

Big Pine Athletic Association

P.O. Box 430089
Big Pine Key, FL 33043

Phone: 305-872-0292
Fax: 305-872-7049
Email: BPKPark@aol.



The BPAA is a
supported by:




United Way
of Monroe County

5/27/10

Grants Administrator Lisa Tennyson,

This letter is a request for funding for the Big Pine Athletic Association to be placed in the Fiscal Year budget as a line item.

In the past we have received the amount of \$45,000.00 . Due to budget cuts we received \$44,000 last year. the success of our programs for the youth of Monroe County, which has increased our expenses and the rising cost insurance, we ask that we again be considered for the amount of \$45,000.00.

The BPAA is the umbrella organization for **Little League, AYSO soccer, Keys Cudas' Swim Team, Lower Keys Youth Football and Cheerleading, Big Pine Bocce League, the After School Program, Big Pine Bark Park** and the new **Lower Keys Paradise Tennis**. We are the managing organization for BPAA owned Watson Field and county owned Blue Heron Park.

Our changing society requires a safe place for children to spend their out of school time. Children need a place where they can develop conflict resolution skills, good hygiene skills, learn co-operation and good sportsmanship. They need a place to work on homework, practice computer skills and interact with other children and caring adults. The Blue Heron Park After-School Care and the Summer Day Camp Programs provide such a place for the children of Big Pine and the Lower Keys. The Park and Youth Center are a safe haven for children; unlike some homes, the park is free from alcohol, tobacco or drug use.

The use of these funds will be the same as in the past. Funds are to be used for— employee payroll, liability insurance, supplies, phone, security, sanitary facilities rental, and newsletter expenses.

Thank you for your attention to this matter.

Respectfully,

Scott Wade
Exec. Dir.
Big Pine Athletic Assoc.

Statement of Service to the Community

The **Big Pine Athletic Association (BPAA)** is a 501 (c) (3) non-profit organization that provides organized sports as well as other activities for youth. The BPAA has served the Lower Keys community for twenty-nine years by organizing, promoting, and providing the facilities, insurance and equipment for sport teams and other wholesome youth-oriented activities. Currently the BPAA has over **310 families** as members. From February to June 2010, 94 children participated in **Little League Baseball**, T-Ball and Softball. From September 2009 through January 2010 **AYSO** has 73 children participating in youth soccer. A competitive swimming program, **Keys Cudas**, involved over 65 children during the past summer. In 2009 the **Big Pine Youth Football & Cheerleading League** had over 87 children participated in this activity. The BPAA subsidizes any family who cannot afford membership dues and/or sport fees.

310
- 94
57
- 181

For the past fifteen years the BPAA has also operated the Blue Heron Park and Youth Center located on Lytton's Way on Big Pine Key. The two-acre county park includes a lighted basketball court, picnic pavilions, a "beach" volleyball court and children's play area. Inside the Youth Center there is a snack bar/kitchen area, T.V./game room, two computers, restrooms and an office for the administration of the BPAA. Natural History exhibits (**487 specimens**) and an Accelerated Reader library (**1342 titles**) are now available at the youth center. Under the youth center is a lighted game area that has six game tables, two ping-pong, two-air hockey and two foosball. The game room is enclosed with fencing and has roll-down canvas to protect the equipment during inclement weather.

The youth center is open every weekday, year round from 3:00 to 6:00 p.m. with a supervised **After School Program** including activities such as 4 computers, homework assistance, games, sports and arts and crafts. The after school program has **33 children** registered. A Sugarloaf school bus brings **12 - 20 children daily**. Other children ride their bikes or walk to the park each afternoon. The After School Program has expanded to offer **full day services** on school "*Professional and Non-work Non-Paid days*"

33

The BPAA is proud to have been selected as the management entity for the Skate park at the newly opened Big Pine Community Park. The operational hours are from 12:00 - 8:00 pm 7 days a week with over 50 children and adults registered. In addition the BPAA has now formed a Bocce League consisting of 28 teams and over 135 members.

50
-
264

Many other groups, such as the Boy Scouts, Cub Scouts, Girl Scouts, AYSO soccer, Big Pine Little League, utilize the facility.

In 2010, the BPAA sponsored four events, which will be continued on an annual basis. The Moose Club sponsored a Family Fun Festival at Blue Heron Park, Art in The Park, Kids Benefit and the annual Easter Egg Hunt. In an effort to continue reaching more children in the Keys, a display of Natural History specimens is installed at the Sugarloaf School. All of these events were very successful and provided more positive experiences for our community's young people and their families.

