,956
Mutual funds	6,436,083	-	-	6,436,083
Corporate fixed income	-	1,004,582	-	1,004,582
Debt securities	-	803,035	-	803,035
	<u>\$ 11,115,965</u>	<u>\$ 2,213,066</u>	<u>\$ -</u>	<u>\$ 13,329,031</u>
Total	<u>\$ 11,115,965</u>	<u>\$ 2,213,066</u>	<u>\$ -</u>	<u>\$ 13,329,031</u>

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.

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2019

NOTE G - ENDOWMENT FUND - Continued

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

For the year ended December 31, 2019, 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:

	Without donor restrictions	With donor restrictions	With donor restrictions - in perpetuity	Total
Endowment net assets, beginning	\$ -	\$ 358,487	\$ 1,000,000	\$ 1,358,487
Reclassification addition	-	359,675	-	359,675
Withdrawals	-	(73,897)	-	(73,897)
Investments earnings, net	-	99,269	-	99,269
Net investment appreciation	-	154,042	-	154,042
Endowment net assets, ending	<u>\$ -</u>	<u>\$ 897,576</u>	<u>\$ 1,000,000</u>	<u>\$ 1,897,576</u>

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2019

NOTE G - ENDOWMENT FUND - Continued

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.

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 2018, 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, 2019. 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.

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2019

NOTE H - LEASES - Continued

The Organization leases space from 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. 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 \$194,100 for the year ended December 31, 2019. 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 \$8,000 for the year ended December 31, 2019.

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, 2019.

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 \$38,542 during the year ended December 31, 2019.

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2019

NOTE L - NET ASSETS WITH DONOR RESTRICTIONS

Net assets with donor restrictions at December 31, 2019 were as follows:

Accumulated earnings on endowment	\$ 897,576
St. Petersburg East House	55,000
Tampa House	95,000
Adopt A Room	128,289
Other Program Restrictions	83,482
Other Time Restrictions	<u>84,000</u>
Total net assets with time and purpose restrictions	1,343,347
Net assets restricted in perpetuity	<u>1,000,000</u>
Total net assets with donor restrictions	<u><u>\$ 2,343,347</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	\$ 100,887
Use restrictions expired	<u>261,779</u>
	<u><u>\$ 362,666</u></u>

NOTE N - SUBSEQUENT EVENTS

The Organization has evaluated events and transactions occurring subsequent to December 31, 2019 as of May 28, 2020 which is the date the financial statements were available to be issued.

Subsequent to year-end, the United States and global financial markets experienced significant declines in value resulting from uncertainty caused by the world-wide coronavirus pandemic (COVID-19). The Organization is closely monitoring its investment portfolio and its liquidity and is actively working to minimize the impact of these declines. The Organization's financial statements do not include adjustments to fair value that have resulted from these declines.

General economic uncertainties have arisen that may impact future cash flows and changes in net assets as a result of COVID-19. The related financial impact cannot be reasonably estimated at this time.

Ronald McDonald House Charities of Tampa Bay, Inc.

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED

December 31, 2019

NOTE N - SUBSEQUENT EVENTS - Continued

In response to the COVID-19 Pandemic, the U.S. Congress passed the CARES Act and allows the U.S. Small Business Administration (SBA) to administer the Paycheck Protection Program to provide loans to qualifying businesses. The Paycheck Protection Program loans have a two-year maturity at one percent annual interest with a loan forgiveness provision should the business spend the proceeds on qualifying expenses (payroll, rent, mortgage interest and utilities) within the eight-week covered period following the receipt of the loan proceeds. In April 2020, the Organization was approved for an SBA Paycheck Protection Program loan of \$362,300 and intends to follow the loan forgiveness provisions of the program.

INDEPENDENT AUDITORS' COMMUNICATION WITH
THOSE CHARGED WITH GOVERNANCE
RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.
December 31, 2019



RIVERO, GORDIMER & COMPANY, P.A.

Member
American Institute of Certified Public Accountants
Florida Institute of Certified Public Accountants

Herman V. Lazzara	Stephen G. Douglas
Marc D. Sasser	Michael E. Helton
Sam A. Lazzara	Christopher F. Terrigino
Kevin R. Bass	James K. O'Connor
Jonathan E. Stein	David M. Bohnsack
Richard B. Gordimer, of Counsel	
Cesar J. Rivero, in Memoriam (1942-2017)	

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

We have audited the financial statements of the Ronald McDonald House Charities of Tampa Bay, Inc. (the "Organization") as of and for the year ended December 31, 2019 and have issued our report thereon dated May 28, 2020. Professional standards require that we provide you with information about our responsibilities under generally accepted auditing standards, as well as certain information related to the planned scope and timing of our audit. We have communicated such information in our letter to you dated May 14, 2019. Professional standards also require that we communicate to you the following information related to our audit.

