	Form	99	n	D,	eturn of Organi	zation Evo	mpt Erom Ir	come	Tav		ОМВ	No 1545-0047
	rom	33		IV6	sturn or Organi	Zation Exe	mpt From ii	ICONIE	; IAX			2019
	(Rev J	lanuary :	2020)		501(c), 527, or 4947(a)	• •	•			lations)	<u> </u>	
			e Treasury		not enter social securi				1 6	11	// '	n to Public
		Revenue			io to www.irs.gov/Form	1990 for instruction						spection
				ear, or tax year			, 2019, 3	and endi			, 20	
	$\overline{}$	heck if ap	•		autorBridge II Spo	rts Inc				D Employ	er identificat	
	$\overline{}$	dress ch	=	Doing business	Ī.,			20-8577	/055			
	$\overline{}$	ame chan Itial returr	-		eet (or PO box if mail is not deli ey School Road	vered to street address	5)	Room/sui	ie	E leiepho	ne number	30-2742
	$\overline{}$		/terminated		te or province, country, and ZIP	or foreign postal code	***	I		G Gross r		10-2742
	_	nended n		Durham, NC		or to eigh postal code			1	\$	состры	611,154
* */	$\overline{}$	plication			ess of principal officer Ashle	ev Thomas			H(a) Is this a gr	oup return for	subordinates?	Yes X No
3/		·		Same as Ca				5	H(b) Are all s	•	i	Yes No
//	I Ta	x-exemp	t status. X 50	(c)(3) 501(c)) () ◀ (insert no)	4947(a)(1) or	527		If "No," a	ttach a list.	(see instructio	ens)
O.) W	ebsite:	bridg	2sports.or	g		<i>U</i> /		H(c) Group	exemption n	number 🕨	
			anization X Co	poration Trust	Association Other	<u> </u>	L Year of formati	on 200	7 M S	ate of legal	dom:cile]	NC
2021	Par		Summary								_	
		1	-	-	s mission or most signific	1	To create op					
∞ .	ø				1 disabilities to play individual, team and recreational sports, findi							
	au	1	player wit	in.		·						
AUG	Activities & Governance	1	Charlettia bay	. D &	ization discontinued its			150/ af ita				
⋖	ő				e governing body (Part V	•	osed of more than 2		net assets.	3		13
Ω	•ජ ග	1			embers of the governing	-			<i>.</i>	4	_	13 12
ž	<u>i</u>	Į.	-	_	oyed in calendar year 20		•			5		14
茎	₹			•	ate if necessary)		,			6		1,565
5	ď	7a -	Total unrelated b	usiness revenue	from Part VIII, column (C), line 12				7a		0
SCANNED		bl	Net unrelated bu	siness taxable in	come from Form 990-T,	Infe 39/ · · ·	· · · · · · · · · ·			7b		0
•						600	\sim		Prior Year		Curre	ent Year
0	_	i		d grants (Part VI	•	16:44:2	M ·) · · · · · ·	·	777	,155		574,829
*	nge -		_	revenue (Part V	•-		· · · · · · · · ·	•	11	,749		20,670
170	eve	1			umn (A), lines 3, 4, and 7	*		·		746		32
W	œ	1	-		(A), lines 5, 6d, 8c, 9c, 1	=	- 40\	`-		,666		15,623
17 17					th 11 (must equal Part V (Part IX, column (A), line		e 12)	: 	811	,316		611,154
(%)		1		•	Part IX, column (A), line	•						0
1/2		i			ployee benefits (Part IX		5-10)		443	, 366	_	414,556
()	penses				rt IX, column (A), line 11					/300		0
~	ben	ь	Total fundraising	expenses (Part I	IX, column (D), line 25)	>	77,325					
	EX	17 (Other expenses	Part IX, column	(A), lines 11a-11d, 11f-2-	4e)		·	374	, 383		362,748
Ξ		18 7	Total expenses.	Add lines 13-17	(must equal Part IX, colu	ımn (A), line 25)		·	817	,749		777,304
0		19 f	Revenue less ex	penses Subtrac	t line 18 from line 12		· · · · · · · · · ·	•	(6	(433)		(166,150)
<i>⊊</i> 4	Ces							Begin	ning of Currer	nt Year	End o	of Year
2021	Net Assets Fund Balanc		Total assets (Par	•		• • • • • • • • •		•		, 615		610,696
12	et A	!	Total liabilities (F	•			• • • • • • • •	•		970		18,443
	Part		Signature		stract line 21 from line 20			•	756	645		592,253
. 77					this return, including accompany	ring schedules and stat	ements, and to the best of	of my knowl	edge and belief	. it is		
599018	true, co	mect, an	d complete Declarat	on of preparer (other	than officer) is based on all info	rmation of which prepar	rer has any knowledge					
ھـ		1	1 tsa	eus -	Momera					-	7 15	12026
2	Sign		Signature of	fficer						Date	_	
0	Here	1	A Ash	en Th	10mas, CE	OBF	ounder					
-			Type or print		- (- thy					
Ø	n . • •		Print/Type prepare	s name	Preparer's signature	C D	Date		Check	⊠ ₁ ₽	TIN	
	Paid	0 20-	Mark Dane		Mark	S. Dane	5 04-08-20		self-empl		P01321	
	Prep		Firm's name		S Danes CPA PL				m's EIN	46-10	061285	
	Use (Only	Firm's address		Frenchmans Cree	ek Drive		PI	tone no.			
	May	9 IDS 4	tienues this set		am NC 27713	netnickons)				919-45	52-1999 VIV	es No
					rer shown above? (see in the separate instruction	<u>-</u>		```		::::	X Y	
	EEA	-p-01 44 O	ILCUUCHUH P		no separate insuluction		9/		~	ムイ	01	rm 990 (2019)
							12	/		ノ		i

