

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.
 ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2013 calendar year, or tax year beginning 2013, and ending 2013

<p>B Check if applicable:</p> <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<p>C</p> <p>BIG BROTHERS BIG SISTERS OF GALLATIN CTY 15 SOUTH 8TH AVENUE BOZEMAN, MT 59715</p> <p>F Name and address of principal officer: GREG ASTLE Same As C Above</p>	<p>D Employer Identification Number 81-0359636</p> <p>E Telephone number 406-587-1216</p> <p>G Gross receipts \$ 420,070.</p> <p>H(a) Is this a group return for subordinates? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>H(b) Are all subordinates included? If 'No,' attach a list. (see instructions) Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>H(c) Group exemption number ▶</p>
<p>I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</p>		
<p>J Website: ▶ www.bbbs-gc.org</p>		
<p>K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</p>		
<p>L Year of formation: 1973 M State of legal domicile: MT</p>		

Part I	Summary			
Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>TO HELP CHILDREN REACH THEIR POTENTIAL THROUGH PROFESSIONALLY SPONSORED ONE-TO-ONE RELATIONSHIPS.</u>		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	14
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	14
	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	9
	6	Total number of volunteers (estimate if necessary)	6	400
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	224,119.	200,029.
	9	Program service revenue (Part VIII, line 2g)		
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,836.	15,220.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	117,786.	125,983.
	12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	346,741.	341,232.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
	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)	219,425.	220,674.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶	36,144.	
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	92,393.	85,887.	
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	311,818.	306,561.	
19	Revenue less expenses. Subtract line 18 from line 12	34,923.	34,671.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	431,120.	481,060.
	21	Total liabilities (Part X, line 26)	26,250.	29,429.
	22	Net assets or fund balances. Subtract line 21 from line 20	404,870.	451,631.

Part II Signature Block

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

Sign Here	Signature of officer	Date	
	▶ GREG ASTLE Type or print name and title.		Treasurer
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	JULIE KOSTELECKY, CPA	JULIE KOSTELECKY, CPA	
	Firm's name ▶ Rudd & Company PLLC	Check <input type="checkbox"/> if self-employed PTIN P00532584	
	Firm's address ▶ 3805 Valley Commons Drive, Suite 7 Bozeman, MT 59718	Firm's EIN ▶ 82-0467399 Phone no. (406) 585-3393	