Form 990

Department of the Treasury Internal Revenue Service Return of Organization Exempt From Income Tax

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

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

2021 Open to Public Inspection

OMB No. 1545-0047

For the 2021 calendar year, or tax year beginning and ending C Name of organization Check if applicable: BIG BROTHERS BIG SISTERS OF D Employer identification number SOUTHWEST WASHINGTON Address change Doing business as **-**5443 Name change Number and street (or P.O. box if mail is not delivered to street address) Telephone number 360-943-0409 2424 HERITAGE CT SW SUITE 302 Initial return Final return/ City or town, state or province, country, and ZIP or foreign postal code terminated OLYMPIA WA 98502 1,051,719 G Gross receipts\$ Amended return Name and address of principal officer: H(a) Is this a group return for subordinates? Application pending JEFF ENGLE 2424 HERITAGE CT SW SUITE 302 H(b) Are all subordinates included? OLYMPIA 98502 If "No." attach a list. See instructions X 501(c)(3) 501(c) Tax-exempt status 4947(a)(1) or 527 SWWABIGS . ORG Website: H(c) Group exemption number Form of organization: X Corporation Trust Year of formation: 1983 M State of legal domicile: Part I Summary 1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O Governance 2 Check this box ▶ I 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) 14 ∞ర 14 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 13 5 Total number of individuals employed in calendar year 2021 (Part V, line 2a) 5 1039 6 Total number of volunteers (estimate if necessary) 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 b Net unrelated business taxable income from Form 990-T, Part I, line 11 0 7b Current Year 456,892 8 Contributions and grants (Part VIII, line 1h) 561,632 9 Program service revenue (Part VIII, line 2g) 198,522 157,433 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 63,005 332,654 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 718,419 051,719 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 468,748 445,480 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 241,647 355,987 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 710,395 801,467 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 8,024 250,252 19 Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 276,231 426,493 21 Total liabilities (Part X, line 26) 201,330 101,340 74,901 22 Net assets or fund balances. Subtract line 21 from line 20 325,153 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 Signature of officer Here JEFF ENGLE EXECUTIVE DIRECTOR Type or print name and title Print/Type preparer's name Preparer's signature PTIN Date Check Paid PATRICIA PICH PATRICIA PICH 09/08/22 self-employed Preparer PATRICIA L. PICH, CPA, **-***5216 Firm's name Firm's EIN Use Only 2413 PACIFIC AVE SE SUITE C 98501 OLYMPIA, WA 360-339-7867 Firm's address May the IRS discuss this return with the preparer shown above? See instructions Yes No

	990 (2021) BIG BROTHERS BIG SISTERS OF **-**5443	Page 2
Pa	Statement of Program Service Accomplishments	X
1	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission:	_
	EE SCHEDULE O	
_	T	

	*	
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 X 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 X 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.	
	the total expenses, and revenue, it any, for each program service reported.	
4a	(Code:) (Expenses \$ 529,631 including grants of \$) (Revenue \$	
	EE SCHEDULE O	
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	• • • • • • • • • • • • • • • • • • • •	

lh	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
	(Code:) (Expenses \$ including grants of \$) (Revenue \$)

<u></u>	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
N/		
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2		
_	Other program continue (Describe or Calculul C)	
	Other program services (Describe on Schedule O.)	
	Expenses \$ including grants of \$) (Revenue \$)

Part IV Checklist of Required Schedules

			res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		.,	
2	complete Schedule A	1	X	37
3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	-	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I			v
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3	+-	X
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	x	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4	1	_
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		.,	
h	complete Schedule D, Part VI	11a	X	
b				
С	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more	11b		X
·	of its total assets reported in Part X. line 162 If "Vas." complete Schoolule D. Part VIII	44-		х
d		11c		
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	32 A 1			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u>X</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			17
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u>
10	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	4.0	- 1	v
17	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	16		<u>X</u>
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		
	Part VIII lines 1c and 8a2 If "Ves." complete Schodule G. Part II	18	х	
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
1	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? If "Yes," complete Schedule I, Parts I and II	21		X
A A		555	000	

	ort IV Charlist of Parvired Schodules (continued)		-	Page
	art IV Checklist of Required Schedules (continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		165	140
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	_	_
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c	-	-
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	-	
:5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			١,,
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	-	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I			v
6	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b	-	X
·	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	20		x
7	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key	26	+	_ A
•	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			1
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		x
8	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,		1000	
	Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			200000
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
1	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
ā	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
6	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
,	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	-	X
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and		v	
Pa	19? Note: All Form 990 filers are required to complete Schedule O. rt V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
a	Check if Schedule O contains a response or note to any line in this Part V			
	Shook in Confedence of Contains a response of note to any line in this Part V		Yes	No
а	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		res	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1a 1 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			

reportable gaming (gambling) winnings to prize winners?

_ P	art V Statements Regarding Other IRS Filings and Tax Compliance (contin	iued)			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					799
2	Statements, filed for the calendar year ending with or within the year covered by this return	2a	13			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instruction	S.		21.3		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other					
	a financial account in a foreign country (such as a bank account, securities account, or other financial	l accou	ınt)?	4a		X
b	If "Yes," enter the name of the foreign country					
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	Accoun	ts (FBAR).	9.153	7.32	3.5
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact	ction?				X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	ie		6-		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions?			6a		Λ
D	gifts were not tax deductible?	ns or		C L		
7	Organizations that may receive deductible contributions under section 170(c).			6b	Come	1000
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for o	aboor				
ч	and services provided to the payor?	yoous		7a	20.25	3 53 51
b	If "Voc." did the examination patify the depay of the value of the goods or equipped and			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			7.5		
	resident to the Fermi conno			7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		743E	197811	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		?	7e	J/ESES	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file For		9 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	d by the	е			
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:	1				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		150		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		1		
11	Section 501(c)(12) organizations. Enter:	ī				
a	Gross income from members or shareholders	11a		200		
b	Gross income from other sources. (Do not net amounts due or paid to other sources					
120	against amounts due or received from them.)	11b		- 40	6.1613	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form If "Yes," enter the amount of tax-exempt interest received or accrued during the year	I		12a		g-Khu
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	12b				
	Is the organization licensed to issue qualified health plans in more than one state?			13a		
-	Note: See the instructions for additional information the organization must report on Schedule O.			150	- 1	
b	Enter the amount of reserves the organization is required to maintain by the states in which			1		
	the organization is licensed to issue qualified health plans	13b				
С		13c				
4a	Did the organization receive any navments for indoor tanning convices during the tay year?			14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule			14b		
5	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remunera-					
	excess parachute payment(s) during the year?			15		X
	If "Yes," see instructions and file Form 4720, Schedule N.					THE W
6	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income	?	16		X
	If "Yes," complete Form 4720, Schedule O.					
7	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in					
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.	101-18				