Significant Audit Findings

Qualitative Aspects of Accounting Practices

Management is responsible for the selection and use of appropriate accounting policies. The significant accounting policies used by the Organization are described in Note A to the financial statements. During the year ended December 31, 2019, the Organization adopted ASU 2018-08, *Clarifying the Scope of the Accounting Guidance for Contributions Received and Contributions Made*, as well as ASU 2014-09 *Revenue from Contracts with Customers*. We noted no transactions entered into by the Organization during the years for which there is a lack of authoritative guidance or consensus. All significant transactions have been recognized in the financial statements in the proper period.

Accounting estimates are an integral part of the financial statements prepared by management and are based on management's knowledge and experience about past and current events and assumptions about future events. Certain accounting estimates are particularly sensitive because of their significance to the financial statements and because of the possibility that future events affecting them may differ significantly from those expected. The most sensitive estimates affecting the financial statements were:

- Management's estimate of the collectability of pledges receivable is based on prior experience, historical collection trends and current and anticipated economic conditions.
- Management's estimate of the useful life of capital assets is based on historical experience, physical condition and external factors affecting future utility.
- Management's estimate of the functional allocation of expenses is based on prior experience, percentage of time devoted by employees to various activities and which functions utilize various supplies and resources.
- Management's estimate of in-kind revenues is based on values provided from donor organizations and estimated values in the marketplace.

We evaluated the key factors and assumptions used to develop the valuation estimates in determining that they are reasonable in relation to the financial statements taken as a whole.



The financial statement disclosures are neutral, consistent, and clear.

Difficulties Encountered in Performing the Audit

We encountered no significant difficulties in dealing with management in performing and completing our audit.

Corrected and Uncorrected Misstatements

Professional standards require us to accumulate all misstatements identified during the audit, other than those that are clearly trivial, and communicate them to the appropriate level of management. Management has corrected all such misstatements.

Disagreements with Management

For purposes of this letter, a disagreement with management is a financial accounting, reporting, or auditing matter, whether or not resolved to our satisfaction, that could be significant to the financial statements or the auditor's report. We are pleased to report that no such disagreements arose during the course of our audit.

Management Representations

We have requested certain representations from management that are included in the management representation letter dated May 28, 2020.

Management Consultations with Other Independent Accountants

In some cases, management may decide to consult with other accountants about auditing and accounting matters, similar to obtaining a "second opinion" on certain situations. If a consultation involves application of an accounting principle to the Organization's financial statements or a determination of the type of auditor's opinion that may be expressed on those statements, our professional standards require the consulting accountant to check with us to determine that the consultant has all the relevant facts. To our knowledge, there were no such consultations with other accountants.

Other Audit Findings or Issues

We generally discuss a variety of matters, including the application of accounting principles and auditing standards, with management each year prior to retention as the Organization's auditors. However, these discussions occurred in the normal course of our professional relationship and our responses were not a condition to our retention.

This information is intended solely for the use of the Board of Directors and management of the Ronald McDonald House Charities of Tampa Bay, Inc. and is not intended to be, and should not be, used by anyone other than these specified parties.



Tampa, Florida
May 28, 2020

From: "Powers, Thomas (RBC Wealth Mgmt)" <thomas.powers@rbc.com>

Date: October 19, 2020 at 10:11:31 AM EDT

To: "Vaughan, Pat" <pat.vaughan@rbc.com>, Lisa Suprenand <lsuprenand@rmhctampabay.org>

Cc: "Turner, Kirstin" <kirstin.turner@rbc.com>, "Mason, Clark (RBC Wealth Mgmt)" <clark.mason@rbc.com>

Subject: RBC Foundation Grant

Pat- on behalf of The Ronald McDonald House Board of Trustees of Tampa Bay and the families that we serve, I can't thank you enough for your \$5000 grant for COVID-19 Supplies. Your generosity and support over the years is overwhelming and we couldn't successfully serve our families and community without your assistance. Thank you Pat, we greatly appreciate it!

Thomas J. Powers
Senior Vice President-Financial Advisor
Senior Consulting Group, President's Council
RBC Wealth Management
100 2nd Ave. South Suite 800
St. Petersburg, FL. 33701
[800-987-8876](tel:800-987-8876)(Toll Free)
[727-825-7728](tel:727-825-7728)(Direct Line)
[727-825-7775](tel:727-825-7775)(Fax)
us.rbcwm.com/powerswealth
NMLS # [1547890](#) through City National Bank

RBC Wealth Management was ranked "Highest in Investor Satisfaction with Full-Service Brokerage Firms" in the J.D. Power 2020 Full-Service Investor Satisfaction Study. We believe this achievement reflects our firm's strong commitment to putting client interests first and carefully managing the wealth that clients entrust to our care. For more information, view the [J.D. Power press release](#).