Form	m 990 (2019) Bridge II Sports Inc 20-8577055 Pa	ge 2
	art III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission	
1	To create opportunities for youth and adults with physical disabilities to play individual, te	am
	and recreational sports, finding the player within.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	pnor Form 990 or 990-EZ?	
	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? · · · · · · · · · · · · · · · · · · ·	
	if "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	
	the total expenses, and revenue, if any, for each program service reported	
4a	(Code) (Expenses \$459,656 including grants of \$) (Revenue \$20,670	
	Adaptive Sports Programs: Bridge II Sports (BIIS) provided approximately 241 adaptive, individual	
	and team sport opportunities impacting over 2,400 individuals year-round, in weekly and seasons	
	programs, serving cross physical disabilities. In 2019, Bridge II Sports partnered with National	
	Wheelchair Basketball Association, Governor Morehead School, UNC Chapel Hill, Duke University,	
	State University, Blue Cross/Blue Shield NC, MetLife, CISCO, RTI International, Wells Fargo, Dr. Company of the	
	Energy, DOMTAR and Capitol Broadcasting. BIIS also organized and ran the following events: Pade	
	Lake Crabtree, Youth Wheelchair Basketball Camp, Valor Games SE, and August Madness. In addition the the country Bridge II Country provides account which the country and the country of t	
	to the events, Bridge II Sports provides seasonal weekly practice/opportunities for: boccia, qu	
	ball, wheelchair basketball for youth, archery, air rifle, cycling, hiking, kayaking, and golf	
		—
4b	(Code) (Expenses \$ 81,116 including grants of \$) (Revenue \$	
	Public Education and Communication: Bridge II Sports impacted the community providing 180	
	Programs, 15 Clinics, 12 Competitions, and 550 program hours, serving 2,488 participants, with	
	total support of 7,033 volunteer hours. Media impact was over 3M due to events, PSA, and word	o£_
	mouth. The staff presented 156 times to the community and at state and national conferences.	
	Presentations included UNC and Duke spinal cord and brain injury support groups, regional	
	Civitan, Kiwanis and Rotary Clubs, NC State Parks, Recreation, and Tourism Management classes.	
	EveryBODYPlaysNC is changing discrimination and expectation by introducing 751 school children	
	throughout NC to adapted sports.	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	
46	(Code) (Expenses \$) (Nevertice \$)	
		—
		—
4d	Other program services (Describe on Schedule O)	_
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses > 540 .772	

Form 990 (2019)

Part IV Checklist of Required Schedules

			Yes	No
, 1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
•	complete Schedule A · · · · · · · · · · · · · · · · · ·	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
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	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<u>x</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors		1	
	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		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0		_ <u>x</u> _
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		v
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			X
·	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.		1	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	x	
ь	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u>x</u>
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
ď	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets		ŀ	
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u>x</u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	445	ļ	
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
12a		120		
L	Schedule D, Parts XI and XII	12a	X	—
U	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional - · · · · · · · ·	12b		v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>x</u>
14a	Did the organization maintain an office, employees, or agents outside of the United States? • • • • • • • • • • • • • • • • • • •	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	170		<u>x</u>
_	fundralsing, business, investment, and program service activities outside the United States, or aggregate		Į	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x _
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	İ	x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	}	х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	1	x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	أ	х_
19	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		<u>x</u>
20 a	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		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		Ī	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
EEA		Form 9	90 (20	119)

			Yes	No
,22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
•	Part IX, column (A), line 2? 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			1
	employees? If "Yes," complete Schedule J · · · · · · · · · · · · · · · · · ·	23	<u> </u>	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		ļ
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	١		
	to defease any tax-exempt bonds?	24c	-	
d 250	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	-
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25-		١
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	25a		X
b	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	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	255		<u> </u>
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee	.		
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part			
	IV instructions, for applicable filing thresholds, conditions, and exceptions)	Į l		{
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	•		
	"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		х
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			1
	"Yes," complete Schedule L, Part IV · · · · · · · · · · · · · · · · · ·	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	х	L
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			1
	conservation contributions? If "Yes," complete Schedule M · · · · · · · · · · · · · · · · · ·	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			1
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22		
34	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		х
34	or IV, and Part V, line 1· · · · · · · · · · · · · · · · · · ·	34		
35a	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	33a		X
_	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		ĺ
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable	335		
••	related organization? If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
_	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	1	х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O	38	x	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance		_ = L	
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Form W-2G included in line 1a Enter -0- if not applicable		l	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and		}	
	reportable gaming (gambling) winnings to prize winners?	1c	х	
EEA		Form	990 (2	(019

Form	990 (2019) Bridge II Sports Inc 20-85770	55	F	age 5
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
, 2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
1	Statements, filed for the calendar year ending with or within the year covered by this return 2a 14			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? • • • • • • • • • • • • • • • • • • •	2b	x	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
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 in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
b	if "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		ж
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?	6a)	x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			l
	and services provided to the payor?	7a		x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282? • • • • • • • • • • • • • • • • • • •	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year			Ī
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? • • • • • • • • • • • • • • • • • • •	7h		х
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		1
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		Ĺ
10	Section 501(c)(7) organizations. Enter.			1
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			ĺ
a	Gross income from members or shareholders · · · · · · · · · · · · · · · · · · ·			
b	Gross income from other sources (Do not net amounts due or paid to other sources			İ
	against amounts due or received from them)			1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		ļ
	Note: See the instructions for additional information the organization must report on Schedule O			
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	.		
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	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			

Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "	Vo"		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			. X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar	} ;		
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1 1		ı
	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, or 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	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7ь		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		-	
-	the year by the following			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	x	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
-	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	100	x
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	x	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		-	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	x	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	x	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	x	
13	Did the organization have a written whistleblower policy?	13	x	
14	Did the organization have a written document retention and destruction policy?	14	x	
15	Did the process for determining compensation of the following persons include a review and approval by	-		
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	x	
b	Other officers or key employees of the organization	15b	^	x
-				
16a	· · · · ·	198		
···	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	าอม	1	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			v
h	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		x
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			x
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	16a		x
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?			x
Sec	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? tion C. Disclosure	16a		x
Sect	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		<u>x</u>
Sec	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)	16a		X
Sect	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply	16a		x
Sec. 17 18	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Upon request Other (explain on Schedule O)	16a		x
Sect	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,	16a		x
Sect 17 18	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	16a		x
Sec. 17 18	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,	16a		x

