DLN: 93493195015020 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2019 , and ending 12-31-2019 D Employer identification number B Check if applicable TAMPA BAY TECHNOLOGY FORUM INC ☑ Address change 51-0444271 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 3225 S MACDILL AVENUE SUITE 129-1 ☐ Amended return ☐ Application pending (813) 400-1164 City or town, state or province, country, and ZIP or foreign postal code TAMPA, FL  $\,$  33629  $\,$ G Gross receipts \$ 487,633 Name and address of principal officer H(a) Is this a group return for DANIEL JAMES SCOTT ☐Yes **☑**No subordinates? 3225 S MACDILL AVENUE SUITE 129-174 H(b) Are all subordinates TAMPA, FL 33629 ☐Yes ☐No ıncluded? 501(c)(3) **✓** 501(c) (6) **⋖** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► TAMPABAY TECH L Year of formation 2003 M State of legal domicile FL Summary 1 Briefly describe the organization's mission or most significant activities PROMOTE THE INTERESTS OF THE TECHNOLOGY SECTOR OF FLORIDA'S TAMPA BAY REGION Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 59 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 2 Total number of volunteers (estimate if necessary) . . . . 6 59 Total unrelated business revenue from Part VIII, column (C), line 12 0 **b** Net unrelated business taxable income from Form 990-T, line 39 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 477,500 466,500 Ravenua Program service revenue (Part VIII, line 2g) . 23,917 21,082 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 49 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 501,466 487.633 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 **14** Benefits paid to or for members (Part IX, column (A), line 4) . . . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 259,158 277,127 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 191,152 223,149 450,310 500,276 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . 51,156 -12,643 Net Assets or Fund Balances Beginning of Current Year **End of Year** 375,805 368,712 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 108,222 113,772 267,583 254,940 22 Net assets or fund balances Subtract line 21 from line 20 . Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2020-06-03 Signature of officer Sign Here DANIEL JAMES SCOTT EXECUTIVE DIRECTOR Type or print name and title Print/Type preparer's name Preparer's signature Check | If 2020-06-03 P01451787 Paid self-employed Firm's name CLIFTONLARSONALLEN LLP Firm's EIN ► 41-0746749 Preparer Use Only Firm's address ▶ 402 SOUTH KENTUCKY AVENUE SUITE 600 Phone no (863) 680-5600 LAKELAND, FL 338015354 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2019)

Form	990 (2019)				Page <b>2</b>
Pa	rtiii Staten	nent of Program Service Acc	omplishments		
	Check If	Schedule O contains a response or	note to any line in this Part III		🗆
the prior 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 I Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the to expenses, and revenue, if any, for each program service reported  4a (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ See Additional Data  4b (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  4c (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )					
				BY COLLABORATING WITH TA	MPA BAY'S LARGEST
2	Did the organiz	ation undertake any significant prog	ram services during the year which w	ere not listed on	
	the prior Form	990 or 990-EZ?			🗌 Yes 🗹 No
	If "Yes," describ	oe these new services on Schedule (			
3	Did the organiz	ation cease conducting, or make sig	nıfıcant changes ın how ıt conducts, a	ny program	
					☐ Yes ☑ No
4	Describe the or Section 501(c)(	ganization's program service accom (3) and 501(c)(4) organizations are	required to report the amount of gran		
4a	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	•			, ( +	,
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4d	Other program	services (Describe in Schedule O )			
	(Expenses \$	including g	rants of \$	Revenue \$	)
4e	Total program	ı service expenses ▶			

Page 3 Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete No 1 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏 . . . Yes Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates No 3

Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4

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 🛸 . . to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete

5 Yes Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"

No 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 9

Nο No Nο 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, No permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V . . . . . . . . . . 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 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Nο

11a Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total No 11b assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII . . . . . . . . . . . . Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its Nο 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported No 11d

e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f Nο

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a No Was the organization included in consolidated, independent audited financial statements for the tax year? 12b Nο If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D. Parts XI and XII is optional

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 Nο Nο

14a 14a Did the organization maintain an office, employees, or agents outside of the United States? . . . . **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments 14b Nο

Nο

Nο

Nο

Nο

Nο

No

No

Form **990** (2019)

20b

21

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

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions) . . . .

