For	<u>.</u> .9	90	Return	of Org									n 1545-0047
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Inter	nel Rev	enue Sarvice		to www.irs.				nd the lat	est inf	ormation.	1 MX	Ins	pection
A	for th	e 2017 calend	ar year, or tox yea	r beginning	JUL	1, 201	7 an	d ending	JUN	1 30,	2018		
В	Zheck li pplicat Addr chan	BOYS WEST	organization & GIRLS (FIBLD, INC		GREA	Ter			P	Employe	r identifi	cation numb	OF .
	Name	Doing b	usiness as								04-2	464259	
	Initial roturi Final roturi	Number P.O.	and street (or P.0.1 BOX 128					Room/su	ite E	Telephon		562-230	
	tormi		own, state or provin			foreign pos	al code		G	Gross recelp	ts.\$	2,27	6,384
E	Amen return Appli son pendi	F Name a	FIELD, MA nd address of princ AS C ABOVE	ipal officer:M	-0128 ICHAE	L D CO	PEY?	<u> </u>	7	a) Is this a for sub	ordinates	elum :?	es XNo
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			BGCWESTFIE) - (uz	SCITTO.	1)(0)/10	1/61 TT-1V		_		n number 🕨	uctions)
			X Corporation	Trust	Association	n Ot	er 🕨	I Y				State of legal	domicule: MZ
	rt I						1	15.	<u></u>			a comp of rope.	
_			e the organization's	mission or m	ost sionifi	cant activitie	s SEB	SCHE	ULE	0			
Activities & Governance		and y account											•
E	2	Check this box	if the o	ganization dis	scontinue	its operation	ns or disp	osed of m	ore tha	n 25% of	its net as	sets.	
200			ing members of the	•		•	-						25
ğ			ependent voting m										25
95			of individuals emplo		-						···· 		86
章			of volunteers (estim										400
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Ř			business taxable in										0.
		THE EMPORATE OF	PASHICUS IEPEDIC III			TECE				Prior Yea		Curren	Year
_	8	Contributions :	and grants (Part VII	I (me 1h)	2 (IACI	<u> </u>		513,			2,445.
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ă			ng expenses (Part I							711	064.	76	1,096.
			s (Part IX, column (485.	2 02	9,397.
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51E								-	Segiani A	ng of Curre	27A	End of	$\frac{\text{Year}}{2,727}$.
SSB		Total assets (P			······································			· ····· }-		778,			$\frac{2}{4},947.$
Net Assets or Fund Balances			(Part X,'line 25)					·· ·····	- 3	,809,			4,347. 7,780.
흲		Net assets or f	und balances. Subt	ract tine 21 fr	om une 20		<u> </u>			,003,	2010	3,30	1,100.
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		Signature	of officer	. vo	<u> </u>					Date		 -	
Sign				- 6C.	_	Δ۵	-r. c	1 0), [c	1/15	

May the IRS discuss this return with the preparer shown above? (see instructions)
752001 11-28-17 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2017)

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BOYS & GIRLS CLUB OF GREATER WESTFIELD. INC.

'¶)

732002 11-28-17

Part III Statement of Program Service Accomplishments Check Schedule Contains a response or note to any line in this Part III Part III Party describe the organization is mission 6	Form	990 (2017) WESTFIELD, INC.	04-2464259	Page 2
SEE SCHEDULE O Did the organization undertake any significant program services during the year which were not listed on the price form 980 of 990 E2? If 'Yes,' describe these new services on Schedule O. Did the organization case conducting, or make significant changes in how it conducts, any program services?	Pa	rt III Statement of Program Service Accomplishments		
SEE SCHEDULE 0 Dot the organization undertake any significant program services during the year which were not listed on the prior form 90 or 90 €2. If 'Yes, 'Generote these new services on Schedule 0. If 'Yes, 'Generote these new services on Schedule 0. Describe the organization cases conducting, or make significant changes in how it conducts, any program services?				
pron Form 980 or 990 C2? Yes X No 11 Yes, "describe these new services on Schedule O.	1	Briefly describe the organization's mission SEE SCHEDULE O		
pron Form 980 or 990 C2? Yes X No 11 Yes, "describe these new services on Schedule O.				
pron Form 980 or 990 €2? Ves X No 11 Yes, "describe these new services on Schedule O. 20 20 20 20 20 20 20 12 20 20 20 20 20 20 13 20 20 20 20 20 20 14 20 20 20 20 20 20 15 20 20 20 20 20 16 20 20 20 20 20 17 20 20 20 20 17 20 20 20 20 18 20 20 20 20 18 20 20 20 20 20 20 20			<u> </u>	
3 Dut the organization cesse conducting, or make significant changes in how it conducts, any program services?	2	prior Form 990 or 990-EZ?	Yes	s X No
## If "Yes," describe these changes on Schedule O ## Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Sections OSI (c)(3) and OSI (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 services reported ### (Code) (Expenses 1,754,552. michiding grants of \$	_	·		· Y No
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 services required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program services and 1,754,552. methodog grants of \$	3		;/	S LAL NO
Tevernous flam, for each program service reported 1,754,752. Industring grants of \$ 1,578,060.	4	Describe the organization's program service accomplishments for each of its three largest program services, a		
4a (Code			hers, the total expenses	, and
4b (Code) (Expenses \$		revenue, if any, for each program service reported (Code) (Expenses \$ 1.754.552 • including grants of \$) (Rev	enue \$ 1,578	,060.)
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4e Total program service expenses ► 1,754,552.	4d	Other program services (Describe in Schedule O)		
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	<u>4e</u>	Total program service expenses ▶ 1, / 34, 332.	- Committee	990 (2047)