•		1									
Form 990 (20	IO) Builder II Grants	T								20 057	1055 Boso 7
Part VII	(9) Bridge II Sports Compensation of Officers, Dire		istee	es k	(e)	, Fr	nnlo	vee	s. Highest Co	20-8577 mnensated Fi	
[447 444	Independent Contractors		40.00	, i	٠.,		p.o	,	o, mgmoor oo	mpensatea Li	inprojects, and
	Check if Schedule O contains a response of	or note to any	/ line ir	n this	Pai	4 VII	ı				
Section A.	Officers, Directors, Trustees, Key Emplo										
	this table for all persons required to be listed									thin the	
organization's	· ·		F 07.00		.			. ,			
_	•	e taretone (u	chatha	e indi		مام	or om	2017	ations) rosamloss	of amount of	
	of the organization's current officers, director				IVIGE	Jais .	or orga	driiZd	auoris), regardiess	oi amount oi	
	. Enter -0- in columns (D), (E), and (F) if no c										
	of the organization's current key employees,	-									
	organization's five current highest compensi								•		
	reportable compensation (Box 5 of Form W-2	2 and/or Box	7 of F	orm 1	1099	9-MI	SC) of	moı	re than \$100,000 fr	om the	
•	nd any related organizations.										
_	of the organization's former officers, key emp	•	•		•		ed em	ploye	ees who received n	nore than	
\$100,000 of re	portable compensation from the organization	n and any rela	ated o	rganı	ızatı	ons					
	f the organization's former directors or trus			•		•	•			itee of the	
organization, r	nore than \$10,000 of reportable compensation	on from the o	rganız	ation	and	d an	y relat	ed o	rganizations		
See instruction	ns for the order in which to list the persons at	oove									
Check this	box if neither the organization nor any relate	ed organizati	on con	npen	sate	ed ar	ny cum	ent (officer, director, or t	rustee	
						(C)					
	(A)	(B)			Po	sition			(D)	(E)	(F)
	Name and title	Average					han one s both a		Reportable	Reportable	Estimated amount
		hours					s boar a r/trustee		compensation	compensation	of other
		per week							from the	from related organizations	compensation from the
		(list any hours for	우필	펿	Officer	₹	율품	ਹੁ	organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization and
		related	Individual trustee or director	nstitutional trustee	8	Key employee	ploye	Former			related organizations
		organizations	9 5	nal		l by	# g				
		below	stee] SE		*	Pens	}	}		
		dotted line)		#			Highest compensated employee	1			
				1]	İ	
			<u> </u>			_	ļ	<u> </u>			
(1) Shannor	Collins	2 _00									
Chair			X	ll	X		 		0	0	0
	Douglas-Ward	<u>2 .</u> 00									
	e Com. Co-Chair		X					-	0	0	0
(3) Lonnie		2 .00			ĺ						_
	Committee Chair		Х				ļ	-	0	O	0
(4) Ashley		40 .00					ļ				
Founder as			X	\vdash	<u> </u>		<u> </u>		93,780	0_	
(5) Ruth Ar		2 .00									_
Secretary		0.00	Х	\vdash	Х				0	o_	0
(6) Woody W		2 .00									
	Governance Committee		Х						<u> </u>	0	, o
(7) Louise		2 .00								_	_
Vice Chair		0.00	Х	$\vdash \vdash$	X			-	0	0_	0
(8) Kevin M		2 .00									
	Marketing and Media	2 00	X	\vdash				\vdash	0	0	0
(9) Bill Ma		2 .00							_		_
<u>Treasurer</u>			Х		X		L	┷	0	0	0_

2.00

2.00

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0_

(10)John_Flynt

(11)Edward Dudley____

(12)Matt_Dutton

(13)Erroll Reese_____

Marketing and Media, Co-Chair

(14)

Community Events Co-Chair

Finance Committee Co-Chair

360 Club Co-Chair

Part	99 (2019) Bridge II Sports VII Section A. Officers, Directors, Trustees		ovees	and	Hia	hest	t Com	pen	sated Employees	20-8577 (continued)		:	Page 8
	Occuping officers, pricetors, frustee.	, rey Empi	7,003,	4.10			COOM	PCII	Sate Cimployees	(donanded)			
	(A) Name and title	(B) Average	1 '		Po: eck m		han one s both a		(D) Reportable	(E) Reportable	Estin	(F) Estimated amoun	
	•	per week (list any	<u> </u>	er and	,	rector	/trustee)	_	compensation from the organization	compensation from related organizations		of othe mpensa from the	tion
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated emptoyee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)		anızatıor d organı	
<u>(15)</u>													
(16)			-										
[17)													
18)													
22)													
23)													
(24)													
25)				$\vdash \vdash$									
1b c	Subtotal	ion A -	• • •				· · ·						
d	Total (add lines 1b and 1c)								93,780	0_			0
	Total number of individuals (including but not limite reportable compensation from the organization	ed to those lis	ited ab	ove) 	who	rec	eived	more	e than \$100,000 of	· · · · · · · · · · · · · · · · · · ·			
3	Did the organization list any former officer, director			•	e, or	high	est co	mpe	ensated			Yes	No
4	employee on line 1a? If "Yes," complete Schedule For any individual listed on line 1a, is the sum of re organization and related organizations greater tha	eportable con	npensa	tion				-		• • • • • • • • •	3		X
5	Individual				• •						4		x
Secti	for services rendered to the organization? If "Yes," on B. Independent Contractors	' complete So	hedule	J fo	or su	ch p	erson				5	<u> </u>	х
1	Complete this table for your five highest compensation	-											
	compensation from the organization Report comp	ensation for t	the cale	enda	r ye	ar er	nding v	with		zation's tax year			
	(A) Name and business addres	ss							(B) Description of service	es	(C) Compens	salion	
2	Total number of independent contractors (including	-		hose	liste	ed at	bove)	who	-				
EA	received more than \$100,000 of compensation from	m the organiz	zation		-						Form	000 /2	010)

•	i	Check if Schedule O contains a response or		(A) Total revenue	(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
					function revenue	business revenue	from tax under sections 512-514
	1a	Federated campaigns 1	a				
g o	b	Membership dues · · · · · · 1	b				
Contributions, Gifts, Grants and Other Similar Amounts	C	Fundraising events · · · · · · 1	С	-		:	
Ē	d	Related organizations 1	d			1	
Sifts ar A	е	Government grants (contributions) • • 1	e 33,906				
ž į	f	All other contributions, gifts, grants,					
it S re		and similar amounts not included above 1	f 540,923				
혈	g	Noncash contributions included in					
i di		lines 1a-1f · · · · · · · · 1	g \$ 33,711	•			
	h	Total. Add lines 1a-1f		574,829			
			Business Code	•			
ø	2a	Program service fees	711210	20,670	20,670		
₹	b						
Program Service Revenue	C		1				
e e ve	d						
900	e						
4		All other program service revenue	·				
	g	Total. Add lines 2a-2f		20,670			
:	3	Investment income (including dividends, interes	*				
		other similar amounts)		32			32
	4	Income from investment of tax-exempt bond pro					
	5	Royalties					
		(i) Real	(ii) Personal				
		Gross rents 6a					
		Less rental expenses 6b					
	i	Rental income or (loss) 6c		· · · · · · · · · · · · · · · · · · ·			
	٥	Net rental income or (loss)					
	7a	Gross amount from (i) Secunities sales of assets	(ii) Other			1	
		other than inventory					}
ą.	b	Less: cost or other basis and sales expenses 7b					1
Other Revenue	_	Gain or (loss) · · · · · 7c	· · · · · · · · · · · · · · · · · · ·				l .
Şe V	•	Net gain or (loss)					<u> </u>
F	1	Gross income from fundraising	1				-
Ě	-	events (not including \$		r			}
•		of contributions reported on line					1
			Ba	• 1			
	ь	F _	Bb	į			
	1	Net income or (loss) from fundraising events					
	9a	Gross income from gaming					
	ŀ	activities, See Part IV, line 19)a				
	ь	Less direct expenses	lb				
	С	Net income or (loss) from gaming activities •					
	10a	Gross sales of inventory, less returns and allowances	Da				
	ь		0b	,			
		· · · · · · · · · · · · · · · · · ·					
	Ť	- Company of the control of the cont	Business Code				<u> </u>
<u> </u>	11a	Sales tax refunds	900099	9,919	9,919		
Miscellanous Revenue	1	Insurance recovery	900099	4,234	4,234		
ella Ven	1	Miscellaneous	900099	1,470	1,470		
Rei	!	All other revenue		2,2,0	2,3,0	-	
Σ		Total. Add lines 11a-11d		15,623			-
				611,154	36,293	0	32
EA				/			Form 990 (2019)