RBC Wealth Management does not accept buy, sell, or cancel orders by email, or any instructions by email that would require your signature. Please visit [RBC Wealth Management Email Disclosures](#) for material details about our products and accounts, as well as for other important information.

Investment and insurance products offered through RBC Wealth Management are not insured by the FDIC or any other federal government agency, are not deposits or other obligations of, or guaranteed by, a bank or any bank affiliate, and are subject to investment risks, including possible loss of the principal amount invested.

Disclosure information regarding potential conflicts of interest on the part of RBC Capital Markets, LLC in connection with companies that are the subject of any third-party research report included in this email message may be found at [Third-Party Research Disclosures](#).

RBC Wealth Management, a division of RBC Capital Markets, LLC, Member NYSE/FINRA/SIPC.



**Reimbursement Template
Summary of Expenses**

For each unbudgeted/unplanned, but COVID-19 related expenditure, provide the following:

- Receipt or invoice for the purchase
- Method of payment for the purchase
- If paid via credit card or credit arrangement, provide a copy of the credit card statement with the appropriate charge (for security REDACT most account numbers)
- Include bank statement demonstrating paying of credit card (for security REDACT most account numbers)

You may add additional rows to the table below in order to properly document expenses. Keep items and documentation in the item order in your summary chart to easily follow the documentation.

Item Number	Quantity	Item Description	Total Cost
1	~843 meals	March meals	\$4,231.11
2	~1,794 meals	April meals	\$8,969.47
3	~369 meals	May meals	\$2,948.64
4	~511 meals	June meals	\$4,086
5	~413 meals	July meals	\$3,300.74
6	~332 meals	August meals	\$2,649.24
7	~332 meals	September meals	\$2,653.09
8	~414 meals	October meals	\$3,312.39
9	19 nights	Hyatt Place hotel- J. Sterns, Pinellas Family	\$1,403.46

Total Reimbursement Request: \$33,554.14

The attached documents are organized by the item description. Included in these sections are the receipts, credit card statements and payment. You will also find board minutes and financial reports provided to the Board of Trustees.

1. **Meals- March** (Pages 1-27) – Credit card statement and corresponding receipts

2. **Meals-April** (Pages 28-50) – Credit card statement and corresponding receipts
3. **Meals – May** (Pages 51-60) – Credit card statement and corresponding receipts
4. **Meals- June** (Pages 61-70) – Credit card statement and corresponding receipts
5. **Meals- July** (Pages 71-84) – Credit card statement and corresponding receipts
6. **Meals- August** (Pages 85-95) – Credit card statement and corresponding receipts
7. **Meals-September** (Pages 96-133) – Credit card statement and corresponding receipts
 - This section also contains copies of checks cut to food vendors from March to September
8. **Meals – October** (Pages 133-143) – Credit card statement and corresponding receipts
9. **Hyatt Place Hotel** (Pages 144-150) – Credit card statement and corresponding receipts
10. **Board minutes and financial reports** (Pages 153-163)



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/29/2020

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

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

PRODUCER Besnard Insurance 3000 Bayport Drive Suite 400 Tampa FL 33607	CONTACT NAME: Vivian Arencibia PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS: vivian.arencibia@besnardinsurance.com												
INSURER(S) AFFORDING COVERAGE													
INSURED Ronald McDonald House Charities Of Tampa Bay, Inc. 35 Davis Boulevard Tampa FL 33606-3543	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">INSURER A: Alliance of Nonprofits for Insurance</td> <td style="width: 20%; text-align: center;">NAIC # 10023</td> </tr> <tr> <td>INSURER B: Landmark American Ins Co</td> <td style="text-align: center;">33138</td> </tr> <tr> <td>INSURER C: Zenith Insurance Company</td> <td style="text-align: center;">13269</td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER A: Alliance of Nonprofits for Insurance	NAIC # 10023	INSURER B: Landmark American Ins Co	33138	INSURER C: Zenith Insurance Company	13269	INSURER D:		INSURER E:		INSURER F:	
INSURER A: Alliance of Nonprofits for Insurance	NAIC # 10023												
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INSURER C: Zenith Insurance Company	13269												
INSURER D:													
INSURER E:													
INSURER F:													