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

18

lines 1c and 8a? If "Yes," complete Schedule G, Part II

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

**20a** Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H* . . . . . 20a b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Form	990 (2019)			Page <b>4</b>
Par	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
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? <i>If "Yes," complete Schedule L,</i> Part III	27		No
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)			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes,"</i> complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
Pa	statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Bort V			

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . . .

Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 

**b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

No

Yes

6

0

**1**c

1a

1b

Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
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		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country	a 4a		No
<b>-</b> -	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	-		NI-
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a		No No
		5b		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c 6a	Yes	
	solicit any contributions that were not tax deductible as charitable contributions?  If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were		res	
ט	not tax deductible?	6b	Yes	
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 and service provided to the payor?	es <b>7a</b>		
Ь	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		
	If "Yes," indicate the number of Forms 8282 filed during the year	-		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7</b> g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9</b> b		
10	Section 501(c)(7) organizations. Enter  Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b	-		
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	<b>-</b>		NI -
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess	14b		
	parachute payment(s) during the year?	15		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O	16		No

orm	990 (2019)			Page <b>6</b>
Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 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	" respo	onse to i	ines 🗸
Se	ction A. Governing Body and Management			
1.	Enter the number of voting members of the governing body at the end of the tax year   1a   59		Yes	No
Ia	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 in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent  1b 59			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
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		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7</b> b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	⊇ Code	2.)	
		$\longrightarrow$	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No_
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
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	Yes	
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (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 in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records DANIEL JAMES SCOTT 3225 S MACDILL AVENUE SUITE 129-174 TAMPA, FL 33629 (813) 400-1164			

Form 990 (2	2019)										Page <b>7</b>				
Part VII			Truste	es,	Key	En	ıploy	ees	, Highest Comp	ensated Employ	/ees,				
	Check if Schedule O contains a	response or no	te to an	y line	ın t	this	Part VI	١.			🗆				
Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors  Check if Schedule O contains a response or note to any line in this Part VII															
year .	·		·						, ,						
of compensa	ation Enter -0- in columns (D), (	E), and (F) if no	compe	nsatı	on v	vas p	paid								
who receive	d reportable compensation (Box														
							pensat	ed e	employees who rece	ived more than \$10	0,000				
organızatıor	n, more than \$10,000 of reportab	le compensation	n from t								e				
		•													
☐ Check t			d orgar	nizatio			ensate	d ar	ny current officer, di	rector, or trustee	_				
		Average hours per week (list any hours	than o	sition (do not check ma in one box, unless pers is both an officer and a director/trustee)				Position (do r han one box, is both an d director	t che unles ficer rust	ss pers and a ee)	on	Reportable compensation from the organization	Reportable compensation from related organizations (W-2/1099-	Reportable compensation from related organizations	Estimated amount of other compensation from the
		organizations below dotted	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	l ', '	, ,					
See Addition	al Data Table										_				
					_										
											_				

Form 990 (2019) Page 8 Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (C)
Position (do not check more (A) (B) (D) (E) (F) Name and title Average Reportable Reportable Estimated

	hours per week (list any hours			n of	ficer	and a		compensation from the organization	compensation from related organizations	amount of other compensation from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)	organization and related organizations
See Additional Data Table										

Sub-Total								
•					-			

224.226 24.768 d Total (add lines 1h and 1c)

_ u	otal (add lines 1b and 1c)	J		24,700
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization $\triangleright$ 2			
			Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual			N
		4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for			

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

	· · ·	3		NO
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No
Se	ection B. Independent Contractors			
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of confrom the organization. Report compensation for the calendar year ending with or within the organization's tax year.	npensa	tion	

				INO		
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No		
S	ection B. Independent Contractors					
1	1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of confrom the organization. Report compensation for the calendar year ending with or within the organization's tax year.					
	(A) (B) Name and business address Description of services		(C) Compens			

1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.						
	(A) Name and business address	(B) Description of services	<b>(C)</b> Compensation				
_	Total number of independent contractors (including but not limited to those listed above) who recei	wed more than \$100,000 of					