Form 990 (2019) Bridge II Sports Inc Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	not include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8b, 9	9b, and 10b of Part VIII.	Total Capolises	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	93,780	31,885	30,948	30,947
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		Ì		
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages	288,004	195,324	72,787	19,893
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	3,543	1,181	1,181	1,181
10	Payroll taxes	29,229	17,227	8,072	3,930
11	Fees for services (nonemployees)				
а	Management				
b	Legal				
C	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
•	(A) amount, list line 11g expenses on Schedule O.)	17,396	9,267	8,129	
12	Advertising and promotion	2,862		2,862	
13	Office expenses	10,793	4,594	4,276	1,923
14	Information technology	6,049	2,584	1,810	1,655
15	Royalties			1,010	2,033
16	Occupancy	45,726	32,008	9,145	4,573
17	Travel	54,374	50,968	1,703	1,703
18	Payments of travel or entertainment expenses	- 54,574	30,500	1,703	1,703
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	29,930	20,951	5,986	2,993
23	Insurance				
23 24		22,745	17,651	3,896	1,198
44	Other expenses Itemize expenses not covered			}	
	above (List miscellaneous expenses on line 24e If				
	line 24e amount exceeds 10% of line 25, column			İ	
	(A) amount, list line 24e expenses on Schedule O)				
a	Equipment	2,200	2,011	189	
ь	Event supplies	92,547	87,631	2,458	2,458
C	Competitive tournaments	2,060	2,060		
d	Events	70,402	62,879	5,277	2,246
е	All other expenses	5,664	2,551	488	2,625
25	Total functional expenses. Add lines 1 through 24e- · ·	777,304	540,772	159,207	77,325
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)				
EEA					Form 990 (2019)

Form 990 (2019) Bridge II Sports Inc 20-8577055 Page 11 Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year 1 1 38,784 27,396 2 113,160 2 71,328 3 Pledges and grants receivable, net 3 310,568 295,570 Accounts receivable, net 4 82,180 2,243 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined

201,834

8

9

23

24

25

26

25,970

61,439

18,443

111,024

under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) Notes and loans receivable, net

basis Complete Part VI of Schedule D 10a

Secured mortgages and notes payable to unrelated third parties

Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X

Total liabilities. Add lines 17 through 25

Unsecured notes and loans payable to unrelated third parties

Organizations that follow FASB ASC 958, check here

Prepaid expenses and deferred charges

10a Land, buildings, and equipment: cost or other

23

24

26

	b	Less: accumulated depreciation	10b	96,687	87,088	10c	105,147
	11	Investments - publicly traded securities				11	
	12	Investments - other secunties See Part IV, line 11		• • • • • • • • • • • • • • • • • • •		12	
	13	Investments - program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			39,811	15	47,573
	16	Total assets. Add lines 1 through 15 (must equal line 33			782,615	16	610,696
	17	Accounts payable and accrued expenses			25,970	17	18,443
- 1	18	Grants payable				18	
	19	Deferred revenue				19	
1	20	Tax-exempt bond liabilities				20	
İ	21	Escrow or custodial account liability Complete Part IV of	Sched	lule D		21	
တ္ဆ	22	Loans and other payables to any current or former officer	, direc	tor,			
abilitles		trustee, key employee, creator or founder, substantial con	ntributo	or, or 35%			
ap		controlled entity or family member of any of these person	s			22	
		0		_			

Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. Net assets without donor restrictions . . 332,912 27 257,922 423,733 28 334,331 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 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 32 756,645 592,253 33 33 782,615 610,696 Form 990 (2019) FFA

Form	n 990 (2019) Bridge II Sports Inc 20-857	7055	P	age 12
Pa	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			. X
. 1	Total revenue (must equal Part VIII, column (A), line 12)		611	154
` 2	Total expenses (must equal Part IX, column (A), line 25)		777	,304
3	Revenue less expenses. Subtract line 2 from line 1		(166	,150)
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))		756	645
5	Net unrealized gains (losses) on investments			
6	Donated services and use of facilities			
7	Investment expenses			
8	Pnor penod adjustments			
9	Other changes in net assets or fund balances (explain on Schedule O)		1	,758
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	32, column (B))		592	253
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			$\cdot \square$
			Yes	No
1	Accounting method used to prepare the Form 990 🔲 Cash 🕱 Accrual 🔲 Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	ļ		İ
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		x
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
	reviewed on a separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	x	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a	- 1		
	separate basis, consolidated basis, or both:			
	X Separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	- · 2c	Х	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain on	1	1	ľ
	Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the			
	Single Audit Act and OMB Circular A-133?	3a		x
b	if "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	• • 3b		<u> </u>
EEA		Form	990 (2019)

SCHEDULE A

Department of the Treasury

Internal Revenue Service Name of the organization **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2019