Form 990 (2017) WESTFIELD, INC.

Part IV | Checklist of Required Schedules

04-2464259 Page 3

_			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	l
2	Is the organization required to complete Schedule B, Schedule of Contributors	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		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	Ů		
•	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	sımılar amounts as defined ın Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	<u> </u>	Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors 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_	ļ	Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			v
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	-	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	ļ
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable		~	-
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	44-	·X	
_	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a		
ь	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			۱,,
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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 in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			1
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	ļ
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			٦,
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		┢┻
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$10,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
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	170	-	
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
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	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		Х	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	_ <u>~~</u>	
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		х

Form **990** (2017)

BOYS & GIRLS CLUB OF GREATER WESTFIELD. INC.

<u> </u>	rt IV Checklist of Required Schedules (continued)		Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	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	21		х
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		 	
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 employees? If "Yes," complete			
	Schedule J	23		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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	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		X
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			1
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	ŀ		
	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)	1.		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	L	Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			l
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			١
	If "Yes," complete Schedule N, Part I	31	ļ	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			١
	Schedule N, Part II	32	ļ	Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			۱
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
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	<u> </u>	X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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	<u> </u>	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1		,,
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	1		1

Note. All Form 990 filers are required to complete Schedule O

WESTFIELD, INC.

04-2464259 Page 5

Pai				
	Check if Schedule O contains a response or note to any line in this Part V		· ·	 _
	Enter the number reported in Box 3 of Form 1096 Enter .0. if not applicable	$\overline{}$	Yes	No
_	The file full file in the file			
ь	Enter the number of Forms W-2d included in line to Enter 40- in not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1c	X	
•	(gambling) winnings to prize winners?	10		
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 2a 86			
	the did the edicinal year change with a warm the year covered by the return	2b	X	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	20		
2-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		
	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, a	35		
44	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
ь.	If "Yes," enter the name of the foreign country	, Tu		
U	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		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	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		Х
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 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 7d	`	·	لـــــــــــــــــــــــــــــــــــــ
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
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		L
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
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		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.			1
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter			
a	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			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
10-	amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	1 1	120		-
	,			
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		
d	Note. See the instructions for additional information the organization must report on Schedule O			- 1
ь	Enter the amount of reserves the organization is required to maintain by the states in which the			
U	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
			000	(2017)

Form 990 (2017) WESTFIELD, INC. 04-2464259 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" 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					
<u>Sec</u>	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	1a	2	5		
	If there are material differences in voting rights among members of the governing body, or if the governing	1				٠ ،
	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	2	5		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	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	e dire	ct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?			3	<u> </u>	X
4	Did the organization make any significant changes to its governing documents since the prior Form 9	990 w	as filed?	4	<u> </u>	Х
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5	<u> </u>	Х
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 a	ppoin	t one or			
	more members of the governing body?			7a	1	X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	stockh	olders, or			
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye	ar by t	ne following.	/A -PROP's No.		
а	The governing body?			8a	X	<u> </u>
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 rea	ched	at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	<u> </u>	X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code)			
					Yes	
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapte	rs, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ly bef	ore filing the form?	11a	X	<u> </u>
ь	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		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to co	officts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	'es, " c	lescribe			
	ın Schedule O how this was done			120		1
13	Did the organization have a written whistleblower policy?			13	X	<u> </u>
14	Did the organization have a written document retention and destruction policy?			14	X	<u> </u>
15	Did the process for determining compensation of the following persons include a review and approve	al by ı	ndependent		ł	;
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	X	<u> </u>
b	Other officers or key employees of the organization			15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			1		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment	with a]		
	taxable entity during the year?			16a		Х
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	te its	participation		١,	, 1
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	nızatı	on's			
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ►MA					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	ا (Sec	tion 501(c)(3)s only) avaıla	ble	
	for public inspection. Indicate how you made these available. Check all that apply					
	Own website X Another's website X Upon request Other (explain	ın Sc	hedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	nflict	of interest policy, a	nd fina	ncıal	
	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 bo	oks a	nd records ►			
	WILLIAM PARKS - 413-562-2301					
	28 WECT CILVED CTDEET D O BOY 128 WECTETELD MA	ก 1	086-0128			