COVERAGES **CERTIFICATE NUMBER:** CL2072719500 **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS														
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			2020-47873	06/01/2020	06/01/2021	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>EACH OCCURRENCE</td><td style="text-align: right;">\$ 1,000,000</td></tr> <tr><td>DAMAGE TO RENTED PREMISES (Ea occurrence)</td><td style="text-align: right;">\$ 1,000,000</td></tr> <tr><td>MED EXP (Any one person)</td><td style="text-align: right;">\$ 10,000</td></tr> <tr><td>PERSONAL & ADV INJURY</td><td style="text-align: right;">\$ 1,000,000</td></tr> <tr><td>GENERAL AGGREGATE</td><td style="text-align: right;">\$ 2,000,000</td></tr> <tr><td>PRODUCTS - COMP/OP AGG</td><td style="text-align: right;">\$ 2,000,000</td></tr> <tr><td></td><td style="text-align: right;">\$</td></tr> </table>	EACH OCCURRENCE	\$ 1,000,000	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000	MED EXP (Any one person)	\$ 10,000	PERSONAL & ADV INJURY	\$ 1,000,000	GENERAL AGGREGATE	\$ 2,000,000	PRODUCTS - COMP/OP AGG	\$ 2,000,000		\$
EACH OCCURRENCE	\$ 1,000,000																				
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COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000																				
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BODILY INJURY (Per accident)	\$																				
PROPERTY DAMAGE (Per accident)	\$																				
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AGGREGATE	\$ 25,000,000																				
	\$																				
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	Z136439601	01/01/2020	01/01/2021	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> PER STATUTE</td> <td><input type="checkbox"/> OTHER</td> <td></td> </tr> <tr><td>E.L. EACH ACCIDENT</td><td></td><td style="text-align: right;">\$ 500,000</td></tr> <tr><td>E.L. DISEASE - EA EMPLOYEE</td><td></td><td style="text-align: right;">\$ 500,000</td></tr> <tr><td>E.L. DISEASE - POLICY LIMIT</td><td></td><td style="text-align: right;">\$ 500,000</td></tr> </table>	<input checked="" type="checkbox"/> PER STATUTE	<input type="checkbox"/> OTHER		E.L. EACH ACCIDENT		\$ 500,000	E.L. DISEASE - EA EMPLOYEE		\$ 500,000	E.L. DISEASE - POLICY LIMIT		\$ 500,000		
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E.L. DISEASE - EA EMPLOYEE		\$ 500,000																			
E.L. DISEASE - POLICY LIMIT		\$ 500,000																			

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

Pinellas Community Foundation is an Additional Insured as respects to General Liability when required by written contract per the terms conditions and exclusions of the policy.

CERTIFICATE HOLDER Pinellas Community Foundation 17755 US Highway 19 N Suite 150 Clearwater FL 33764	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
---	--

ADDITIONAL COVERAGES

Ref #	Description Business Auto	Coverage Code	Form No.	Edition Date	
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
Ref #	Description Experience Mod Factor 1	Coverage Code EXP01	Form No.	Edition Date	
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
Ref #	Description	Coverage Code	Form No.	Edition Date	
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
Ref #	Description	Coverage Code	Form No.	Edition Date	
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
Ref #	Description	Coverage Code	Form No.	Edition Date	
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
Ref #	Description	Coverage Code	Form No.	Edition Date	
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
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Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
Ref #	Description	Coverage Code	Form No.	Edition Date	
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
Ref #	Description	Coverage Code	Form No.	Edition Date	
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
Ref #	Description	Coverage Code	Form No.	Edition Date	
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium

**Pinellas Community Foundation
Pinellas CARES Nonprofit Partnership Fund Grant Application**

**DO NOT ADD ANY LINE ITEMS TO THIS BUDGET SUMMARY. IF YOU ARE UNSURE OF
WHERE A COST BELONGS, PLEASE CONTACT PCF STAFF.**

Organization Name: Ronald McDonald House Charities Tampa Bay

Project Name: Basic Needs for Pediatric Patient Families During COVID-19

FROM (date): November 17, 2020 TO (date): December 30, 2020

Budget Category/Line Item	Program Budget - Total	Pinellas CARES Grant
Personnel <i>(salaries, wages, benefits, payroll taxes, time allocation on the project for all personnel involved in program)</i>	\$4,500	\$4,500
Equipment <i>(computers, furniture, etc., less than \$3,000 per item)</i>	\$2,699	2,699
Supplies <i>(office materials, program related purchases, program necessities to deliver services, etc.)</i>	\$120,093	\$120,093
Occupancy (property rent, mortgage, utilities, telephone, internet, etc. assigned as program expenses)	\$6,900	\$6,900.00
Local Travel (mileage, tolls, parking for regular local travel, rental/leasing cost of transportation)	\$5,000	\$5,000
Training <i>(staff development, conferences, long distance travel)</i>		
Design, Printing, Marketing & Postage (for direct program related services only)	\$5,000	\$5,000
Capital <i>(Buildings, vehicles, equipment \$3,000 or more per item. The purchase of capital must represent the lower cost option for the period during which the purchased asset would be used for COVID-response activities)</i>		
Purchased Services <i>(consultants, legal, accounting services, logistical partner costs, technology enhancements, computer software licensing/agreements)</i>	\$199	\$199
TOTAL	144390.8	144390.8

Pinellas Community Foundation
PCF CARES Application
BUDGET NARRATIVE FORM

BRIEF INSTRUCTIONAL VIDEO – CLICK LINK - <https://youtu.be/s5kkxsaQkCg>

If you are applying under multiple funding areas, please indicate which funding area (food, behavioral health, and/or eviction mitigation through legal aid) each cost belongs to.