Open to Public Inspection

Employer identification number

Bri	.dge	'II Sports Inc					20-857705	
Pa	ırt I	Reason for Public Charit	y Status (All or	ganizations must co	omplete	this part	.) See instructions	
The	orgai	nization is not a private foundation beca	ause it is: (For lines	1 through 12, check only	one box.)			
1		A church, convention of churches, or	association of churc	ches described in section	170(b)(1)	(A)(i).	6	
2	Ц	A school described in section 170(b)	(1)(A)(il). (Attach So	chedule E (Form 990 or 9	90-EZ))			1
3	Ц	A hospital or a cooperative hospital se	ervice organization	described in section 170	(b)(1)(A)(ii	i).)
4	Ш	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the						
		hospital's name, city, and state						
5	u	An organization operated for the bene		niversity owned or operat	ed by a go	vernmenta	l unit described in	
		section 170(b)(1)(A)(iv). (Complete F						
6	님	A federal, state, or local government of	_					
7	X	An organization that normally receive	•	• • •	emmental u	unit or from	the general public	
_	П	described in section 170(b)(1)(A)(vi).	, , ,					
8	님	A community trust described in section						
9	LJ	An agricultural research organization			-			
		or university or a non-land-grant colle university.	ge of agriculture (se	ee instructions) Enter the	name, city	, and state	or the college or	
10	П	An organization that normally receive	s. (1) more than 33	1/3% of its support from i	contribution	s. membe	rship fees, and gross	
	_	receipts from activities related to its ex	• •	• •			· · · · · · · · · · · · · · · · · · ·	
		support from gross investment income	•	•				
		acquired by the organization after Jun		,		•		
11		An organization organized and operat	-		•			
12		An organization organized and operat	ed exclusively for the	he benefit of, to perform t	he function	s of, or to	carry out the purposes	
		of one or more publicly supported org	anizations describe	d in section 509(a)(1) or	section 50	09(a)(2) S	ee section 509(a)(3).	
		Check the box in lines 12a through 12	d that describes the	e type of supporting orga	nızation an	d complete	lines 12e, 12f, and 12g	3
	а	Type I. A supporting organization	operated, supervis	ed, or controlled by its su	pported or	ganızatıonı	(s), typically by giving	
		the supported organization(s) the	power to regularly	appoint or elect a majority	y of the dire	ectors or tr	ustees of the	
		supporting organization You mus	st complete Part I\	/, Sections A and B.				
	b	Type II. A supporting organization	supervised or con	trolled in connection with	ıts support	ed organız	ation(s), by having	
		control or management of the sup	porting organization	n vested in the same pers	sons that c	ontrol or m	anage the supported	
		organization(s). You must compi	ete Part IV, Sectio	ns A and C.				
	C		A supporting organ	ization operated in conne	ection with,	and function	onally integrated with,	
		its supported organization(s) (see	instructions) You	must complete Part IV,	Sections A	, D, and E		
	d						· . · · · · · · · · · · · · · · · · · ·	
		that is not functionally integrated.					and an attentiveness	
		requirement (see instructions) You					H. T III	
	е	Check this box if the organization				a type i, i	уре н, туре ні	
	£	functionally integrated, or Type III	-	· · · · · · · · · · · · · · · · · · ·				
	f	Enter the number of supported organi Provide the following information about						
	9 "	Name of supported organization	(ii) EIN	(ili) Type of organization	(iv) Is the o	manization	(v) Amount of monetary	(vi) Amount of
	(*,	realize of supported organization	(, 2	(described on lines 1-10	listed in you	r governing	support (see	other support (see
				above (see instructions))	docum	ent?	Instructions)	instructions)
					Yes	No		
(A)								
(B)								
(C)	,							
/D)		****						
(D)								
(E)								
Tota					1	1		

20-8577055 Page 2 Schedule A (Form 990 or 990-EZ) 2019 Bridge II Sports Inc 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 (c) 2017 (d) 2018 Calendar year (or fiscal year beginning in) ▶ (a) 2015 (b) 2016 (e) 2019 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 727,838 589,459 777,154 906,467 574,830 3,575,748 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 12,494 15,150 21,608 12,470 5,000 66,722 4 Total. Add lines 1 through 3 740,332 921,617 611,067 789,624 579,830 3,642,470 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 870,859 Public support. Subtract line 5 from line 4 2,771,611 Section B. Total Support (c) 2017 (e) 2019 Calendar year (or fiscal year beginning in) ▶ (a) 2015 (b) 2016 (d) 2018 (f) Total 740,332 921,617 611,067 789,624 579,830 3,642,470 8 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar sources 31 70 66 32 245 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 1,305 710 21,666 15,623 39,304 11 Total support. Add lines 7 through 10 . . 3,682,019 12 Gross receipts from related activities, etc. (see instructions) 71,848 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) ▶ 🗍 Section C. Computation of Public Support Percentage 75.27 % 14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) 15 <u>63.53</u> % 16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this \mathbf{x} b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 17a 10%-facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line

15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

_	dule A (Form 990 or 990-EZ) 2019 Bridge II	Sports Inc	: selbad in Cas	4: E00/-\/	<u>, </u>	20-85770)55 Page/3
P	Support Schedule for Organi					d & !!&	
	(Complete only if you checked to						nder Part II.
<u></u>	If the organization fails to qualif	y under the te	ests listed bei	ow, please co	ompiete Part	11.)	/_
	ction A. Public Support	1 1 20245	4 2 2040	() 0047	40040	1 1 20040	1 /2 =
_	endar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees						
2	received. (Do not include any "unusual grants") Gross receipts from admissions, merchandise					/	
2	sold or services performed, or facilities						
	furnished in any activity that is related to the		,	ŀ			
2	organization's tax-exempt purpose	<u> </u>	 			 	
3	Gross receipts from activities that are not an				1	/	
A	unrelated trade or business under section 513 - Tax revenues levied for the		<u> </u>			//	
*					/	1	
	organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities		 	-	/		1
•	furnished by a governmental unit to the			[1	
	organization without charge						
6	Total. Add lines 1 through 5	<u> </u>		1	/	 	
	Amounts included on lines 1, 2, and 3	ļ	 		/		
	received from disqualified persons					İ	
b	Amounts included on lines 2 and 3			/			
_	received from other than disqualified			/	1		
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year					}	ļ
С	Add lines 7a and 7b			1			-
8	Public support. (Subtract line 7c from		1	f			†
	line 6.)	ì	/				
Se	ction B. Total Support			<u> </u>			
Cal	endar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,					1	
	royalties, and income from similar sources			<u> </u>			
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses		1				
	acquired after June 30, 1975						
C	Add lines 10a and 10b						
11							
	activities not included in line 10b, whether	ľ					1
	or not the business is regularly carried on						ļ
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, 10¢, 11,						
	and 12.)						<u> </u>
14	First five years. If the Form 990 is for the or						
	organization, check this box and stop here					· · · · · · · ·	•••• □
	tion C. Computation of Public Support						
	Public support percentage for 2019 (line 8, c					15	%
	Public support percentage from 2018 Sched					16	%
Sec	tion D. Computation of Investment In						
17	Investment income percentage for 2019 (line					17	%
18	Investment income percentage from 2018 Sc					18	%
19a	33 1/3% support tests - 2019. If the organization						
_	17 is not more than 33 1/3%, check this box						
b	34 1/3% support tests - 2018. If the organization	ation did not ch	neck a box on l	ine 14 or line 1	9a, and line 16	is more than 3	33 1/3%, and