Sec						X
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	14			420
	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.				1,04	
b	Enter the number of voting members included on line 1a, above, who are independent	1b	14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			1000		
	any other officer, director, trustee, or key employee?			2		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?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed	?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
6	Did the organization have members or stockholders?			6		X
7a	# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
101	T T 48 *********************************			7a		X
b	에 가는 사람들이 되었다. 그는 사람들이 보고 있는 사람들이 되었다면 보고 있는 사람들이 되었다면 보고 있는 사람들이 되었다면 보고 있는 것이 되었다면 보고 있는 것이 되었다면 보고 있는 것이 되었다면 보고 있는 것이 되었다. 그런 보고 있는 것이 되었다면 보고 있다면 보고 있다면 보고 있다면 보다면 보고 있다면 보고 있다면 보다면 보고 있다면 보다면 보고 있다면 보고 있다면 보다면 보고 있다면 보고 있다면 보다면 보고 있다면 보다면 보고 있다면 보고 있다면 보다면 보고 있다면 보다면 보고 있다면 보다면 보고					
_				7b		X
8	AND THE RESERVE OF THE RESERVE OF THE RESERVE OF THE PROPERTY	r by th	ne following:		100	
100				8a	X	
				8b	X	-
9						v
Sac		nal D		9		X
000	tion b. Policies [This Section B requests information about policies not required by the inter-	iai r	everiue Co	ide.)	Vac	Ma
102	Did the organization have local chapters branches or offiliates?			40-	Yes	No
- 1				10a		Λ
				10b		
11a		the fo	rm?	11a		X
12		the lo		Ha	Signer.	A
12a				12a	X	025.0000
b		to co	nflicts?	12b	X	
С				12.0		
	describe on Schedule O how this was done			12c	x	
13	***************************************			13	Х	
14	* *************************************			14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			FST?		
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization			15b	X	
	if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. b Enter the number of voting members included on line 1a, above, who are independent 2 Did any officer, director, fustee, or key employee have a family relationship or a business relationship with any other officer, director, fustee, or key employee have a family relationship or a business relationship with any other officer, director, fustee, or key employee have a family relationship or a business relationship with any other officer, directors, fustees, or key employees to a management company or other person? 3 Did the organization have members or stockholders? 4 Did the organization have members are stockholders? 5 Did the organization have members or stockholders? 6 Did the organization have members or stockholders? 7 Did the organization have members or stockholders? 8 Did the organization have members or stockholders? 9 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 9 Did the organization have members of the deposition or the persons who had the power to elect or appoint one or more members of the governing body? 9 Did the organization have members of the governing body? 9 Did the organization and the sufficient of the governing body? 9 Did the organization and authority to act on behalf of the governing body? 9 Did the organization have without the governing body? 9 Did the organization have without policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization of such the programization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization seempt purposes? 10 Did the organization have awritten orficial of			74		
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			19.2		
	with a taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its				100	
				16b		
Sect	The state of the s					
7						
8		ction 5	01(c)			
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9		st poli	cy, and			
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Form 990 (2021) BIG BROTHERS BIG SISTERS OF

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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

 <u>See</u> the instructions for the order in which to list the persons above.

Check this box if neither the org						ation (com	pensated any current office	er, director, or trustee.	
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	bo	x, unle	Pos check ess pe	rson	than o	an	(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) JEFF ENGLE		\top								
EXECUTIVE DIRECTOR	40.00			x				51,484	0	0
(2) MARK BOYER	0.00									
BOARD MEMBER	0.00	x						0	0	0
(3) BRIAN CASSIDY						\Box				
	0.00									
BOARD MEMBER	0.00	X						0	0	0
(4) COURTNEY DRENNOR										
BOARD MEMBER	0.00	x						0	0	0
(5) ROZANNE GARMAN	0.00									
BOARD MEMBER	0.00	x						0	0	0
(6) SHELBY HENTGES										
SECRETARY	0.00	х		х				0	0	0
(7) JUSTIN HJELM	0.00	A		Λ		\vdash	-	U	U	
BOARD MEMBER	0.00	x						0	0	0
(8) AMY JACKSON	0.00	Λ		\dashv		-	-	U	0	
3-7-3	0.00									
BOARD MEMBER	0.00	X						0	0	0
(9) SHAENA LANGLEY							\neg			
	0.00									
BOARD MEMBER	0.00	X					_	0	0	0
(10) SEAN MASON	0.00									
POADD MEMBER	0.00	\ ,								•
BOARD MEMBER (11) CRAIG MCELFRESH	0.00	Х	\rightarrow	-	-	-	\dashv	0	0	0
(II) CRAIG MCELIFRESH	0.00									
VICE PRESIDENT	0.00	x		x				0	0	0