This narrative is to explain the costs in the Pinellas CARES Grant Column of the Budget Summary

Organization Name: Ronald McDonald House Charities of Tampa Bay
Project Name: Basic Needs for Pediatric Patient Families During COVID-19
FROM (month/year): 11/2020 TO (month/year): 12/2020

ALL DESCRIPTIONS BELOW SHOULD BE CLEAR AS TO HOW REQUESTED FUNDS BY AREA RELATE TO ADDITIONAL COSTS THAT WOULD NOT HAVE BEEN INCURRED OR PLANNED IF NOT FOR COVID-19

Personnel (*salaries, wages, benefits, payroll taxes, time allocation, and a brief description of the responsibilities on the project for all personnel involved in program*)

Define each position and indicate how the costs you are requesting expands your COVID-19-related programming and/or how it was unbudgeted as of 3/1/2020 or later. Be sure to include as much detail as possible for each position, e.g. rate per hour and number of hours for new position due to COVID-19 or increased hours as a result of COVID-19 (see example if needed).

PERSONNEL REQUEST: \$4,500

Ronald McDonald House Charities of Tampa Bay (RMHCTB) employs 22 full-time staff members, meant to run four separate Houses on a 24/7 continuum, as well as manage all the administrative and fundraising components of our organization. RMHCTB has always operated with as few employees as possible to ensure the bulk of our financial resources are dedicated to our families; only 17% of our budget goes to administrative and fundraising costs. Historically, we have relied heavily on volunteers and meal groups to supplement our staff in ensuring the Houses are running smoothly and families have the resources (food and other support) they need; in 2019, volunteers provided enough hours to equate to eight full-time employees. All four RMHCTB Houses are currently open in various phases, however due to COVID-19, none are operating at full capacity, and none are able to allow the volunteers needed to assist operationally. We are committed to continue offering 24/7 staff coverage and support for our families, even though we are in various phases of operations due to COVID-19; RMH Global also mandates this staffing model. Furthermore, RMHCTB has strict protocols for anyone accessing the facilities (staff and families alike), in order to control any potential COVID-19 exposure within this medically-compromised population. As such, we are finding ourselves needing to extend our reach outside the physical space of our Houses, and in order to expand our existing programming, we must have additional operational support. While expanding our existing services to the bedside families at Johns Hopkins All Children's Hospital is essential in meeting the needs of this community, none of our existing staff can dedicate the time necessary to ensure this program runs efficiently; we are anticipating needing approximately 30 hours a week of time dedicated to facilitating this expanded resource program.

ORIGINAL REQUEST: \$6,000 - A temporary position to manage the needs of this resource program. Responsibilities will include: needs assessments in conjunction with the Johns Hopkins All Children's Hospital (JHACH) social work team, meal scheduling and delivery, grocery ordering and delivery, and

transportation scheduling. The cost will be \$25/hour, 30 hours/week, for 8 weeks ($\$25 \times 30 \times 8 = \$6,000$).

UPDATED REQUEST: \$4,500 - With the updated timeline we have reallocated these costs: The cost will be \$25/hour, 30 hours/week, for 6 weeks ($\$25 \times 30 \times 6 = \$4,500$).

Equipment (computers, phone, furniture, etc., less than \$3,000 per item)

Define each individual piece of equipment, where it will be purchased from, how much it costs, and how the costs you are requesting expands your COVID-19-related programming. Including estimates, quotes, or print offs from a supplier website is helpful to defend these costs.

EQUIPMENT REQUEST: \$2,699

\$2,699 – Lenovo ThinkPad X1 Carbon Gen 8. This upgraded model was recommended by our IT partner due to its increased processing power to help with our data processing and input, and to remotely connect with our internal server. Additionally, this staff member will be constantly moving between multiple RMH facilities, restaurants, and Johns Hopkins All Children’s Hospital, so its increased battery life, best-in-class connectivity, and light-weight durability will be essential for working remotely.

Supplies (office materials, program related purchases, program necessities to deliver services, etc.)

Define each supply requested, where it will be purchased from, how much it costs, and how the costs you are requesting expands your COVID-19-related programming.

SUPPLIES REQUEST (TOTAL): \$120,092.80

COVID –19 necessitated significant changes to the operations of Ronald McDonald Houses across the country—Ronald McDonald House Charities of Tampa Bay (RMHCTB) specifically had to close our doors to new families, as well as our volunteers, meal groups, and non-essential staff. RMHCTB has historically relied on the donations of meal groups and restaurant partners to provide meals for our families. The national shut-down has greatly hindered our food resources. However, the need for meals is greater than ever among our current RMHCTB families (who are confined to the Houses), as well as the patient families staying bedside.