 Part IV Supporting Organizations

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

Section	A. All	Supporting	Organizations

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

	Yes	No
1		
2		
3a		
<u> </u>		
3ь		
3c		
4a		
4b		
4c		
5a		
5b 5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

	dule A (Form 990 or 990-EZ) 2019 Bridge II Sports Inc	20-8577055		Р	age 5
Pa	Int IV Supporting Organizations (continued)			V 1	N -
11	Has the organization accepted a gift or contribution from any of the following persons?	_	-	Yes	No
	A person who directly or indirectly controls, either alone or together with persons described in (b) an	nd (c)			
u	below, the governing body of a supported organization?		la		
h	A family member of a person described in (a) above?	 	lb	$\overline{}$	
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide details		_		
	ction B. Type I Supporting Organizations	7 117 471.		!	
			П,	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		-		
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times du	-	Ì		
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervi				
	controlled the organization's activities. If the organization had more than one supported organization	•			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the si				
	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	n ın Part			
	VI how providing such benefit carned out the purposes of the supported organization(s) that operate	ed,			
	supervised, or controlled the supporting organization.	2	!		
Sec	ction 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 organization.	1		- 1	
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how		Ì		
	or management of the supporting organization was vested in the same persons that controlled or ma			ľ	
	the supported organization(s).	1			
Sec	ction D. All Type III Supporting Organizations	 	1.	. 1	
	Did the association and ide to each of its associated associated by the test developed the fifth of the second			/es	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month		l	Į	
	organization's tax year, (i) a written notice describing the type and amount of support provided during				
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) co	- 1		ŀ	
2	organization's governing documents in effect on the date of notification, to the extent not previously Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the su	·	+		
-	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in it	* *	İ	i	
	the organization maintained a close and continuous working relationship with the supported organization	· ·		ŀ	
3		· · · / / / / / / / / / / / / / / / / /			
•	significant voice in the organization's investment policies and in directing the use of the organization			- 1	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization				
	supported organizations played in this regard.	3			
Sec	tion E. Type III Functionally Integrated Supporting Organizations		1.		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during ti	he year (see instruc	ction	15).	
а	The organization satisfied the Activities Test Complete line 2 below.				
b	The organization is the parent of each of its supported organizations. Complete line 3 below.				
C	The organization supported a governmental entity Describe in Part VI how you supported a governmental entity.	remment entity (see	ins <u>tr</u>	uctio	ns).
2	Activities Test. Answer (a) and (b) below.		_ \	res	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt pur	poses of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI ide	entify	-		
	those supported organizations and explain how these activities directly furthered their exempt pure	-			
	how the organization was responsive to those supported organizations, and how the organization de	termined	ı		
	that these activities constituted substantially all of its activities.				
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one			- 1	
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Pai				
	reasons for the organization's position that its supported organization(s) would have engaged in thes				
	activities but for the organization's involvement.		1		
3	Parent of Supported Organizations. Answer (a) and (b) below.	Ì			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors,				
_	trustees of each of the supported organizations? Provide details in Part VI.	3a	<u> </u>	_	
þ	Did the organization exercise a substantial degree of direction over the policies, programs, and activ				
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this	s regard. 3b)	- 1	

20-8577055

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	ganiz	ations				
1 Check here if the organization satisfied the Integral Part Test as a qualifying	trust o	n Nov. 20, 1970 (explain	in Part VI). See			
instructions. All other Type III non-functionally integrated supporting organization	zations	must complete Sections	A through E.			
Special A. Adjusted Nat Income		(A) Prior Voor	(B) Current Year			
Section A - Adjusted Net Income		(A) Prior Year	(optional)			
1 Net short-term capital gain	1					
2 Recovenes of prior-year distributions	2					
3 Other gross income (see instructions)	3					
4 Add lines 1 through 3.	4					
5 Depreciation and depletion	5					
6 Portion of operating expenses paid or incurred for production or						
collection of gross income or for management, conservation, or						
maintenance of property held for production of income (see instructions)	6					
7 Other expenses (see instructions)	7					
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8					
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
Aggregate fair market value of all non-exempt-use assets (see	\top		(opacital)			
instructions for short tax year or assets held for part of year).						
a Average monthly value of securities	1a	······				
b Average monthly cash balances	1b					
c Fair market value of other non-exempt-use assets	1c					
d Total (add lines 1a, 1b, and 1c)	1d		+			
e Discount claimed for blockage or other	+					
factors (explain in detail in Part VI):						
Acquisition indebtedness applicable to non-exempt-use assets	2					
3 Subtract line 2 from line 1d.	3	••••				
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,	1					
see instructions).	4					
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6 Multiply line 5 by .035.	6					
7 Recoveries of prior-year distributions	77					
8 Minimum Asset Amount (add line 7 to line 6)	8					
Section C - Distributable Amount			Current Year			
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		<u> </u>			
2 Enter 85% of line 1.	2	 	†			
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		 			
4 Enter greater of line 2 or line 3.	4		1			
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).						
7 Check here if the current year is the organization's first as a non-functionally	ıntean	ated Type III supporting o	rganization (see			
instructions)						

Schedule A (Form 990 or 990-EZ) 2019 20-8577055 Page 7 Bridge II Sports Inc 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 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) Other distributions (describe in Part VI). See instructions. 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 2019 from Section C, line 6 10 Line 8 amount divided by line 9 amount (iii) (iii) (i) Section E - Distribution Allocations (see instructions) **Underdistributions** Distributable **Excess Distributions** Pre-2019 **Amount for 2019** Distributable amount for 2019 from Section C, line 6 Underdistributions, if any, for years prior to 2019 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2019 a From 2014 **b** From 2015 c From 2016 d From 2017 e From 2018 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2019 distributable amount Carryover from 2014 not applied (see instructions) Remainder Subtract lines 3g, 3h, and 3i from 3f. Distributions for 2019 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2019 distributable amount c Remainder. Subtract lines 4a and 4b from 4. 5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI See instructions. Excess distributions carryover to 2020. Add lines 3

and 4c.