Summer activities include the Blue Heron Park Summer Drop-in from 3:00pm - 6:00pm, AYSO Summer Soccer Camps, Paradise Tennis lessons, Football and Cheerleading training, and Keys Cudas Swim Club practice and meets.

Attachment A-2

Big Pine Athletic Association Board Meeting
Dec 10, 2010

Call to Order: 6:00 PM

Members in Attendance: Jason O'Brian, Susan Miller, Scott Wade, Steve Miller, Sara Maschal, Bob Mock, Michele Adams, Jacqui Norman

Meetings of Last Meeting: Attached

Treasurer's Report: Attached

Program Reports:

- Blue Heron Park: Attached
- Little League: No report
- Swim Team: Will start up again in April.
- AYSO: Verbal report
- Football: No report
- Bocce: on hiatus

Old Business:

The new officer election was held today. It was put into motion to keep the same board with agreement from all officers. Steve seconded the motion and all were in favor.

Board Members for 2011 are as follows:

President: Steve Miller

Vice President: Jacqui Norman

Treasurer: Jason O'Brian

Secretary: Susan Bishop Miller

Little League : Sean MacDonald

Swim :Sarah Mashcal

AYSO: Bob Mock

Football: Seam MacDonald

Bocce:Nicole Koppen-Price

Bark Park: Michele Adams

New Business: Scott has been paid in full. It was suggested a request for a monthly payment be submitted.

Form **990-EZ**

Short Form
Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
 (except black lung benefit trust or private foundation)

OMB No. 1545-1150

2009

Open to Public Inspection

Department of the Treasury
 Internal Revenue Service

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.
 ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2009 calendar year, or tax year beginning , 2009, **and ending** , 20

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization, number and street, city, town, state, and ZIP code BIG PINE ATHLETIC ASSOCIATION INC PO BOX 430089 BIG PINE KEY FL 33043		D Employer identification number 59-2255760
				E Telephone number 305-872-0292
				F Group Exemption Number ▶

• **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

I Website: ▶ _____

G Accounting Method: Cash Accrual
 Other (specify) ▶ _____

H Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

J Tax-exempt status (check only one) - 501(c)(3) (insert no.) _____ 4947(a)(1) or _____ 527

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 121,243.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

		1	2	3	4	5a	5b	5c	6a	6b	6c	7a	7b	7c	8	9
Revenue	1	Contributions, gifts, grants, and similar amounts received	89,611.													
	2	Program service revenue including government fees and contracts	22,341.													
	3	Membership dues and assessments														
	4	Investment income														
	5a	Gross amount from sale of assets other than inventory														
	5b	Less: cost or other basis and sales expenses														
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)														
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>														
	6a	Gross revenue (not including \$ _____ of contributions reported on line 1)	9,291.													
6b	Less: direct expenses other than fundraising expenses															
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	9,291.														
7a	Gross sales of inventory, less returns and allowances															
7b	Less: cost of goods sold															
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)															
8	Other revenue (describe ▶ _____)															
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	121,243.														
Expenses	10	Grants and similar amounts paid (attach schedule)														
	11	Benefits paid to or for members														
	12	Salaries, other compensation, and employee benefits	78,084.													
	13	Professional fees and other payments to independent contractors	2,460.													
	14	Occupancy, rent, utilities, and maintenance	1,622.													
	15	Printing, publications, postage, and shipping														
	16	Other expenses (describe ▶ SEE STMT)	39,333.													
17	Total expenses. Add lines 10 through 16	121,499.														
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	(256.)													
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	13,387.													
	20	Other changes in net assets or fund balances (attach explanation)														
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	13,131.													

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

		(See the instructions for Part II.)		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	12,914.	22	10,956.	
23	Land and buildings	4,361.	23	3,218.	
24	Other assets (describe ▶ _____)		24		
25	Total assets	17,275.	25	14,174.	
26	Total liabilities (describe ▶ SEE STMT)	3,888.	26	1,043.	
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	13,387.	27	13,131.	

For Privacy Act and Paperwork Reduction Act Notice, see the separate instruction. Form **990-EZ** (2009)

Part V Other Information (Note the statement requirements in the instructions for Part V.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
a	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions	37a	0
b	Did the organization file Form 1120-POL for this year?	37b	
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a	X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9	39a	
b	Gross receipts, included on line 9, for public use of club facilities	39b	
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911; section 4912; section 4955		
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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	40b	X
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	X
41	List the states with which a copy of this return is filed		
42a	The organizations books are in care of BLUE HERON PARK Telephone no. 305-872-0292 Located at 30415 LYTTONS WAY FL BIG PINE KEY ZIP + 4 33043-		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	42b	X
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country:	42c	X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year	43	
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	X

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.