The services listed below are beyond what we currently provide to hospital families. COVID-19 challenged us to look for creative ways to deliver our mission to serve the most vulnerable population of children and their families, whether or not they are staying with us. This will increase our ability to provide meals by 120% or 50 additional people daily. Providing groceries is an expansion of our transitional house to home program to further support our families; we are currently only able to offer post-check-out support to families as resources are available, and only in the most extreme circumstances. Therefore, we are seeking funds to purchase daily meals based on the needs assessed through our hospital partners, as well as current trends within RMHCTB. Particularly, we will provide food for bedside families and families who eat meals at the home.

Daily Meals for Bedside Families: \$31,500

ORIGINAL REQUEST: For the bedside families, \$1,750/week for 8 weeks for individually packaged breakfast items purchased in combination from our pre-existing restaurant partners (McDonald’s, Chic-Fil-A, etc.) and Sam’s Club. Estimated at \$5/meal at 50 meals daily ($\$5 \times 50 \times 7 \times 8 = \$14,000$). This is 2,800 individual breakfasts served for the entire 8 week program.

UPDATED REQUEST: Based on the need identified by our hospital partner we will keep these facts and figures on a condensed 6-week model and maintain individuals served at 50/day. ($\$5 \times 50 \times 7 \times 6 = \$10,500$). This is 2,100 individual breakfasts served for the entire 6 week program.

ORIGINAL REQUEST: Additionally, for the bedside families, \$3,500/week for 8 weeks for healthy, individually packaged dinners purchased in combination from the JHACH food vendor Sodexo, as well as existing RMH restaurant partners (Ciccio's, Pacific Counter, The SURGE, Evos, etc). Estimated at \$10/meal at 50 meals daily ($\$10 \times 50 \times 7 \times 8 = \$28,000$). This is 2,800 individual dinners served for the entire 8 week program.

UPDATED REQUEST: Based on the need identified by our hospital partner we will keep these facts and figures on a condensed 6-week model and maintain individuals served at 50/day. ($\$10 \times 50 \times 7 \times 6 = \$21,000$). This is 2,100 meals provided to bedside families. This also includes a Thanksgiving dinner provided to the families for a cost of \$1,500.

Assuming the same person receives both breakfast and lunch, we will serve 2,800 people at the patients' bedside through this program.

Daily Meals for Ronald McDonald House Families: \$25,200

ORIGINAL REQUEST: For the families at the house, \$1,050/week for 8 weeks for individually packaged breakfast items purchased in combination from our pre-existing restaurant partners (McDonald's, Chic-Fil-A, etc.) and Sam's Club. Estimated at \$5/meal at 30 meals daily ($\$5 \times 30 \times 7 \times 8 = \$8,400$). This is 1,680 individual meals (usually dinner only) served over the 8 week program.

For the families at the house, \$2,100/week for 8 weeks for healthy, individually packaged dinners purchased in combination from the JHACH food vendor Sodexo, as well as existing RMH restaurant partners (Ciccio's, Pacific Counter, The SURGE, Evos, etc.). Estimated at \$10/meal at 30 meals daily ($\$10 \times 30 \times 7 \times 8 = \$16,800$).

Combined with the meals for bedside families, we will serve 4,480 people through this program.

UPDATE: We have continued to purchase meals and will seek reimbursement for the cost of these meals.

Transitional Groceries, Post-Discharge: \$48,000

ORIGINAL REQUEST: We allocated \$24,000/month to purchase two weeks' worth of groceries from Publix and Sam's Club for our most resource-stricken families. The average cost of groceries for a family of four for two weeks is \$400, and we are planning to assist 60 families/month (120 families in total) with transitional groceries. ($\$400 \times 60 \times 2 = \$48,000$)

These groceries will be selected by the families and delivered to the Ronald McDonald House. Subsequently the items will be given to the families in a cooler. The families will be selected based on socioeconomic status and the recommendation of social workers of families who could benefit from basic needs assistance.

UPDATE: We are still projecting to serve 120 families.

Cooler (insulated home delivery bag) for transition home \$5,392.80

ORIGINAL REQUEST: We will purchase 120 coolers (Insulated home delivery bags) for meal delivery. Thus we allocated \$5,392.80 ($\44.94 for 1 cooler x120) to purchase the coolers. We would give each family (120 families) a cooler.

UPDATE: We will purchase these coolers at one time to have for families.

Transitional Grocery Delivery Subscription, Post-Discharge: \$10,000

ORIGINAL REQUEST: We allocated \$5,000/month for Shipt or Instacart to provide grocery delivery to immuno-compromised families that cannot risk visiting the grocery store in-person. Grocery delivery services cost approximately \$100 annually, and we are looking to provide this service to 50 Pinellas families/month. This would be a total of 100 families. ($\$100 \times 50 \times 2 = \$10,000$)

UPDATE: We are still projecting to serve 50 families.