8 Breakdown of line 7: a Excess from 2015 b Excess from 2016 c Excess from 2017 d Excess from 2018 e Excess from 2019

Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019

EEA

SCHEDULE D (Form 990)

, Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047 2019

Open to Public Inspection

Bri	dge II Sports Inc	•	20-8577055
Pa		unds or Other Similar Funds or Acco	
	Complete if the organization answered "Yes" on		
	Compose in the organization and the compose in the	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) Ballat Ballata Inno	(b) 1 stids and stire accounts
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (dunng year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in wr	nting that the assets held in donor advised	
_	funds are the organization's property, subject to the organization		
6	Did the organization inform all grantees, donors, and donor adv		
•	only for chantable purposes and not for the benefit of the donor		
			· · · · · · · · · · · · · · · · · · ·
Pa	t II Conservation Easements.		· · · · · · · · · · · · · · · · · · ·
	Complete if the organization answered "Yes" or	n Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or educ		f a historically important land area
	Protection of natural habitat		f a certified historic structure
	Preservation of open space		· • • • • • • • • • • • • • • • • • • •
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in the form of a co-	nservation
	easement on the last day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		· · 2a
b			
c	Number of conservation easements on a certified historic struc	ture included in (a)	
d	Number of conservation easements included in (c) acquired aff		
_		•••••	2d
3	Number of conservation easements modified, transferred, release	ased, extinguished, or terminated by the orga	
-	tax year >	, .	3
4	Number of states where property subject to conservation easer	ment is located	
5	Does the organization have a written policy regarding the peno		
-	violations, and enforcement of the conservation easements it h		∏Yes ∏No
6	Staff and volunteer hours devoted to monitoring, inspecting, ha		
	•	_	• •
7	Amount of expenses incurred in monitoring, inspecting, handling	g of violations, and enforcing conservation e	asements during the year
	▶ \$	- · · · · · · · · · · · · · · · · · · ·	• •
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170(h)(4)	(B)(ı)
	and section 170(h)(4)(B)(ii)?		
9	in Part XIII, describe how the organization reports conservation	easements in its revenue and expense state	ement, and
	balance sheet, and include, if applicable, the text of the footnote	e to the organization's financial statements th	at describes the
	organization's accounting for conservation easements		
Pa	t III Organizations Maintaining Collections	of Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" of	n Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958,	not to report in its revenue statement and ba	lance sheet works
	of art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthera	ance of public
	service, provide, in Part XIII the text of the footnote to its finance	al statements that describes these items	
b	If the organization elected, as permitted under FASB ASC 958,	to report in its revenue statement and balance	ce sheet works of
	art, historical treasures, or other similar assets held for public e	xhibition, education, or research in furtherand	ce of public service,
	provide the following amounts relating to these items:		
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treas	ures, or other similar assets for financial gain	, provide the
	following amounts required to be reported under FASB ASC 95		
а	Revenue included on Form 990, Part VIII, line 1		· · · · · · • \$
h	Assets included in Form 990 Part Y		 ¢

	ule D (Form 990) 2019 Bridge II Spor					20-857		Page 2
Pa	rt III Organizations Maintaining	Collections of	Art, Historic	cal Treasures	, or Ot	<u>her Similar A</u>	issets (co	ntinued)
3	Using the organization's acquisition, accession	n, and other records,	check any of the	e following that ma	ake signifi	cant use of its		
	collection items (check all that apply)							
а	a Dublic exhibition d Loan or exchange programs							
b	Scholarly research		e 🗌 (Other				
C	Preservation for future generations							
4	Provide a description of the organization's coll	lections and explain h	now they further	the organization's	exempt p	ourpose in Part		
	XIII		-	Ū		·		
5	During the year, did the organization solicit or	receive donations of	art, historical tre	asures, or other s	ımılar			
	assets to be sold to raise funds rather than to	be maintained as par	t of the organiza	ition's collection?		<i></i>	∏ Yes	∏No
Pa	Part IV Escrow and Custodial Arrangements.							
	Complete if the organization	answered "Yes"	on Form 990), Part IV, line	9, or re	ported an am	ount on Fo	orm
	990, Part X, line 21.				-	•		
1a	Is the organization an agent, trustee, custodia	n or other intermedia	ry for contributio	ns or other assets	not		·····	
	included on Form 990, Part X?						· · · 🗌 Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII a	and complete the follo	wing table					_
						A	mount	
С	Beginning balance				. 10			
d	Additions during the year				. 10			•
е	Distributions during the year				. 1e	:		
f	Ending balance				. 11			
2a	Did the organization include an amount on Fo	rm 990, Part X, line 2	1, for escrow or	custodial account	lability?		· Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the expl	anation has bee	n provided on Pa	rt XIII			П
Pai	rt V Endowment Funds.					· · · · · · · · · · · · · · · · · · ·		
	Complete if the organization:	answered "Yes"	on Form 990	, Part IV, line	10.			
		(a) Current year	(b) Prior year	(c) Two year	's back	(d) Three years bad	k (e) Four	ears back
1a	Beginning of year balance							
b	Contributions							
c	Net investment earnings, gains, and							
	losses		1				1	
d	Grants or scholarships							
e	Other expenditures for facilities and							
	programs							
f	Administrative expenses					•		
g	End of year balance							
2	Provide the estimated percentage of the curre	nt year end balance (line 1g, column	(a)) held as.			<u> </u>	
а	Board designated or quasi-endowment	%	-					
ь	Permanent endowment	%						
c	Term endowment ▶ %							
	The percentages on lines 2a, 2b, and 2c shou	ld equal 100%						
3a	Are there endowment funds not in the possess		on that are held a	and administered	for the			
	organization by	J					F	Yes No
	(i) Unrelated organizations						. 3a(i)	
	(ii) Related organizations · · · · · · ·						. 3a(ii)	
ь	If "Yes" on line 3a(ii), are the related organization	ions listed as require	d on Schedule R				. Зъ	
4	Describe in Part XIII the intended uses of the d	organization's endowi	ment funds					 '
Par	Part VI Land, Buildings, and Equipment.							
	Complete if the organization a	answered "Yes"	on Form 990	, Part IV, line	11a. Se	e Form 990,	Part X, line	e 10.
	Description of property	(a) Cost or oth	er basis (b)	Cost or other basis	(c)	Accumulated	(d) Book	value
		(investme	ent)	(other)	de	epreciation		
1a	Land							
b	Buildings							
C	Leasehold improvements	• •						
d	Equipment			111,909		68,551		43,358
е	Other			89,925		28,136		61,789
Total	. Add lines 1a through 1e (Column (d) must eq	qual Form 990, Part X	, column (B), line					05,147