All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46 - 49b and complete the tables for lines 50 and 51.

- | | Yes | No |
|--|------------|----|
| 46 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 | 46 | X |
| 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II | 47 | X |
| 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. | 48 | X |
| 49a Did the organization make any transfers to an exempt non-charitable related organization? | 49a | X |
| b If "Yes," was the related organization a section 527 organization? | 49b | |
- 50** Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

f Total number of other employees paid over \$100,000

- 51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000

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

Sign Here

Signature of officer: STEVE MILLER Date: 04/23/2010
 Type or print name and title: PRESIDENT

Paid Preparer's Use Only
 Preparer's signature: [Signature] Date: 04/19/2010 Check if self-employed:
 Firm's name (or yours if self-employed), address, and ZIP + 4: BIG PINE TAX SERVICE INC EIN: 65-1073940
14 PALMETTO AVENUE Phone no: 305-872-3096
BIG PINE KEY FL 33043-

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

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

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	65152.	58479.	51983.	63886.	89611.	329111.
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	5695.	5696.	41785.	31033.	22341.	106550.
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	70847.	64175.	93768.	94919.	111952.	435661.
7 a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						435661.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	70847.	64175.	93768.	94919.	111952.	435661.
10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, & 12.)	70847.	64175.	93768.	94919.	111952.	435661.

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	100.00 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	100.00 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	0.00 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	0.00 %

19 a 33 1/3 % support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3 % support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

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

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

2009

Name of the organization
 BIG PINE ATHLETIC ASSOCIATION INC

Employer identification number
 59-2255760

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

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

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

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year) ▶ \$ _____

Caution. Organization that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.
 These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization BIG PINE ATHLETIC ASSOCIATION INC	Employer identification number 59-2255760
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Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	MONROE COUNTY <hr/> PO BOX 1026 <hr/> KEY WEST FL 33041-1026	\$ 80,911.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	UNITED WAY OF MONROE CNTY <hr/> PO BOX 2910 <hr/> KEY WEST FL 33045-2910	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
—	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
—	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
—	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
—	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Depreciation and Amortization (Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return BIG PINE ATHLETIC ASSOCIATION	Business or activity to which this form relates FORM 990	Identifying number 59-2255760
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Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount. See the instructions for a higher limit for certain businesses	1	250,000.
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	800,000.
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6 (a) Description of property (b) Cost (business use only) (c) Elected cost		
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8.	9	
10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions.)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property) (See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2009	17	1,142.
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	<input type="checkbox"/>	

Section B-Assets Placed in Service During 2009 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depr. (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

Section C-Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions)

21 Listed property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	22	1,142.
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

2009 ASSET DETAIL REPORT

Description	Date Acqd	Cost	Bus. Use	179+ Spec.	Basis	Method	Rec. Per.	Cv	Prior Depr.	Current Depr.	Next Year	Prior AMT	Current AMT	Gain/Price	Sales Price	Date Sold
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Form: FORM 990

Rental Property: N/A

Depreciation Class: N/A

In Service Year: 1982

BUILDING	06/82	7383	100		7383	SL	25.0	HY	7081			1918				
GROUND IMPRO	01/82	8880	100		8880	SL	20.0	HY	8436			666				

16263

In Service Year: 1983

GROUND IMPRO	06/83	4358	100		4358	SL	20.0	HY	4352			545				
BLDG IMPROV	01/83	2175	100		2175	SL	20.0	HY	2056			272				

6533

In Service Year: 1984

GROUND IMPRO	06/84	1966	100		1966	SL	18.0	HY	1963			164				
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In Service Year: 1999

FURNISHINGS	03/99	2724	100		2724	SL	7.0	HY	2723			2197				
TV VCR	04/99	1059	100		1059	SL	7.0	HY	1058			831				
PRINTER	10/99	400	100		400	SL	5.0	HY	400			280				