WESTFIELD, INC.

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Form 990 (2017) Part VII 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

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Like this box if pether the organization nor any related organization compensated any current officer, director, or trustee

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending within the organization's tax year • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors; institutional trustees, officers; key employees, highest compensated employees, and former such persons.

L Check this box if neither the organizati	(B)	<u> </u>		((C)			(D)	(E)	(F)
Name and Title	Average		not c	heck		than		Reportable	Reportable	Estimated
	hours per week		box, unless person officer and a direct					compensation from	compensation from related	amount of other
	(list any	cto						the	organizations	compensation
	hours for	or dire	سا			ited		organization	(W-2/1099-MISC)	from the
	related	ustee	truste		l as	Suadu		(W-2/1099-MISC)		organization and related
	organizations below	Individual trustee or director	Institutional trustee		key employee	st con				organizations
	line)	Individ	Institu	Officer	Key er	Highest compensated employee	Former			, . J.
(1) MICHAEL D. COPPEY	1.00								_	
PRESIDENT		X		Х		L		0.	0.	0.
(2) JEFFREY J. SARAT	1.00								_	_
VICE PRESIDENT		х		X			<u> </u>	0.	0.	0.
(3) MEAGHAN SERAFIN	1.00									
TREASURER		X		X				0.	0.	0.
(4) JAMES J. IRWIN	1.00				İ				0	0
SECRETARY	1.00	Х		X	_		<u> </u>	0.	0.	0.
(5) JEFFREY AMANTI	1.00	v						0.	0.	0
DIRECTOR	1.00	X			ļ	ļ	<u> </u>	0.	۷.	0.
(6) DAVID R. BONOMI	1.00	х						0.	0.	0.
(7) BARBARA H. BRAEM-JENSEN	1.00				├	-	-	0.	0.	<u></u>
DIRECTOR	1.00	х						0.	0.	0.
(8) DANIEL S. BURACK	1.00			-	\vdash	\vdash	\vdash		•	
DIRECTOR		х						0.	0.	0.
(9) JOHN A. CAMEROTA	1.00				T			·		
DIRECTOR		X						0.	0.	0.
(10) HOLLY CARROLL	1.00									
DIRECTOR		Х					ŀ	0.	0.	0.
(11) TODD S. CIEPLINSKI	1.00									
DIRECTOR		X						0.	0.	0.
(12) RICHARD E. CLARK, JR.	1.00			ľ	İ				_	_
DIRECTOR		Х			lacksquare	Ш		0.	0.	0.
(13) SHARON CZARNECKI	1.00	`								_
DIRECTOR		Х			L_	<u> </u>		0.	0.	0.
(14) CATHERINE L. JOCELYN	1.00									
DIRECTOR		X	Щ	Ш	\vdash	Ш	_	0.	0.	0.
(15) RICHARD LENFEST	1.00	,,						<u> </u>		. ^
DIRECTOR	1 00	X	\Box		<u> </u>		<u> </u>	0.	0.	0.
(16) TIMOTHY D. MARKEL	1.00	х	ļ					0.	0.	0.
DIRECTOR	1.00			-	<u> </u>	$\vdash \vdash$		0.	0.	
(17) MICHAEL A. MCCABE DIRECTOR	1.00	x						0.	0.	0.
DIRECTOR		\Box		لــــا	لــــا	ш	ــــــــــــــــــــــــــــــــــــــ	1	0.	- 000 (co)