Form **990** (2019)

compensation from the organization ▶ 0

		(2019)								Page <b>9</b>
Part	VIII									
		Check if Sched	dule	O contains a	respo	onse or note to an	y line in this Part VIII  (A)  Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
(1)	18	a Federated campa	aigns		1a			revenue		312 311
unts		<b>b</b> Membership dues	s.	. [	<b>1</b> b	466,500	-			
Contributions, Gifts, Grants and Other Similar Amounts	,	c Fundraising even	nts .	. [	<b>1</b> c		_			
Ę, Ś	,	d Related organiza	tions	; [	<b>1</b> d		_			
nija Sija	,	e Government grants	(con	tributions)	1e		_			
Sin	1	f All other contributio					-			
utic Te		and similar amounts not included above			_					
돌동	9	g Noncash contributio lines 1a - 1f \$	ns in	cluded in	1g					
Contributions, Gifts, Grants and Other Similar Amounts		<b>h Total.</b> Add lines :	1a-1	f		>	466 500			
						Business Code	466,500			
	2a	EVENT REGISTRATIO	NS			900099	21,082	21,082		
માહ										
Program Service Revenue	b	•								
F. B.	c									
er vi C	Ī									
S E	d									
gra	e									
Æ										
		All other program								
		Total. Add lines 2 Investment income				21,08			<u> </u>	
	9	similar amounts) .					5:	1		51
		Income from invest			mpt bo	ond proceeds	<b>&gt;</b>			
	5	Royalties	r.	(ı) Rea	· il	(II) Personal	<u>▶</u>			
	_	_		(1) 1133	· <u>·</u>	()				
		Gross rents Less rental	6a				_			
	D	expenses	6b							
	С	Rental income or (loss)	6c							
	c	Net rental income	e or (	(loss)		· · · · <b>&gt;</b>				
				(ı) Securi	ties	(II) Other				
	7a	Gross amount from sales of	7a							
		assets other than inventory								
	b	Less cost or other basis and	7b							
		sales expenses					_			
	С	Gain or (loss)	7с							
	d	Net gain or (loss)	•							
e r	8a	Gross income from fu (not including \$	ındra	ısıng events of						
Other Revenue		contributions reported See Part IV, line 18								
Re	H	Less direct expen			8a 8b		$\dashv$			
er		: Net income or (los				ents 🕨				
	_									
	9a	Gross income from See Part IV, line 19	gami •	ing activities	9a					
	b	Less direct expen	ses		9b					
	c	: Net income or (los	s) fr	om gaming	activit	ies <b>&gt;</b>				
	10:	aGross sales of inve	entor	rv, less						
		returns and allowa	ances	5	10a					
		Less cost of good			10b					
	C	Net income or (los Miscellaneo			ınvent	ory ► Business Code	<u> </u>			
	11		IV				$\exists$			
	b	,								
	C	•								
	c	All other revenue								
	e	Total. Add lines 1	1a-1	l1d		•				
	12	<b>Total revenue.</b> S	ee ır	nstructions .			487,633	3 21,082		0 51
									•	Form 000 (3010)

Р	Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must of	complete all columns	All other organization	ons must complete col	umn (A)
	Check if Schedule O contains a response or note to a		_		🗆
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	259,806			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	17,321			
11	Fees for services (non-employees)				
ā	Management				
Ŀ	Legal				
c	Accounting	20,932			
c	Lobbying				
e	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)	6,717			
12	Advertising and promotion	22,400			
13	Office expenses	8,414			
14	Information technology	15,398			
15	Royalties				
16	Occupancy				
17	Travel	144			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	143,386			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	3,293			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e				
	expenses on Schedule O )  a DUES & SUBSCRIPTIONS	1,363			
		· ·			
	b LICENSES & FEES	511			
	C C				
	d All other expenses	591			
	E All other expenses	500,276			
	Total functional expenses. Add lines 1 through 24e	300,276			
∠0	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)				Form <b>990</b> (2019)

Cash-non-interest-bearing

1

Assets

Assets 30

31

32

33

240,381

30

31

32

33

254,940

368,712

Form 990 (2019)