Part VII Section A. Officers	s, Directors, Tru	ustee	s, K	Cey I	Emp	loye	es, a	and Highest Compensate	d Employees (continued)	
(A) Name and title	(B) Average hours per week	bo	x, unl	Pos check ess pe	erson	than is both	n an	(D) Reportable compensation from the	(E) Reportable compensation	(F) Estimated amount of other
	(list any hours for related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(12) KARA MEYER PAST PRESIDENT	0.00	x		x				0	C	
(13) TADEU VELLOS	0.00			11						
AT LARGE (14) JIM WINKLE	0.00	Х						0	C)
TREASURER	0.00	Х		X				0	0)
	*********								11.70.21.07	-
									2003344654	
									-	
1b Subtotal c Total from continuation shee							>	51,484		
d Total (add lines 1b and 1c) Total number of individuals (increportable compensation from				hose	e liste		pove	51,484) who received more than	\$100,000 of	
3 Did the organization list any for employee on line 1a? If "Yes,"	rmer officer, dire	ector	trus					e, or highest compensated		Yes No
For any individual listed on line organization and related organi individual	zations greater	than	\$150	0,000)? <i>If</i>	"Yes	s," co	and other compensation for succession and state of the succession	rom the h	4 X
5 Did any person listed on line 1st for services rendered to the ord Section B. Independent Contractor	ganization? If "Ye	rue d es," d	comp	ensa olete	stion Sch	from edule	any J fo	unrelated organization or or such person	individual	5 X
Complete this table for your five compensation from the organization.	e highest compe ation. Report co	nsat mper	ed ir	ndep	ende	ent co	ontra enda	ctors that received more the ryear ending with or within	nan \$100,000 of n the organization's tax ye	ear.
Name and b	(A) pusiness address							Description	(B) in of services	(C) Compensation
	9/10/									
Total number of independent correceived more than \$100,000 or contact.	ontractors (includ	ling t	out n	ot lir	nited	to t	hose	listed above) who	0	
DAA	1	-711							V	Form 990 (202

		Check if Schedule O con	tains a	respon	se or note	to any line in this	s Part VIII		
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ıts	18	a Federated campaigns	1a				ien Germania		
our		Membership dues	1b						
Am e		Fundraising events	1c		258,998				
ar		d Related organizations	1d						
imi,		Government grants (contributions)	1e		182,165				
r S		f All other contributions, gifts, grants,							
the		and similar amounts not included above	1f		120,469				
Contributions, Gifts, Grants and Other Similar Amounts	2	lines 1a-1f	1g	\$	53,452				
a C	_ h	Total. Add lines 1a-1f				561,632			
			2 p.27 (U1-2)	100000	Business Code				
8	2a	CONTRACT SERVICES			624100	157,433	157,433		
Program Service Revenue	b)							
ena	C								
Rev	d								
5	е								
	f	f All other program service revenue							
-	g	Total. Add lines 2a–2f				157,433			
	3	Investment income (including dividend	ds, inter	rest, and		1			
	10	other similar amounts)							
	4	Income from investment of tax-exemp							
	5	Royalties	· · · · · · · · · · · · · · · · · · ·						
		(i) Real		(ii) F	Personal				
	6a								
	b								
	C								
	d 7a	Net rental income or (loss)							
		sales of assets (i) Securities	•	(11)	Other				
40	h	other than inventory 7a							
n l	D	Less: cost or other basis and sales exps. 7b							
Other Revenue	^	basis and sales exps. 7b Gain or (loss) 7c							
E		Net gain or (loss)			•		STATE OF STA		
윭		Gross income from fundraising events	T						
0	ou	(not including \$ 258,998							
		of contributions reported on line							
		1c). See Part IV, line 18	8a		128,015				
	b	Less: direct expenses	8b						
		Net income or (loss) from fundraising			D	128,015			
		Gross income from gaming				Rente California			
		activities. See Part IV, line 19	9a						
	b	Less: direct expenses	9b						
	С	Net income or (loss) from gaming active	vities						
1		Gross sales of inventory, less							
		returns and allowances	10a						
	b	Less: cost of goods sold	10b						
		Net income or (loss) from sales of inve	ntory .						
,			-		Business Code				
1	1a	PPP LOAN FORGIVENESS				203,536	203,536		
enn	b	REWARDS/REBATE				1,103	1,103		
Revenue	С	8							
		All other revenue							
	е	Total. Add lines 11a-11d				204,639	- And the second second		
4	2	Total revenue. See instructions				1.051.719	362 072	0	0

Part IX Statement of Functional Expenses

-	tion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All othe		olete column (A).	
	Check if Schedule O contains a respons				
	not include amounts reported on lines 6b, 7b, 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		13		
5	Compensation of current officers, directors,				
	trustees, and key employees	51,484	41,185	337	9,962
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	327,151	261,707	2,141	63,303
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	34,344	23,697	2,061	8,586
10	Payroll taxes	32,501	22,575	1,921	8,005
11	Fees for services (nonemployees):	32/302	22/3/3	-/3	
а	Management			-	
	Lenal				
C	Legal				
d	Accounting Lobbying				
0	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	196			66.5
	Other. (If line 11g amount exceeds 10% of line 25, column				
g		79,475	63,884	7,680	7 011
12	(A) amount, list line 11g expenses on Schedule O.)	99	03,004	7,000	7,911
12	Advertising and promotion	8,230	5,712	806	1 712
	Office expenses	7,770	6,547	638	1,712 585
14	Information technology	1,110	6,347	636	363
15	Royalties	41,906	24 020	2 020	2 020
16	Occupancy	3,276	34,028	3,939	3,939
17	Travel	3,210	3,233		23
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	2 (12	2 476	010	205
19	Conferences, conventions, and meetings	3,613	2,476	812	325
20	Interest	1,523		1,523	
21	Payments to affiliates	00 517	44 006	0.101	
22	Depreciation, depletion, and amortization	20,517	11,386	9,131	4 77.4
23	Insurance	17,406	13,934	1,731	1,741
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.)				
а	SPECIAL EVENTS	62,891	150		62,741
b	IN-KIND EXPENSES	53,452		250	53,202
С	DUES & SUBSCRIPTIONS	26,265	20,437	1,618	4,210
d	PROGRAM EXPENSES	14,168	14,015	93	60
е	All other expenses	15,396	4,645	4,285	6,466
25	Total functional expenses. Add lines 1 through 24e	801,467	529,631	38,966	232,870
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)				
DAA	1010 mily 001 00-2 (700 000-120)				Form 990 (2021)