4183

In Service Year: 2000

COMPUTER PRI	06/00	1737	100		1737	MACRS	5.0	HY	1737			1476				
SCOREBOARDS	06/00	4441	100		4441	MACRS	7.0	HY	4441			3965				

6178

6178

5441

2009 ASSET DETAIL REPORT

Description	Date Acqd	Cost	Bus. Use	179+ Spec.	Basis	Method	Rec. Per.	Cv	Prior Depr.	Current Depr.	Next Year	Prior AMT	Current AMT	Gain/Price	Sales Price	Date Sold
In Service Year: 2001																
DIGITAL CAME	06/01	205	100		205	SL	5.0	HY	205			205				
FAX COPY MAC	10/01	1183	100		1183	SL	5.0	HY	1183			1183				
2 COMPUTERS	07/01	1891	100		1891	SL	5.0	HY	1890			1890				
GAME TABLES	06/01	3673	100		3673	SL	7.0	HY	3673			3673				
OFFICE FURNI	07/01	420	100		420	SL	7.0	HY	420			420				
CURTAIN CANO	08/01	4588	100		4588	SL	5.0	HY	4588			4588				
REFRIGERATOR	07/01	769	100		769	SL	7.0	HY	769			769				
VCR	06/01	90	100		90	SL	5.0	HY	90			90				
		12819			12819				12818			12818				
In Service Year: 2002																
SWING SET	03/02	500	100		500	SL	7.0	HY	462	36		462	36			
CONCRETE BCH	07/02	700	100		700	SL	7.0	HY	650	50		650	50			
		1200			1200				1112	86		1112	86			
In Service Year: 2003																
BOOKCASE	03/03	200	100		200	SL	7.0	HY	159	29	12	159	29			
CLOSET 48 IN	07/03	89	100		89	SL	7.0	HY	71	13	5	71	13			
2 COMPUTERS	12/03	1200	100		1200	SL	5.0	HY	1200	17	6	1200	17			
CLOSET 30 IN	12/03	116	100		116	SL	7.0	HY	93	17		93	17			
MONITOR	01/03	137	100		137	SL	5.0	HY	136	300		136	300			
NATURAL HIST	06/03	2097	100		2097	SL	7.0	HY	1648	300	149	1648	300			
		3839			3839				3307	359	172	3307	359			
In Service Year: 2004																

2009 ASSET DETAIL REPORT

Description	Date Acqd	Bus. Use	179+ Spec.	Basis	Method	Rec. Per.	Cv	Prior Depr.	Current Depr.	Next Year	Prior AMT	Current AMT	Gain/Price	Sales Price	Date Sold	
NATURAL HIST	08/04	581	100	581	SL	7.0	HY	373	83	83	373	83				
In Service Year: 2005																
NATURAL HIST	06/05	779	100	779	SL	7.0	HY	389	111	111	389	111				
In Service Year: 2006																
REFRIGERATOR	02/06	743	100	743	SL	7.0	HY	265	106	106	265	106				
ICE MACHINE	02/06	2781	100	2781	SL	7.0	HY	993	397	397	993	397				
		3524		3524				1258	503	503	1258	503				
Form Totals:		57865		57865				53504	1142	869	31571	1142				

US 990**Other Liabilities****2009**

Description	Beginning of year book amount	End of year book amount
CREDIT CARD	3,607.	
PAYROLL TAXES	281.	1,043.
	3,888.	1,043.

US 990	Other Expenses			2009
Description	Expenses per books	Net investment income	Adjusted net income	Charitable purposes
ADVERTISING	120.			
BANK CHARGES	60.			
DEPRECIATION EXPENSE	1,142.			
INSURANCE	9,853.			
INTEREST PAID	181.			
LICENSES	136.			
MEET FEES	1,119.			
OFFICE EXPENSE	1,900.			
REGISTRATION FEES	3,500.			
SNACKS & SOCIALS	1,380.			
SPONSOR FEE	50.			
SPORTS EQUIPMENT & UNIFORMS	10,314.			
TELEPHONE	1,629.			
TOURNAMENT FEES	3,100.			
TROPHIES & PRIZES	849.			
UMPIRE & SCOREKEEPER FEES	4,000.			
	39,333.			

Attachment I

BPAA Fee Schedule - 2011

\$150.00 per yearAfter school care
\$75.00 per seasonBaseball
\$75.00 per seasonFootball
\$80.00 per seasonSwimming
\$70.00 per seasonSoccer
\$25.00 per seasonBocce
\$15.00 per lessonTennis



Consumer's Certificate of Exemption

Issued Pursuant to Chapter 212, Florida Statutes

DR-14
R. 04/05
11/13/09

85-8012529060C-8	11/30/2009	11/30/2014	ORG BENEFITTING MINORS
Certificate Number	Effective Date	Expiration Date	Exemption Category

This certifies that

BIG PINE ATHLETIC ASSOCIATION INC
30415 LYHONS WAY
BIG PINE KEY FL 33043-0000

is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.