267,583

375,805

(A)

Beginning of year

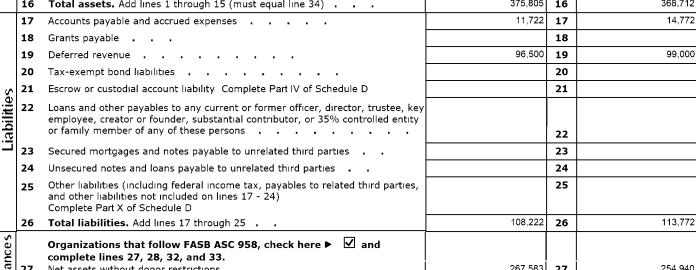
Page **11** 

351,293

(B) End of year

2	Savings and temporary cash investments	[	128,267	2	5,002
3	Pledges and grants receivable, net			3	
4	Accounts receivable, net		4		
5	Loans and other payables to any current or form key employee, creator or founder, substantial co- entity or family member of any of these persons		5		
6	Loans and other receivables from other disqualif section $4958(f)(1)$ ), and persons described in section		6		
7	Notes and loans receivable, net		7	17	
8	Inventories for sale or use		8		
9	Prepaid expenses and deferred charges		7,157	9	12,400
10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a			
b	Less accumulated depreciation	10b		10c	
11	Investments—publicly traded securities .			11	
12	Investments—other securities See Part IV, line	11		12	
13	Investments—program-related See Part IV, line		13		

	11	Investments—publicly traded securities .		11	
	12	Investments—other securities 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		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	375,805	16	368,712
	17	Accounts payable and accrued expenses	11,722	17	14,772
	18	Grants payable		18	
	19	Deferred revenue	96,500	19	99,000
	20	Tax-exempt bond liabilities		20	
Š	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
ītie.	22	Loans and other payables to any current or former officer, director, trustee, key			



113,772 27 Net assets without donor restrictions 267,583 27 254,940 28 28 Net assets with donor restrictions

Fund Balances Organizations that do not follow FASB ASC 958, check here complete lines 29 through 33. ō

29 29 Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund .

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

Form	990 (2019)				Page <b>12</b>
Par	Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>	<u> </u>	
	T.				407.633
1	Total revenue (must equal Part VIII, column (A), line 12)	1			487,633
2	Total expenses (must equal Part IX, column (A), line 25)	2			500,276
3	Revenue less expenses Subtract line 2 from line 1	3			-12,643
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			267,583
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule 0)	9			0
	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			254,940
Pa	TXII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>		
				Yes	No
1	Accounting method used to prepare the Form 990				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
Ь	Were the organization's financial statements audited by an independent accountant?		2ь		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both	basis,			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and 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		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule C			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Audit Act and OMB Circular A-133?	ngle	3a		No

Form **990** (2019)

3b

**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 in Schedule O and describe any steps taken to undergo such audits

## Additional Data

Software ID:

Software Version:

VENTURE CAPITAL RAISED, \$500+ BILLION ANNUAL REVENUES AND \$1+ TRILLION MARKET CAPITALIZATION

**EIN:** 51-0444271

Name: TAMPA BAY TECHNOLOGY FORUM INC.

Form 990 (2019)

Form 990, Part III, Line 4a:

ESTABLISHED IN 2000. TAMPA BAY TECH (FORMERLY KNOWN AS THE TAMPA BAY TECHNOLOGY FORUM) IS ONE OF THE NATION'S OLDEST AND LARGEST TECHNOLOGY COUNCILS, AND THE ENGINE UNITING OUR MEMBERS IN GROWING OUR COMMUNITY'S ENGAGEMENT, PRIDE, TALENT & OPPORTUNITY PIPELINE ITS THREE STRATEGIC INITIATIVES ARE WORKFORCE, MARKETING, AND COMMUNITY TAMPA BAY TECH PRODUCES TWO FLAGSHIP EVENTS ANNUALLY - POWEREDUP AND THE TAMPA BAY TECH AWARDS IN ADDITION, IT ORGANIZES HUNDREDS OF INTEREST-LEVEL GATHERINGS PER YEAR IN CONJUNCTION WITH THEIR BOARD OF DIRECTORS, TECHNOLOGY EXECUTIVE COUNCIL, MEETUP COOPERATIVE AND COMMUNITY PARTNERS TAMPA BAY TECH MEMBERS REPRESENT 2 MILLION TOTAL EMPLOYEES, \$300+ MILLION