Part	X Balance Sheet							
	Check if Schedule O contains a response or	note to any line	in this Part X					
				(A)		(B)		
				Beginning of year		End of year		
1	Cash—non-interest-bearing			133,061	1	189,585		
2				37,316		138,50		
3	3			05.050	3			
4				25,656	4	53,97		
5	, , , , , , , , , , , , , , , , , , , ,		A second district of the second district of t					
	trustee, key employee, creator or founder, substant		r 35%		45.50			
	controlled entity or family member of any of these				5			
6					6			
sta _		der section 4958(f)(1)), and persons described in section 4958(c)(3)(B)						
Assets		Notes and loans receivable, net						
0				20 EE4	8	F 200		
9		20,554	9	5,300				
10	a Land, buildings, and equipment: cost or other	10	118,717					
١.	basis. Complete Part VI of Schedule D	79,589	59,644	40-	20 120			
100	b Less: accumulated depreciation Investments—publicly traded securities			39,044		39,128		
11				11				
13				12				
14		Investments—program-related. See Part IV, line 11 Intangible assets						
15					14			
16	Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal li	no 22)		276,231	16	426,493		
17	Accounts payable and accrued expenses			91,030	17	76,340		
18	0 1	I	31,030	18	70,340			
19	Deferred recent			19	15,000			
20	Tay avenue hand linkilities				20	20,000		
21	Escrow or custodial account liability. Complete Part				21	- Control Cont		
22	Loans and other payables to any current or former				49 33 31			
	trustee, key employee, creator or founder, substanti		35%					
	controlled entity or family member of any of these p		L		22			
23	Secured mortgages and notes payable to unrelated				23	Vicinity of the second		
24	Unsecured notes and loans payable to unrelated thi	ind montion	E	110,300	24	10,000		
25	Other liabilities (including federal income tax, payab							
	parties, and other liabilities not included on lines 17-	-24). Complete P	art X					
	of Schedule D		L		25			
26	Total liabilities. Add lines 17 through 25		,	201,330	26	101,340		
	Organizations that follow FASB ASC 958, check	here ▶ X						
3	and complete lines 27, 28, 32, and 33.							
27	Net assets without donor restrictions			67,330	27	315,346		
28	Net assets with donor restrictions			7,571	28	9,807		
	Organizations that do not follow FASB ASC 958,	check here ▶						
	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 equip	ment fund			30			
27 28 29 30 31 32	Retained earnings, endowment, accumulated incom-	e, or other funds	L		31			
32				74,901	32	325,153		
33	Total liabilities and net assets/fund balances			276,231	33	426,493		

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

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

Single Audit Act and OMB Circular A-133?

Form 990 (2021)

3a

X

SCHEDULE A (Form 990)

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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

BIG BROTHERS BIG SISTERS OF

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

Em

SOUTHWEST WASHINGTON

Employer identification number **-**5443

D		Danie	an for Dublic Charit	C4-4 /AII	- 1								
	art I			Status. (All organization	2000			tions.					
	orga			se it is: (For lines 1 through 12,		*							
1	Н			sociation of churches described		on 170(b)	(1)(A)(i).						
2	Н			(A)(ii). (Attach Schedule E (For									
3	Ц	A hospital o	r a cooperative hospital serv	vice organization described in s	ection 17	0(b)(1)(A)(iii).						
4	Ш	A medical re	esearch organization operate	ed in conjunction with a hospital	describe	d in secti	on 170(b)(1)(A)(iii). Enter the	hospital's name,					
	_	city, and sta	te:										
5		An organiza	tion operated for the benefit	of a college or university owned	d or opera	ted by a	governmental unit described in	1					
	_	section 17	0(b)(1)(A)(iv). (Complete Par	t II.)									
6	Ш	A federal, st	ate, or local government or	governmental unit described in	section 1	70(b)(1)(A)(v).						
7	X		tion that normally receives a section 170(b)(1)(A)(vi). (0	substantial part of its support fi	rom a gov	ernmenta	I unit or from the general pub	lic					
8	П	A communit	y trust described in section	170(b)(1)(A)(vi). (Complete Par	rt II.)								
9	П			scribed in section 170(b)(1)(A)		ted in cor	niunction with a land-grant coll	ege					
	_	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 331/3% 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of											
11	П												
12	Н							anna of					
14	Ш	one or more	publicly supported organiza	tions described in section 509(a)(1) or se	ection 50	9/a//2) See section 509/a//3	Check					
				scribes the type of supporting of									
	а	Type I. /	A supporting organization op	erated, supervised, or controlled ver to regularly appoint or elect	d by its si	upported (organization(s), typically by give						
				complete Part IV, Sections A a		or the di	rectors of trustees of the						
	b			pervised or controlled in conne		its sunno	orted organization(s) by having	a					
	_	control o	r management of the support	rting organization vested in the Part IV, Sections A and C.									
	С	Type III	functionally integrated. A	supporting organization operated structions). You must complete	d in conne	ection with	n, and functionally integrated v	with,					
	d			d. A supporting organization ope				ion(s)					
		that is no	ot functionally integrated. The	e organization generally must sa	atisfy a di	stribution	requirement and an attentiver	ness					
				nust complete Part IV, Section									
	е	Check th	is box if the organization rec	eived a written determination fron front in a written determination front integrated support	om the IR	S that it is	a Type I, Type II, Type III						
	f		mber of supported organizat		99								
				ne supported organization(s).									
(i)		of supported	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount	of				
		anization	. , , , , , , , , , , , , , , , , , , ,	(described on lines 1-10	30.00	ur governing	support (see	other support					
				above (see instructions))	docui	ment?	instructions)	instructions	6)				
					Yes	No							
(A)													
(B)													
(C)		300 10000											
(D)													
20.00													
(E)													
-4-1													