Occupancy (property rent, mortgage, utilities, telephone, internet, etc. assigned as program expenses)

Define each occupancy-related item, the supplier of the service, how much it costs, the % which is appropriately allocated to this grant, and how the costs you are requesting expands your COVID-19-related programming.

OCCUPANCY REQUEST: \$6,900

RMHCTB is not currently able to house families at our normal capacity, per restrictions caused by COVID-19 and set by Ronald McDonald House Charities Global Headquarters. Nevertheless, RMHCTB is currently in the process of reopening our Houses, following the guidelines mandated by our global governing body. We currently have three Houses at various stages of reopening, while one House continues to host families that have been in residence since prior to the COVID shutdown. Additionally, in an effort to continue meeting the needs of the patient family population we serve, RMHCTB has begun to host families in local hotels. We anticipate a need to continue this practice throughout the remainder of the year 2020. The addition of hotels to our COVID-19 resource program will double our existing occupancy in St. Petersburg.

ORIGINAL REQUEST: We budgeted \$4,420.89/week at Hyatt Place for 8 weeks. Currently, we have a 9 room block at a rate of \$77.97/night. We are anticipating operating at 90% capacity through the end of 2020. ($\$77.97 \times 8.1 \times 7 \times 8 = \$35,367.19$). The Hyatt Place was selected because it is closest to the John Hopkins All Children hospital and has room availability during the holiday season. Priority to stay at the Hyatt Place will be given to families who have children in hospital. This is 454 hotel rooms provided to patient families—based on an average length of stay of 8 days, this is 57 families served. Assuming an average of 3 family members (2 adults, 1 child), this is 171 individuals provided lodging close to their pediatric patient.

We also budgeted \$1,046.49/week at Candlewood Suites for 8 weeks. We reserved a 3 room block at \$55.37/night that we are anticipating operating at 90% capacity through the end of 2020. ($\$55.37 \times 2.7 \times 7 \times 8 = \$8,371.94$). This is 151 hotel nights provided to patient families—based on an average length of stay of 8 days, this is 19 families served. Assuming an average of 3 family members (2 adults, 1 child), this is 57 individuals provided lodging near their pediatric patient. Candlewood is much further from the hospital and the hotels have limited continuous availability during the block rooms for the specified time. Hence, we intend to allocate accommodations to Candlewood for families seeking follow-up appointments via outpatient care.

These costs include occupancy and sales tax. We are not exempt from occupancy tax and that the sales tax is the local tax, not state tax, which also does not fall under our exemption.

UPDATED REQUEST: \$6,900 - Per the committee recommendation, we will define the hotel needs as a person who resides in Pinellas County. We will define "resident of Pinellas County" if they "reside in

Pinellas County prior to JHACH admission and will continue in residence in Pinellas County post discharge from JHACH campus.”

With that said, our projected costs for hotel nights have changed. We project that from Nov. 17-Dec 31st we will provide 100 nights to Pinellas Residents as defined above. These residents would reside solely at the Hyatt Place at a cost of \$69 a night (69 x 100= 6900). This would be about 36 people served by hotels.

In regard to reimbursement, we have Pinellas Families that we decided to house in our homes and place other families in hotels. We did allocate hotel nights to a Pinellas family. This is a total cost of 1,403.46.

Local Travel (mileage, tolls, parking for regular local travel, rental/leasing cost of transportation)
Define each travel item, the person who will be incurring the cost (for staff travel), the supplier of the services (for rental/leasing), and how the costs you are requesting expands your COVID-19-related programming.

LOCAL TRAVEL REQUEST: \$5,000

ORIGINAL REQUEST: Providing transportation is an expansion of our transitional house to home program to further support our families; we are currently only able to offer transportation support to families as resources are available, and only in the most extreme circumstances. Transportation for follow-up care has always been a major concern for patient families with limited resources. This need became more critical due to COVID-19 because of constraints of public transportation options and potential exposure risks for immuno-compromised children. To assist with follow-up care, we would like to provide Uber/Lyft options within Pinellas County for families in critical need. Therefore, we budgeted \$2,500/month on Uber/Lyft ridesharing platforms for two months. We are anticipating supporting 25 families per month, a total of 50 families, at an estimated \$100 roundtrip ($\$100 \times 25 \times 2 = \$5,000$).

UPDATE: JHACH uses about \$3500 on uber/lyfts per month. The need is actually greater for transportation. Our transportation funding would supplement the needs that our hospital partner is unable to meet, and we still project it being a total of 50 families. ($\$100 \times 25 \times 2 = \$5,000$).

Design, Printing, Marketing & Postage (for direct program related services only)
Define each item, the supplier of the services, the cost, and how the costs you are requesting expands your COVID-19-related programming.