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the

	any hours and a d		a dir	ecto			}	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	eavoldine Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
ALAGOOD JEFF CHAIR	2 00	×		х				0	0	0	
WARNKE JASON VICE CHAIR	2 00	x		x				0	0	0	
MILKS TRAVIS TREASURER	2 00	х		х				0	0	0	
SOUTHRON JOE SECRETARY	2 00	х		х				0	0	0	
ALLEY AMY	1 00	l									

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TREASURER
SOUTHRON JOE
SECRETARY
ALLEY AMY

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

CATE CHRIS

DIRECTOR

BLOOM MICHAEL

**BOWMAN KATHY** 

**BRAGINSKY IGOR** 

**BROWN ASHLEY** 

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation hours per compensation amount of other person is both an officer week (list from the from related compensation from the

	any hours for related		a dır	ecto	or/tr	ustee)	)	organization	organizations	from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	ee voldme Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
CARULLO NATALIE DIRECTOR	1 00	×						0	0	0
CRAVER LYNNE DIRECTOR	1 00	X						0	0	0
DANIELL TODD DIRECTOR	1 00	×						0	0	0
DAVIS GREG DIRECTOR	1 00	X						0	0	0

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DANIELL TODD
DIRECTOR
DAVIS GREG
DIRECTOR
DAVIS SABLE

DIRECTOR

DIAZ LORI

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DUGGER AMANDA

DURGAMPUDI KALI

FERRANTE TAMMY

FICKETT TANYA

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(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation from the any hours and a director/trustee) organization organizations

	farry flours							(14/ 3/4000	(14/ 2/1000	mom the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
GAGNON JOHN DIRECTOR	1 00	×						0	0	0	
GAMBALE JOHN DIRECTOR	1 00	×						0	0	0	
GENERELLI EDDIE DIRECTOR	1 00	х						0	0	0	
GUMBS GABE DIRECTOR	1 00	×						0	0	0	
HATTER CHRIS	1 00										

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GUMBS GABE
DIRECTOR
HATTER CHRIS
DIRECTOR
HEINZMAN JOSEPH

DIRECTOR

HELLER JOHN

HILL ROBERT

HOSS CRAIG

HOWARD TAYLOR

DIRECTOR

DIRECTOR

DIRECTOR

...... DIRECTOR

(A) (D) (B) (C) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation hours per compensation amount of other person is both an officer week (list from the from related compensation

and Independent Contractors

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DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

MILLER GREG

LASHER DAN

LEE VIRGINIA

MARROW REGINA

KUTTY RAGHU

	any hours	and a director/trustee)						organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
IDEHEN SKYE DIRECTOR	1 00	×						0	0	0	
JOHNSON ANDE DIRECTOR	1 00	х						0	0	0	
	1 00			$\vdash$							

DIRECTOR		_ ^			٥	
JOHNSON ANDE	1 00	×			0	
DIRECTOR						
KARLO CHRIS	1 00	l x			0	
DIRECTOR					,	
KATELMAN KRIS	1 00	1			0	
DIRECTOR		_ ^			J. Company	

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DIRECTOR								,	,	
KARLO CHRIS	1 00	l						0	C	
DIRECTOR		^						Ç	•	
KATELMAN KRIS	1 00	×						0	0	
DIRECTOR		^						9	0	
KULKARNI SANJAY	1 00									

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(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other week (list person is both an officer from the from related compensation and a director/trustee) any hours organizations from the organization

	any hours	and a director/trustee)						organization	organizations	from the	
	for related organizations below dotted line)		Institutional Trustee	10	key employee	Highest compensated employee	Former	- (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
MORGANTI RAY DIRECTOR	1 00							0	0	0	
MULLARKEY MATTHEW DIRECTOR	1 00	×						0	0	0	
NICHOLSON KEN DIRECTOR	1 00	X						o	0	0	
O'NEAL TOM DIRECTOR	1 00							0	0	0	
PANAGOPOULOS GEORGE	1 00						П				

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DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

SANDER ERIK

PERRY JEAN MARC

PHILIPOOM BRUCE

POJANI SENTON

RASMUSSEN JEREMY

.......