Part II

Schedule A (Form 990) 2021

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2017 (e) 2021 (b) 2018 (c) 2019 (d) 2020 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 379,695 567,990 490,624 456,892 561,632 2,456,833 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 Total. Add lines 1 through 3 379,695 567,990 490,624 456,892 561,632 2,456,833 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) Public support. Subtract line 5 from line 4 2,456,833 Section B. Total Support (a) 2017 Calendar year (or fiscal year beginning in) (b) 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total Amounts from line 4 379,695 567,990 490,624 456,892 561,632 2,456,833 Gross income from interest, dividends, 8 payments received on securities loans, rents, royalties, and income from similar sources 14 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.) 11 Total support. Add lines 7 through 10 2,456,847 12 Gross receipts from related activities, etc. (see instructions) 12 1,290,316 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2021 (line 6, column (f) divided by line 11, column (f)) 14 14 100.00% 15 Public support percentage from 2020 Schedule A, Part II, line 14 100.00% 33 1/3% support test-2021. 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 33 1/3% support test-2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2021. 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 10%-facts-and-circumstances test—2020. 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 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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.)

Sec	ction A. Public Support	quality drider t	ine tests listed	below, please t	complete rait i	1.)	
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(4) 25 1.	(2) 2010	(0) 2010	(4) 2020	(6) 2021	(i) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
500	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(4) 2020	(-) 2021	(6) Total
9		(a) 2017	(b) 2018	(C) 2019	(d) 2020	(e) 2021	(f) Total
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the or			1.50		(******)	, \Box
500	organization, check this box and stop here						>
1000000	tion C. Computation of Public Su			(6)		45	0/
15 16	Public support percentage for 2021 (line 8,	column (I), divided	a by line 13, colum	ın (t))		15	%
16 Sec	Public support percentage from 2020 Sche tion D. Computation of Investment					16	%
17	Investment income percentage for 2021 (li			column (f))		17	0/.
	Investment income percentage from 2021 (III		line 17			40	<u>%</u> %
19a	33 1/3% support tests—2021. If the organ			14 and line 15 is			/0
	17 is not more than 33 1/3%, check this bo						▶ □
b	33 1/3% support tests—2020. If the organ				1 D (T)		<i></i>
	line 18 is not more than 33 1/3%, check thi						
20	Private foundation. If the organization did						

Part IV Supporting Organizations

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

Section	A.	All	Supporting	Organizations
---------	----	-----	------------	---------------

- 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.
 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 lines 3b and 3c 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.
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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 on 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 on 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 line 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.)

	Yes	No
1		
2		
3a		
3b	Telling of	
3c		
4a		
4b		
4c		
5a		
5b 5c		
6		
7		
8		
9a		
9b		
9c	Ligner	
10a		
10b	(Form 99	0) 20:

Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	A	THE WAY	7353
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,	1350	Party.	448
	provide detail in Part VI.	11c		
Sect	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	478.0		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
•	supervised, or controlled the supporting organization.	2		<u> </u>
Sect	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed		lession in	
Cook	the supported organization(s).	1		
Seci	ion D. All Type III Supporting Organizations			
		100000000000000000000000000000000000000	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	1		
2	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	500 (100)	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have	2		
3	a significant voice in the organization's investment policies and in directing the use of the organization's		12.2	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations	1 - 1		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions,).		
а	The organization satisfied the Activities Test. Complete line 2 below.	5		
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instru	uctions).		
2	Activities Test. Answer lines 2a and 2b below.	ĺ	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	100		
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If	130	847	
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would	1111		
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	1	THE STATE OF	
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		Patt. 111
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Ves" describe in Part VI the role played by the organization in this regard	1 2h		

Sched	ule A (Form 990) 2021 BIG BROTHERS BIG SISTERS OF		**-***5	443	Page 6
_Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	aniza	itions		
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on No	v. 20,	1970 (explain in Part VI).	See	
	instructions. All other Type III non-functionally integrated supporting organizations mus	t com	olete Sections A through E		
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Y	'ear
			(A) Filor Tear	(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			v - 100 100 100 -
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			
Sec	tion B – Minimum Asset Amount		(A) Prior Year	(B) Current Y (optional)	ear
1	Aggregate fair market value of all non-exempt-use assets (see				\$100 E
	instructions for short tax year or assets held for part of year):				
ā	Average monthly value of securities	1a			
k	Average monthly cash balances	1b			
c	Fair market value of other non-exempt-use assets	1c			
c	Total (add lines 1a, 1b, and 1c)	1d			
€	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 0.015 of line 3 (for greater amount,				
	see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 0.035.	6		22 W 2 W 2 W 2 W 2 W 2 W 2 W 2 W 2 W 2	
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	on C – Distributable Amount			Current Yea	r
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	A SECTION OF	85.50 0000418969	
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction (see instructions).	6			
7	Check here if the current year is the organization's first as a non-functionally integrated T	ype III	supporting organization		
	(see instructions).	au e north solli)	The second secon		

Schedule A (Form 990) 2021

Schedule A (Form 990) 2021 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 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 Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required—provide details in Part VI) Other distributions (describe in Part VI). See instructions. 7 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2021 from Section C, line 6 10 Line 8 amount divided by line 9 amount (i) (ii) (iii) Section E - Distribution Allocations (see instructions) **Excess Distributions** Underdistributions Distributable Pre-2021 Amount for 2021 Distributable amount for 2021 from Section C, line 6 Underdistributions, if any, for years prior to 2021 (reasonable cause required-explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2021 a From 2016 **b** From 2017 c From 2018 d From 2019 e From 2020 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2021 distributable amount i Carryover from 2016 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2021 from Section D, line 7: a Applied to underdistributions of prior years b Applied to 2021 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2021 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2022. Add lines 3j and 4c. Breakdown of line 7: a Excess from 2017 b Excess from 2018 . c Excess from 2019 d Excess from 2020 e Excess from 2021

Schedule A (Form 990) 2021

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is described below.