Part VII		ne			20-8	5//055 Fage 3
Pait VII	Investments - Other Securities. Complete if the organization answered '	"Yes" on Form	n 990, Part	IV, line 11b. Se	e Form 9	90, Part X, line 12
	(a) Description of security or category (including name of security)		(b) Book val		(c)	Method of valuation nd-of-year market value
(1) Financial						no-or-year market value
` •	eld equity interests					
(3) Other	cid equity interests					
(A)						
(B)						
(C)						
(D)						· · · · · · · · · · · · · · · · · · ·
(E)						
(F)			······································			
(G)						
(H)						
Total. (Colum	in (b) must equal Form 990, Part X, col (B) line 12)		•			
Part VIII	Investments - Program Related.		·			
	Complete if the organization answered '	"Yes" on Forn	n 990, Part	IV, line 11c. See	Form 9	90, Part X, line 13.
	(a) Description of investment		(b) Book val	ue		Method of valuation nd-of-year market value
(1)						
(2)						
(3)				-	 	
(4)	 					
(5)						
(6)						
(7)						
(8)						
(9)						
		· • • • •				
Part IX	Other Assets.					
	Complete if the organization answered '	"Yes" on Forn	n 990, Part	IV, line 11d. Se	e Form 9	90, Part X, line 15.
	(a) Desc	ription				(b) Book value
	d use of facilities, net					24,815
	st in assets-community fdtn					22,758
(3)						
(4)					-+	
(5)						
(6)			<u> </u>			
<u>(7)</u>						
(8)						
	n (b) must equal Form 990, Part X, col (B) line 15)				. •	47,573
Part X	Other Liabilities.					41,513
	Complete if the organization answered " line 25.	'Yes" on Fom	n 990, Part	IV, line 11e or 1	1f. See F	form 990, Part X,
1.		A-1	,, <u>,</u>			······
	(a) Description of liability	(b) Book va	iye			
(2)	income taxes					
(3)						
(4)						
(5)	•					
(6)						
(7)						
(8)						
(9)						
	(b) must equal Form 990, Part X, col (B) line 25) · >					
	uncertain tax positions. In Part XIII, provide the text of	the footnote to th	e organization	's financial statemer	nts that repo	orts the
organization's	liability for uncertain tax positions under FASB ASC 74	10 Check here if	the text of the	footnote has been p	rovided in F	Part XIII · · · · · · []

Sched	fule D (Form 990) 2019 Bridge II Sports Inc 2	0-8577055	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	r Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	756,822
2	Amounts included on line 1 but not on Form 990, Part Vill, line 12.		
а	Net unrealized gains (losses) on investments		
þ	Donated services and use of facilities	1	
С	Recovenes of prior year grants	1	
d	Other (Describe in Part XIII)	1	
е	Add lines 2a through 2d	2e	145,668
3	Subtract line 2e from line 1	3	611,154
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)	1	
С	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	611,154
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	•	
1	Total expenses and losses per audited financial statements	1	921,214
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	1]	
c	Other losses	†	
d	Other (Describe in Part XIII.)	1	
e	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2 _e	143,910
3	Subtract line 2e from line 1	3	777,304
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		777,304
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)	1 1	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)- · · · · · · · · · · · · · · · · · · ·	5	777,304
	rt XIII Supplemental Information.		777,304
	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b, Part V, line 4; Part IV, line 4; Part IV, line 4; Part IV, line 4; Part IV, line 4; Part IV, line 4; Part IV, line 4; Part IV, line 4; Part IV, line 4; Part IV, line 4; Part IV, line 4; Part IV, line 4; Part IV, line 4; Part IV, line 4; Part IV, line 4; Part IV, line 5; Part IV, line 4; Part IV, line 5; Part IV, line 5; Part IV, line 6; Part IV, line 6; Part IV, line 6; Part IV, line 6; Part IV, line 6; Part IV, line 6; Part IV, line 6; Part IV, line 6; Part IV, line 8; Part IV, line 8; Part IV, line 8; Part IV, line 8; Part IV, line 8; Part IV, line 8; Part IV, line 8; Part IV, line 9; Part IV, lin	rt X line	
	art XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information		
	Other revenues not included on Form 990 (Part XI, line 2d)		
<u>v </u>	outer revenues has included on rorm 330 (rule hr, line ru)	-	• •
Reti	urn on beneficial interest in assets held at community foundation: \$1,758.		
Ne C	un on beneficial interest in assets held at community foundation. \$1,758.		
			··-·
			

Schedule D (Form 990) 2019

EEA

SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

OMB No. 1545-0047
2019

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Employer identification number Bridge II Sports Inc 20-8577055 Types of Property (c) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1q 2 Art - Historical treasures 3 Art - Fractional interests Books and publications Clothing and household goods 6 Cars and other vehicles 7 8 Secunties - Publicly traded 9 Secunties - Closely held stock 10 11 Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution - Historic 14 Qualified conservation contribution - Other 15 Real estate - Residential 16 Real estate - Commercial Real estate - Other 17 18 19 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens - -24 Archeological artifacts Other ►(Supplies, food 25 x 15 33,711 fair value Other ►(26 Other ►(27 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement No Yes 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 30a X b If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any nonstandard 31 X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash х If "Yes," describe in Part II If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

describe in Part II

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2019

Open to Public Inspection

Employer identification number

Bridge II Sports Inc	20-8577055
01. Form 990 governing body review (Part VI, line 11)	
The Form 990 is provided to and approved by the Finance Committee Chair	prior to filing.
02. Conflict of interest policy compliance (Part VI, line 12c)	
The Organization regularly and consistently monitors and enforces compli	ance with its
written conflict of interest policy by reminding officers and directors	on an annual basis
of their fiduciary responsibilities and requiring them to sign off on the	at understanding.
Additionally, all staff members are informed of the Organization's confl	ict of interest
policies in the employee handbook, which they are required to acknowledge	e in writing as
having received when they are hired.	
03. CEO, executive director, top management comp (Part VI, line 15a)	
The compensation of the CEO is evaluated annually by the Board of Direct	ors and is based
upon the funds available.	
04. Governing documents, etc, available to public (Part VI, line 19)	
The Organization makes its financial statements, governing documents and	conflict of
interest policy available to the general public upon request.	
05. Explanation of other changes in net assets or fund balances (Part XI	, line 9)
Return on beneficial interest in assets held at community foundation: \$1	,758.