(A) (D) (B) (C) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the

	ally floats	and a director, trastee,					,	(14, 2,4,000	(14, 5/4,000	and the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(Ŵ- 2/1099- MISC)	organization and related organizations	
SHEDD JOHN DIRECTOR	1 00	х						0	0	0	
SRIDHARAN KISHEN DIRECTOR	1 00	×						0	0	0	
STAFFORD BARRY DIRECTOR	1 00	×						0	0	0	
STEWART JAMES DIRECTOR	1 00	×						0	0	0	

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116,226

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18,624

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STEWART JAMES
DIRECTOR
THOMAS MATHEW
DIRECTOR
VALLADARES DANIEL

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

WHITESIDE LARRY

WHITTEMORE RYAN

WILSON JEREMY

DANIEL J SCOTT

CO-EXECUTIVE DIRECTOR

and Independent Contractors (A)

Name and Title

week (list any hours for related organizations below dotted line)
40 00

(B)

Average

Position (do not check more 00

Institutio

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

than one box, unless employee

person is both an officer and a director/trustee)

(D) Reportable compensation from the organization (W- 2/1099-MISC) 108,000

Reportable

compensation from related organizations (W- 2/1099-MISC)

(E)

Estimated amount of other compensation from the organization and related organizations

6,144

(F)

CO-EXECUTIVE DIRECTOR

JILL ST THOMAS

SCHEDULE C (Form 990 or 990-

Department of the Treasury

EZ)

## **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

DLN: 93493195015020

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Internal Revenue Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** TAMPA BAY TECHNOLOGY FORUM INC 51-0444271 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes Was a correction made? 4a ☐ Yes ☐ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political organization. If none

				enter -0-
1				
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3				
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For Paperwork Reduction Act Notice, see th	e instructions for Form 990 or 990-EZ.	Cat	No 50084S Schedule (	C (Form 990 or 990-EZ) 2019

activity

1

(b)

Amount

(a)

Yes | No

а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			1		
c	Media advertisements?			1		
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912			1		
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	Complete if the organization is exempt under section 501(c)(4), section 501(c)(5)(5)(6).	(5), o	r sect	ion		
	· · · · · · · · · · · · · · · · · · ·				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		ſ	1		No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	Yes	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		No
Par	Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."				<b>01</b> (c	)(6)
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
a	Current year	2a				
b	Carryover from last year	2b				
С	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
Pa	rt IV Supplemental Information	1				

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

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instructions), and Part II-B, line 1 Also, complete this part for any additional information

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For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

During the year, did the filing organization attempt to influence foreign, national, state or local legislation,

including any attempt to influence public opinion on a legislative matter or referendum, through the use of

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SCHEDULE O (Form 990 or 990- EZ)  Supplemental Information to Form provide information for responses form 990 or 990-EZ or to provide any address of the provide and t				r responses to specific questi ide any additional informatio	onses to specific questions on					
Attach to Form 990 or 990-EZ.						Open to Public Inspection				
<b>Name</b> l <b>ይዩ the ነ</b> ዕት <b>g</b> TAMPA BAY TECHN		INC			Employer identi 51-0444271	fication number				
990 Schedul	e O, Supple	emental Informatio	on							
Return Reference		Explanation								
FORM 990, PART VI, SECTION A, LINE 1	THE BOARD OF DIRECTORS, BY RESOLUTION ADOPTED BY A MAJORITY OF THE NUMBER OF DIRECTORS, MA Y DESIGNATE TWO OR MORE DIRECTORS TO CONSTITUTE AN EXECUTIVE COMMITTEE OR OTHER COMMITTEES , EACH OF WHICH SHALL HAVE AND MAY EXERCISE ALL OF THE AUTHORITY OF THE BOARD OF DIRECTORS IN THE MANAGEMENT OF THE CORPORATION									