PRINTING/MARKETING REQUEST: \$5,000

\$5,000 - Marketing of the support offered by Pinellas Cares will be acknowledged on the meals, and on brochures administered to the families. Hence, we allocated \$5,000 to print materials to advertise the support offered by RMHCTB during COVID19 due to the generosity of donors.

Capital (buildings, vehicles, equipment \$5,000 or more per item. The purchase of capital must represent the lower cost option for the period during which the purchased asset would be used for COVID-response activities)

Define each item, the vendor who will supply the capital item, or construct the item, and provide a defense for how the purchase of this item costs less than the leasing of the item for the grant period. Also explain how this item is necessary for the expansion of your COVID-19-related programming.

No capital funding is being requested at this time.

Purchased Services (consultants, legal, accounting services, logistical partner costs, technology enhancements, computer software licensing/agreements)

Define each item, the vendor supplying the purchased services, the cost of the services per a specified period of time, and explain how this is necessary for the expansion of your COVID-19-related programming.

PURCHASED SERVICES REQUEST: \$199

We allocated funding (\$199) to purchase the Microsoft Office Professional Plus to assist with recordkeeping, and creating documents related to the initiative.

LPO	Address	Contact Name	Contact Title	Contact 1	Contact 2
Johns Hopkins All Children's St. Pete	501 6th Ave S, St. Petersburg, FL 33701	Dr. Jennifer Katzenstein	Jennifer Katzenstein, PhD, ABPP-CN, Director, Psychology and Neuropsychology	727-767-7439	jkaten7@jhmi.edu
Tampa General Hospital	1 Tampa General Cir, Tampa, FL 33606	Vaneta Joseph	Clinical Social Worker	(813) 844-7643	<vjoseph@tgh.org>
St Joseph's Childrens Hospital	3001 W Dr Martin Luther King Jr Blvd, Tampa, FL 33614	Mensah, Yanni A	Clinical Social Worker	(813) 870-4974	Yanni.Mensah@baycare.org ;
Rogers Memorial Hospital Behavioral Health	2002 North Lois Avenue #400, Tampa FL 33607	Dr. Sim yin Tan	Clinical supervisor for Children and Adolescent care	(813) 498-6400	kayla.dodds@rogersbh.org
ACH Outpatient Care, Tampa	12220 Bruce B Downs Blvd, Tampa FL 33612	Nancy Heavener	Outpatient Clinical Social Worker	(813) 631-5020	nheavener@jhmi.edu
Bayfront Medical Center	701 6th St S, St. Petersburg, FL 33701	Elise Pump	Bayfront Baby Place Social worker	(727) 290-1382	elise.pump@orlandohealth.com
Lampert's Therapy Group	8254 118th Avenue North, Suite 100, Largo, FL 33773	Jennifer Aguilar	Clinic Coordinator	(727) 541-5304 x202	jennifer.aguilar@lampertshometherapy.com
Largo Medical Center	201 14th St SW, Largo, FL 33770	Valerie Cochran	Director of Health Information Services	(727) 588-5200	
Piper Clinic	131 2nd Ave S, St. Petersburg, FL 33701	Tanille Williams	Clinical Manger	(727) 823-3220	Info@PiperClinic.com

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727-767-4824 T
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October 29, 2020

To whom it may concern:

It is with great pleasure that I write this letter of support for the Tampa Bay Ronald McDonald House Charity (RMHC) grant application to provide additional support to our families at Johns Hopkins All Children's Hospital (JHACH). Our RMHC partners have been an invaluable resource throughout our entire partnership, but especially during the COVID-19 pandemic. When families and children are hospitalized with medical conditions, which often require significant support and treatment, they experience incredible stress and anxiety, and often experience financial hardship. During hospitalization, the mental health of the patient and family can be impacted, as well as their access to having their basic needs met, including housing and access to food. RMHC serves as an invaluable resource to our families, as this amazing team provides our families with access to housing to remain close to their child during hospitalization, access to meals, and access to additional supports, such as laundry and shower services. This ensures our families can remain close to their children, while having their basic needs met.

I have had many families comment on the stress reduction and improved mental health they have experienced as having access to the RMHC resources. The COVID-19 has brought a very unique set of challenges, and increased stress and anxiety for our families. Meeting the basic needs of our families, including housing, access to food, and shower/laundry services, are imperative to providing a mentally healthy experience and reducing the stress and anxiety our families experience during incredibly stressful hospitalization, which are exacerbated by the COVID-19 pandemic. We are so very grateful to RMHC for everything they do to support our families.

Please do not hesitate to reach out to me for any additional information (727-767-7439).

Sincerely,

A handwritten signature in black ink, appearing to read "Jennifer Katzenstein".

Jennifer Katzenstein, PhD, ABPP-CN
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Board Certified Subspecialist in Pediatric Neuropsychology
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