Important Information for Exempt Organizations

DR-14
R. 04/05

1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. See Rule 12A-1.038, Florida Administrative Code (FAC).
2. Your *Consumer's Certificate of Exemption* is to be used solely by your organization for your organization's customary nonprofit activities.
3. Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.
4. This exemption applies only to purchases your organization makes. The sale or lease to others by your organization of tangible personal property, sleeping accommodations or other real property is taxable. Your organization must register, and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, FAC).
5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third degree felony. Any violation will necessitate the revocation of this certificate.
6. If you have questions regarding your exemption certificate, please contact the Exemption Unit of Central Registration at 850-487-4130. The mailing address is PO BOX 6480, Tallahassee, FL 32314-6480.

0005391 11/11/10



2011 Florida Annual Resale Certificate for Sales Tax

DR-13A
R. 01/11

THIS CERTIFICATE EXPIRES ON DECEMBER 31, 2011

Business Name and Location Address

BIG PINE ATHLETIC ASSOCIATION INC
WATSON FIELD
BIG PINE KEY FL 33043

Certificate Number
54-8012085108-6

This is to certify that all tangible personal property purchased or rented, real property rented, or services purchased by the above business are being purchased or rented for one of the following purposes:

- Resale as tangible personal property.
- Re-rental as tangible personal property.
- Resale of services.
- Re-rental as real property.
- Incorporation into and sale as part of the repair of tangible personal property by a repair dealer.
- Re-rental as transient rental property.
- Incorporation as a material, ingredient, or component part of tangible personal property that is being produced for sale by manufacturing, compounding, or processing.

This certificate cannot be reassigned or transferred. This certificate can only be used by the active registered dealer or its authorized employees. Misuse of this *Annual Resale Certificate* will subject the user to penalties as provided by law. **Use signed photocopy for resale purposes.**

Presented to: _____
(insert name of seller on photocopy) (date)

Presented by: _____
Authorized Signature (Purchaser) (date)



ATTACHMENT M

Florida Department of Agriculture & Consumer Services
CHARLES H. BRONSON, Commissioner
Tallahassee, Florida

September 2, 2010

Division of Consumer Services
2005 Apalachee Pkwy
Tallahassee FL 32399-6500
Phone: 1-800-HELP-FLA
URL: <http://www.800helpfla.com>

Refer To: CH7783

BIG PINE ATHLETIC ASSOCIATION, INC.
PO BOX 430089
BIG PINE KEY, FL 33043-0089

RE: BIG PINE ATHLETIC ASSOCIATION, INC.
REGISTRATION#: CH7783
EXPIRATION DATE: October 10, 2011

Dear Sir or Madam:

The above-named organization/sponsor has complied with the registration requirements of Chapter 496, Florida Statutes, the Solicitation of Contributions Act. A COPY OF THIS LETTER SHOULD BE RETAINED FOR YOUR RECORDS.

Every charitable organization or sponsor which is required to register under s. 496.405 must conspicuously display the registration number issued by the Department and in capital letters the following statement on every printed solicitation, written confirmation, receipt, or reminder of a contribution:

"A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE."

The Solicitation of Contributions Act requires an annual renewal statement to be filed on or before the date of expiration of the previous registration. The Department will send a renewal package approximately 60 days prior to the date of expiration as shown above.

Thank you for your cooperation. If we may be of further assistance, please contact the Solicitation of Contributions section.

Sincerely,

Sherni Neal

Sherni Neal
Senior Analyst
850-410-3680
Fax: 850-410-3804
E-mail: neals@doacs.state.fl.us

BPAA Employee
Anti-Discrimination and Harassment Policy

The Big Pine Athletic Association is an "equal opportunity employer."
The employer will not discriminate in employment, recruitment, advertisements for employment, compensation, termination, upgrading, promotions, and other conditions of employment against any employee or job applicant on the bases of race, creed, color, national origin, gender or sexual orientation.

The Big Pine Athletic Association is committed in all areas to providing a work environment that is free from harassment. Harassment based upon an individual's sex, race, ethnicity, national origin, age, religion or any other legally protected characteristics will not be tolerated. All employees, including supervisors and other management personnel, are expected and required to abide by this policy. No person will be adversely affected in employment with the employer as a result of bringing complaints of unlawful harassment.