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FORM 990,	THE ORGANIZATION PROVIDES A COPY OF THE FORM 990 TO ITS ENTIRE BOARD FOR REVIEW PRIOR TO FILING THE
PART VI,	FORM WITH THE IRS
SECTION B,	
LINE 11B	

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FORM 990, PART VI, SECTION B, LINE 12C	AN INTERESTED PERSON SHALL INCLUDE ANY DIRECTOR, OFFICER, OR MEMBER OF A COMMITTEE TO WHICH THE BOARD OF DIRECTORS HAS DELEGATED POWERS, WHO HAS A DIRECT OR INDIRECT FINANCIAL INTEREST IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, EACH INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS RELATING TO THE FINANCIAL INTEREST AND ANY PROPOSED TRANSACTION OR ARRANGEMENT AT A MEETING OF THE BOARD OF DIRECTORS AND/OR AT A MEETING OF ANY COMMITTEE WHICH IS CONSIDERING THE TRANSACTION ON A RARANGEMENT THE INTERESTED PERSONS MAY PRESENT TO THE BOARD OR COMMITTEE ANY INFORMATION WHICH THE INTERESTED PERSONS BELIEVE THAT THE BOARD OR COMMITTEE SHOULD CONSIDER IN DIFFERMINING WHETHER A CONFLICT OF INTEREST EXISTS ALL FURTHER PROCEEDINGS SHALL BE UNDERTANGEN ONLY BY DISINTERESTED MEMBERS OF THE BOARD OR COMMITTEE A MAJORITY OF SUCH DISINTERES TED MEMBERS OF THE BOARD OR COMMITTEE A MAJORITY OF SUCH DISINTERES TED MEMBERS SHALL CONSTITUTE A QUORUM FOR THE PURPOSE OF TAKING ACTION THE BOARD OR COMMITTEE SHALL DETERMINE BY MAJORITY VOTE WHETHER A CONFLICT OF INTEREST EXISTS THE INTERESTED PERSONS SHALL NOT BE PRESENT DURING THE DELIBERATIONS OR VOTE OF THE BOARD OR COMMITTEE SHALL DETERMINE BY MAJORITY VOTE WHETHER A CONFLICT OF INTEREST EXISTS THE INTERESTED PERSONS SHALL NOT BE PRESENT DURING THE DELIBERATIONS OR VOTE OF THE BOARD OR COMMITTEE IF A CONFLICT OF INTEREST IS FOUND TO EXIST, THE BOARD OR COMM ITTEE SHALL APPOINT A DISINTERESTED PERSONS SHALL NOT BE PRESENT DURING THE DELIBERATIONS OR VOTE OF THE BOARD OR COMMITTEE THE CORPORATION CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVA NTAGEOUS TRANSACTION OR ARRANGEMENT THE BOARD OR COMMITTEE SHALL DETERMINE BY THE EXERCISE OF DUE DILIGENCE WHETHER THE CORPORATION CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVA NTAGEOUS TRANSACTION OR ARRANGEMENT THE DOARD OR COMMITTEE SHALL DETERMINE BY THE EXERCISE OF DUE DILIGENCE WHETHER THE CORPORATION OR ARRANGEMENT IS FAIR AND REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRO

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FORM 990, PART VI, SECTION B, ON REASONABLE AND APPROPRIATE LEVEL OF RESPONSIBILITY

LINE 15A

COMPENSATION IS DISCUSSED AMONG OFFICERS AND RATIFIED AT THE EXECUTIVE COMMITTEE LEVEL EX EXECUTIVE COMPENSATION IS DISCUSSED AMONG OFFICERS AND RATIFIED AT THE EXECUTIVE COMMITTEE LEVEL EX EX EXECUTIVE COMMITTEE LEVEL EX EXECUTIVE EX EXECU

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Reference	
FORM 990,	THE GOVERNING DOCUMENTS, FINANCIAL STATEMENTS, AND CONFLICT OF INTEREST POLICIES ARE AVAILABLE TO
PART VI,	THE PUBLIC UPON REQUEST
SECTION C,	
LINE 19	