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

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- · Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

	Section 501(c)(4), (5), or (6) organizations: Complete Part II				
Nam	e of organization BIG BROTHERS BIG SI	STERS OF			tification number
	SOUTHWEST WASHINGTO		wc	**-***54	
Pa	rt I-A Complete if the organization is exem	npt under section 501(c) or is a section	on 527 organizati	on.
1	Provide a description of the organization's direct and indire	ect political campaign activities	in Part IV. See in	structions for	
	definition of "political campaign activities."				
2	Political campaign activity expenditures. See instructions			▶ \$	
3_	Volunteer hours for political campaign activities. See instru	uctions			
Pa	rt I-B Complete if the organization is exen				
1	Enter the amount of any excise tax incurred by the organization	zation under section 4955		▶\$	
2	Enter the amount of any excise tax incurred by organization	on managers under section 495	55	▶\$	<u></u>
3	If the organization incurred a section 4955 tax, did it file Fo	orm 4720 for this year?			Yes No
	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
	rt I-C Complete if the organization is exen			ion 501(c)(3).	
1	Enter the amount directly expended by the filing organization	on for section 527 exempt fund	ction		
	activities			▶\$	
2	Enter the amount of the filing organization's funds contribu				
				▶\$	
3	Total exempt function expenditures. Add lines 1 and 2. Ent	ter here and on Form 1120-PC	DL,	3	
	line 17b			▶\$	
4	Did the filing organization file Form 1120-POL for this year				Yes No
5	Enter the names, addresses and employer identification nu				
	organization made payments. For each organization listed,		0 0		
	the amount of political contributions received that were pro				
	as a separate segregated fund or a political action committee		s needed, provide	information in Part IV.	T
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds. If none, enter -0	contributions received and promptly and directly
				Tanas ir none, enter o	delivered to a separate
					political organization. If none, enter -0-,
(4)					ii none, enter -o
(1)					
(0)					
(2)					5
(2)					
(3)					
(4)	The state of the s				
(4)					
(5)					
(5)					
(6)	T-10-10-10-10-10-10-10-10-10-10-10-10-10-				
(0)					

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

Sch	nedule C (Form 990) 2021 BIG	BROTHERS I	BIG SISTERS	OF	**-**5443	Page
P		anization is exem	pt under section	501(c)(3) and	filed Form 5768 (ele	ection under
_	section 501(h)).					
Α					ch affiliated group mem	ber's name,
	<u> </u>		excess lobbying expe			
В			and "limited control"	provisions appl	у.	
	Limits on	Lobbying Expend	ditures		(a) Filing	(b) Affiliated
	(The term "expenditure				organization's totals	group totals
1	a Total lobbying expenditures to influence	e public opinion (grass	sroots lobbying)			
	b Total lobbying expenditures to influence	e a legislative body (d	irect lobbying)			
	c Total lobbying expenditures (add lines	1a and 1b)				
	d Other exempt purpose expenditures					
	e Total exempt purpose expenditures (ac	ld lines 1c and 1d)				
	f Lobbying nontaxable amount. Enter the	amount from the folk	owing table in both			
	columns.					
	If the amount on line 1e, column (a) or (I	o) is: The lobbying r	nontaxable amount is:			
	Not over \$500,000	20% of the amo	unt on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 1	5% of the excess over \$5	00,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 1	0% of the excess over \$1	000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5	% of the excess over \$1,5	00,000.		
	Over \$17,000,000	\$1,000,000.				
9	g Grassroots nontaxable amount (enter 2	5% of line 1f)				
1	h Subtract line 1g from line 1a. If zero or					
	i Subtract line 1f from line 1c. If zero or	ess, enter -0-		L		
	j If there is an amount other than zero or	n either line 1h or line	1i, did the organization	file Form 4720		
	reporting section 4911 tax for this year	?				Yes No
			ging Period Under S			
	(Some organizations that m	and the second of the second o			te all of the five colum	ns below.
	,	10 take 1800 to 18	instructions for line	NAME OF TAXABLE PARTY.		
		Lobbying Expendi	tures During 4-Year	Averaging Pe	eriod	
	Calendar year (or fiscal year					
	beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
28	a Lobbying nontaxable amount					
-	Lobbying ceiling amount					
	(150% of line 2a, column (e))					
	(150% of line 2a, column (e))					
c	Total lobbying expenditures					
c	d Grassroots nontaxable amount					
е	Grassroots ceiling amount	Profession Committee				
	(150% of line 2d, column (e))					
7. 7						
- 1	f Grassroots Johnving expenditures		4	I		1

