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OMB No 1545-1150

Form **990-EZ** 

**Short Form Return of Organization Exempt From Income Tax** 

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

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-EZ and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

**Open to Public** 

ntern	al Reven	ue Service								
			r year, or tax year beginning 01-01-2015 , and ending 12-31-2015							
	Check i Idress c	f applicable :hange	C Name of organization MASQUERADE OF TAMPA BAY INC		D Employer identification number					
-Na	ame cha Itial reti	ange					01-0749314			
-Fir	nal retu	rn/terminated	Number and street (or P O box, if mail is not delivered to street address) Room/suite 12033 GANDY BLVD N			<b>E</b> Telephone number				
		return n pending						(727) 215-0906		
			City or town, state or province, country, and ZIP or foreign postal code ST PETERSBURG, FL 33702			FGroup Exemption Number ►				
			31 TETEROBORG, TE 33702					Number		
						н	Chack 🖿	. F. ıfthe (	raaniz	ation is <b>not</b>
H Check ► ☞ If t G Accounting Method ☞ Cash 『 Accrual Other (specify) ► equired to atta									_	
(Form 990, 9 <b>I Website: ►</b> N/A								90,990-E	Z, or 9	90-PF)
		-								
			conly one) -〒501(c)(3) 🛂 − 501(c)( ) ┥(ıns							
		=	FCorporation FTrust FAssociation							
			7b to line 9 to determine gross receip 0 or more, file Form 990 instead of Fo		200,000	or r	nore, or i	f total ass 14 \$ ₽		rt II, column
. ,	art I	<u> </u>	e, Expenses, and Changes in N		Ralance	<b>S</b> (s	ee the in	'	•	rt I)
	ait I		e organization used Schedule O to res							•
9	1		, gifts, grants, and similar amounts re						1	
	2	Program serv	ice revenue including government fees	and contracts					2	24,563
	3	Membership o	dues and assessments						3	
	4	Investment ır	ncome						4	
	5a	Gross amoun	t from sale of assets other than invent	ory	1	5a	1			
	b		other basis and sales expenses		ŀ	5b		0		
Kevenue	c		from sale of assets other than invent	ory (Subtract line 5b from	line 5a)				5c	
VeV	6		undraising events	, (	,					
	a	_	e from gaming (attach Schedule G if gr	aaterthan \$15 000)	1		I			
	a				١.	6a				
	b	Gross income from fundraising events (not including \$of contributions from fundraising events reported on line 1) (attach Schedule G if the								
		sum of such gross income and contributions exceeds \$15,000)								
	c	-	expenses from gaming and fundraising		!	6c		0		
	, a	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)							6d	
	7a	Gross sales of inventory, less returns and allowances							ou	
	b 'a	Less cost of			F			0		
			or (loss) from sales of inventory (Subtr		L					
	с 8	•	e (describe in Schedule O)	•					7c 8	
	_		e. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and					•	<del>-</del> +	24,563
	9								9	24,303
Expenses	10		milar amounts paid (list in Schedule C						10	
	11		to or for members						11	
	12	•	er compensation, and employee benefi						12	
	13		fees and other payments to independe						13	
	14		rent, utilities, and maintenance						14	
Ĕ	15		ications, postage, and shipping						15	85
	16		,						16	22,350
	17					•			17	22,435
NetAssets	18	-	eficit) for the year (Subtract line 17 fro	•					18	2,128
	19	Net assets or	r fund balances at beginning of year (fr	om line 27, column (A)) (r	must agr	ee w	ıth			
		end-of-year fi	igure reported on prior year's return)					• •	19	1,487
	20	O ther change	es in net assets or fund balances (expl	aın ın Schedule O ) .					20	
	21	Net assets or	fund balances at end of year Combin	e lines 18 through 20	<u></u>	<u>.</u> .		. •	21	3,615