Schedule C (Form 990) 2021

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(:	a)		(b)	
description of the lobbying activity.	Yes	No	А	mour	ıt
1 During the year, did the filing organization attempt to influence foreign, national, state, or local					
legislation, including any attempt to influence public opinion on a legislative matter or					
referendum, through the use of: a Volunteers?		v			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X	X			
e Modia adverticements?		Х			
d Mailings to members, legislators, or the public?		X			
Publications, or published or broadcast statements?		X			-
• Cranto to other erganizations for labbuilde number		X			
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X			_
i Other activities?	10000000	X			
j Total. Add lines 1c through 1i		2:50		-	
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		x	SYN PARES	2017	NE MA
b If "Yes," enter the amount of any tax incurred under section 4912	1000	A PARTY			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		3			
Part III-A Complete if the organization is exempt under section 501(c)(4), section	501(c)(5),	or sec	ction		
501(c)(6).				TY	es I
1 Were substantially all (90% or more) dues received nondeductible by members?			1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?					
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior				_	
			tion 3		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes."	501(c)(5),	or sec	ction		is
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." 1 Dues, assessments and similar amounts from members	501(c)(5), o" OR (b)	or sec	ction		is
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of	501(c)(5), o" OR (b)	or sec	ction		is
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	501(c)(5), o" OR (b)	or sec Part II	ction		is
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year	501(c)(5), o" OR (b)	or sec Part II	ction		is
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year	501(c)(5), o" OR (b)	or sec Part II	ction		is
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total	501(c)(5), o" OR (b)	Part II	ction		is
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	501(c)(5), o" OR (b)	or sec Part II	ction		is
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	501(c)(5), o" OR (b)	Part II	ction		is
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying	501(c)(5), o" OR (b)	Part III	ction		is
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	501(c)(5), o" OR (b)	Part II 2a 2b 2c 3	ction		is
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Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures. See instructions Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.	501(c)(5), o" OR (b)	Part II 2a 2b 2c 3	ction II-A, line		is
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Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures. See instructions Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); (See instructions); and Part II-B, line 1. Also, complete this part for any additional information. SCHEDULE C, PART II-B, LINE 1 CONSULTING AND LOBBYING FOR BBBS PROGRAM EXPANSION INC	501(c)(5), o" OR (b) Part II-A, line	Part III 2a 2b 2c 3 4 5	etion II-A, line	3, 1	is
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Ne answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures. See instructions Part IV Supplemental Information rovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); (See instructions); and Part II-B, line 1. Also, complete this part for any additional information. SCHEDULE C, PART II-B, LINE 1 CONSULTING AND LOBBYING FOR BBBS PROGRAM EXPANSION INC 1. ASSISTING BBBS IN THE DEVELOPMENT OF ITS LEGISLATIVE.	Part II-A, line	Part II 2a 2b 2c 3 4 5	S AND	3, 1	

Part IV Supplemental Information (continued)
3. ATTEMPTING TO ACHIEVE PASSAGE, DEFEAT, OR AMENDMENT OF LEGISLATION ON
WHICH BBBS HAS TAKEN A POSITION;
4. ASSISTING IN THE DEVELOPMENT OF RELATIONSHIPS WITH KEY LEGISLATORS
STATEWIDE ELECTED OFFICIALS, AGENCIES, AND RELEVANT ORGANIZATIONS;
5. PREPARATION OF TESTIMONY AND TESTIFYING AT COMMITTEE HEARINGS; AND
6. ATTENDING AND PARTICIPATING IN HEARINGS AND MEETINGS REGARDING ISSUES
IMPORTANT TO BBBS.

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

Open to Public Inspection

_	e of the organization		Employer identification number
	BIG BROTHERS BIG SISTERS OF		
_	SOUTHWEST WASHINGTON		**-**5443
-	Complete if the organization answered "Yes" on F	ods or Other Similar Funds or A Form 990, Part IV, line 6.	Accounts.
		(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	A STATE OF THE STA	3
5	Did the organization inform all donors and donor advisors in writing that		
	funds are the organization's property, subject to the organization's exclu-	usive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in		
	only for charitable purposes and not for the benefit of the donor or dono	r advisor, or for any other purpose	
D			Yes No
P	art II Conservation Easements. Complete if the organization answered "Yes" on F	orm 990 Part IV line 7	
1	The state of the s		
	Purpose(s) of conservation easements held by the organization (check Preservation of land for public use (for example, recreation or education).		innered and I and I ame
	Protection of natural habitat		
	Preservation of open space	Preservation of a certified his	storic structure
2	Complete lines 2a through 2d if the organization held a qualified conser	vation contribution in the form of a conce	nyation
_	easement on the last day of the tax year.	valion contribution in the form of a conse	Held at the End of the Tax Year
a			
k	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic structure inclu	ded in (a)	2c
c	Number of conservation easements included in (c) acquired after 7/25/0	6, and not on a	
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, extin		
	tax year ▶		
4	Number of states where property subject to conservation easement is lo	ocated >	
5	Does the organization have a written policy regarding the periodic monit	toring, 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 ea	asements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of viola	tions, and enforcing conservation easem	ents during the year
	\$		
8	Does each conservation easement reported on line 2(d) above satisfy the	ne 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 easemer		
	balance sheet, and include, if applicable, the text of the footnote to the organization's accounting for conservation easements.	organization's financial statements that de	escribes the
P	art III Organizations Maintaining Collections of Art, F	listorical Treasures or Other 9	imilar Assats
	Complete if the organization answered "Yes" on Fo	orm 990, Part IV, line 8.	olilliai Assets.
1a	If the organization elected, as permitted under FASB ASC 958, not to re		sheet works
	of art, historical treasures, or other similar assets held for public exhibition		
	service, provide in Part XIII the text of the footnote to its financial statem		
b	If the organization elected, as permitted under FASB ASC 958, to report		eet works of
	art, historical treasures, or other similar assets held for public exhibition,		
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Farm 000 Dart V		▶ \$
2	If the organization received or held works of art, historical treasures, or o		ride the
	following amounts required to be reported under FASB ASC 958 relating		
a	Revenue included on Form 990, Part VIII, line 1		▶ \$
h	Accets included in Form 000 Part V		

*	*	_	*	*	*	5	4	4	3	

Schedule D (Form 990) 2021 BIG	BROTHERS BIG	SISTERS	OF		**-**	*5443	Page
Part III Organizations Main	taining Collections	of Art, Histo	rical T	reasures.	or Other	Similar Asset	
3 Using the organization's acquisition collection items (check all that appl	, accession, and other red						
a Public exhibition	d	Loan or exch	ange pr	ogram			
b Scholarly research	e						
c Preservation for future generati	ons						
4 Provide a description of the organiz		plain how they fur	ther the	organization	's exempt pu	rpose in Part	
XIII.				3			
5 During the year, did the organization	n solicit or receive donation	ons of art. historic	al treasu	ures, or othe	r similar		
assets to be sold to raise funds rath							Yes N
Part IV Escrow and Custon							
Complete if the organ	nization answered "Y	es" on Form 9	90, Pa	art IV, line	9, or repor	ted an amount	t on Form
990, Part X, line 21.	a custoding or other inter		L A				200 200 200 200 200 200 200 200 200 200
1a Is the organization an agent, trustee included on Form 990, Part X?							\Box \Box \Box \Box
b If "Yes," explain the arrangement in	Part VIII and complete th						Yes N
b it res, explain the arrangement in	ran Am and complete in	e following table.					Amount
c Beginning balance							Amount
						1c	
d Additions during the year						1d	
e Distributions during the year						1e	
f Ending balance2a Did the organization include an amo	unt on Form 000 Port V	lina 21 for soon				1f	ПупПы
b If "Yes," explain the arrangement in							Yes No
Part V Endowment Funds,		e explanation has	been p	rovided on F	aπ XIII		
Complete if the organ		es" on Form 0	an Pa	rt I\/ line	10		
Complete ii the organ	(a) Current year			T		(d) There were book	T 435
1a Decimains of war belows		(b) Prior y	ear	(c) Two ye	ars back	(d) Three years back	(e) Four years back
1a Beginning of year balance							
b Contributions							
c Net investment earnings, gains, and							
losses							
d Grants or scholarships							
e Other expenditures for facilities and	1						
programs							-
f Administrative expenses						***************************************	
g End of year balance							
2 Provide the estimated percentage of		ince (line 1g, colu	mn (a))	held as:			
a Board designated or quasi-endowme							
b Permanent endowment	%						
c Term endowment ▶ %	10 1 11 14000						
The percentages on lines 2a, 2b, and					. 2 10		
3a Are there endowment funds not in th	e possession of the organ	nization that are h	eld and	administered	for the		[]
organization by:							Yes No
							3a(i)
(ii) Related organizations							
b If "Yes" on line 3a(ii), are the related			le R?				3b
4 Describe in Part XIII the intended us		ndowment funds.				- 1	
Part VI Land, Buildings, and		-" - F ^		. 1) / 11 -		000 =	V. 11 3 4 5
Complete if the organ		The second secon			0005 000		
Description of property	(a) Cost or oth) Cost or o	230000000000000000000000000000000000000	(c) Accu	23.00.00.00.00.00.00	(d) Book value
	(investme	nt)	(othe	r)	deprec	lation	
1a Land							
b Buildings							
c Leasehold improvements							
d Equipment				10 515		79,589	-79,589
e Other				18,717			118,717
Total. Add lines 1a through 1e. (Column (d,) must equal Form 990, P	art X, column (B)	line 10	c.)			39,128

	(a) Description of security or category	(b) Book value	(c) Method of valuation:
	(including name of security)		Cost or end-of-year market value
Financial	derivatives		
Closely h	eld equity interests		
Other			
(A)	***************************************		
(B)	***************************************		
(C)	***************************************		700
(D)	***************************************	********	
(E)	***************************************		
(F) (G)			
(兴) (H)	***************************************		
	n (b) must equal Form 990, Part X, col. (B) line 12.)		
art VIII	Investments – Program Related.		
	Complete if the organization answered "Ye	es" on Form 990. Part IV. line	11c. See Form 990. Part X line 13
1	(a) Description of investment	(b) Book value	(c) Method of valuation:
			Cost or end-of-year market value
	(b) must equal Form 990, Part X, col. (B) line 13.)		
ıl. (Colum	Other Assets.		11d Coo Form 000 Dort V line 15
	Other Assets. Complete if the organization answered "Ye	s" on Form 990, Part IV, line	
	Other Assets.	s" on Form 990, Part IV, line	
ıl. (Colum	Other Assets. Complete if the organization answered "Ye	s" on Form 990, Part IV, line	
	Other Assets. Complete if the organization answered "Ye	s" on Form 990, Part IV, line	
	Other Assets. Complete if the organization answered "Ye	s" on Form 990, Part IV, line	
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	Other Assets. Complete if the organization answered "Ye	s" on Form 990, Part IV, line	
	Other Assets. Complete if the organization answered "Ye	s" on Form 990, Part IV, line	
art IX	Other Assets. Complete if the organization answered "Ye (a) Description (b) must equal Form 990, Part X, col. (B) line 15.)	s" on Form 990, Part IV, line	
art IX	Other Assets. Complete if the organization answered "Ye (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.	es" on Form 990, Part IV, line	(b) Book value
I. (Column	Other Assets. Complete if the organization answered "Ye (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes	es" on Form 990, Part IV, line	(b) Book value
art IX	Other Assets. Complete if the organization answered "Ye (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes line 25.	es" on Form 990, Part IV, line	(b) Book value
i. (Column	Other Assets. Complete if the organization answered "Ye (a) Description of (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes line 25. (a) Description of liability	es" on Form 990, Part IV, line	(b) Book value
. (Column	Other Assets. Complete if the organization answered "Ye (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes line 25.	es" on Form 990, Part IV, line	(b) Book value
. (Column	Other Assets. Complete if the organization answered "Ye (a) Description of (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes line 25. (a) Description of liability	es" on Form 990, Part IV, line	(b) Book value
. (Column	Other Assets. Complete if the organization answered "Ye (a) Description of (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes line 25. (a) Description of liability	es" on Form 990, Part IV, line	(b) Book value
I. (Column	Other Assets. Complete if the organization answered "Ye (a) Description of (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes line 25. (a) Description of liability	es" on Form 990, Part IV, line	(b) Book value
i. (Column	Other Assets. Complete if the organization answered "Ye (a) Description of (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes line 25. (a) Description of liability	es" on Form 990, Part IV, line	(b) Book value
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art IX I. (Columnart X	Other Assets. Complete if the organization answered "Ye (a) Description of (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes line 25. (a) Description of liability	es" on Form 990, Part IV, line	(b) Book value
art IX	Other Assets. Complete if the organization answered "Ye (a) Description of (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes line 25. (a) Description of liability	es" on Form 990, Part IV, line	(b) Book value

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Schedule D (F	orm 990) 2021	BIG	BROTHERS	BIG	SISTERS	OF	**-***5443	Page \$
Part XIII	Supplemen	tal Info	ormation (conti	inued)				-5-
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