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Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	/ees	, an	d H	ighe	st (Compensated Employe	es (continued)		
(A)	(B)				C)			(D)	(E)		(F)
Name and title	Average	(40	not c	Pos heck	itior more	n e than	one	Reportable	Reportable		Estimated
	hours per					rs bot or/trus			compensatio		amount of
	week (list any		T	Π	1	T	Γ	-{ rrom	from related		other
	hours for	or director				L		the	organizations (W-2/1099-MIS		compensation from the
	related	9 01 0	eg Eg		ł	sated	ŀ	organization (W-2/1099-MISC)	(00-2/1099-10113	,0,	organization
	organizations	trustee	İrs		, g	m m		(** 27 1000 111100)			and related
	below	qual (i i	_	l ge	S as	₌				organizations
	line)	Individual	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				
(18) MARTIN O'CONNELL	1.00										
DIRECTOR		X				l	ı	0.	•	0.	0.
(19) MARY R. REGAN	1.00	Г									
DIRECTOR		x					ŀ	0.		0.	0.
(20) EMANUEL F. SARDINHA	1.00				Г	T		İ			
DIRECTOR		x						0.		0.	0.
(21) AZANDA H. SEYMOUR	1.00		\vdash	<u> </u>	 -		 	· · · · · · · · · · · · · · · · · · ·			
DIRECTOR		x						0.		0.	0.
(22) KELLY SILVESTRI	1.00	=	\vdash	\vdash	\vdash	\vdash	┢				
DIRECTOR		x						0.		0.	0.
(23) JONATHAN STOLPINSKI	1.00	 	┢	┢	┢	┢╌	t	<u> </u>	_		•
DIRECTOR	1.00	x		l .				0.		0.	0.
(24) BO SULLIVAN	1.00		┢		\vdash	┢	⊢	 		- 	<u> </u>
DIRECTOR	1.00	x						0.		0.	0.
(25) HEATHER WITALISZ SIEGEL	1.00	<u> </u>	⊢		┝╌	\vdash	\vdash	 			
DIRECTOR	1.00	X						0.		0.	0.
(26) WILLIAM R. PARKS	40.00	₽	⊢	├-	⊢	┼		ļ		~ 1	- 0.
	40.00	ł		x				131,085.		0.	10,217.
CHIEF EXECUTIVE OFFICER	L	<u> </u>		Λ			Ļ	131,085.		허	10,217.
1b Sub-total							>	131,083.		0.	0.
c Total from continuation sheets to Part VI	II, Section A							131,085.		0.	10,217.
d Total (add lines 1b and 1c)							<u> </u>	<u></u>			10,217.
2 Total number of individuals (including but n	ot limited to th	iose	liste	ed al	bove	e) wl	no r	eceived more than \$100	,000 of reportable	е	1
compensation from the organization							_		 		Yes No
										ſ	Yes No
3 Did the organization list any former officer,			e, ke	y er	nplo	yee	, or	highest compensated e	mployee on		
line 1a? If "Yes," complete Schedule J for s										ļ	3 X
4 For any individual listed on line 1a, is the su	-							•	the organization		4 X
and related organizations greater than \$150											4 X
5 Did any person listed on line 1a receive or a	•				-		elat	ted organization or indivi	dual for services		
rendered to the organization? If "Yes," com	plete Schedul	e J f	or s	ıch	pers	son				1	5 X
Section B. Independent Contractors											
1 Complete this table for your five highest co	mpensated inc	depe	ende	nt c	ontr	racto	ors 1	that received more than	\$100,000 of com	pens	ation from
the organization. Report compensation for	the calendar y	ear	endi	ng w	vith	or w	rthi	n the organization's tax	/ear		
(A)								(B)		_	(C)
Name and business	address	N	INC	<u> </u>			_	Description of s	ervices	<u> </u>	ompensation
									i		
							_				
									1		· · · · · · · · · · · · · · · · ·
							_]				
							\neg				
									ŀ		
2 Total number of independent contractors (ii	ncluding but n	ot lii	mite	d to	tho	se lis	stec	d above) who received m	ore than		4
\$100,000 of compensation from the organi	•				_	0		•	1		
											5 000 (0047)

Form **990** (2017)

BOYS & GIRLS CLUB OF GREATER Form 990 (2017) WESTFIELD, INC.

Part VIII | Statement of Revenue

	, , v	Check if Schedule O contain	e a recoonce	or note to any li	ne in this Part VIII	•		, [
		Check if Schedule C Contain	is a response	To Those to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1	a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contribution f All other contributions, gifts, grants, similar amounts not included above g Noncash contributions included in lines 1a- n Total. Add lines 1a-1f	and 1f	19,600.	432,445.			
			,	Business Code	DYXXXXXXXX	2322233		
Program Service Revenue	1	All other program service revenue		900099	1,553,917.			Nus - / Jan 19
		Total. Add lines 2a-2f	udanda vatar	ant and	1,553,91/.	NYTEN Y	Q. 88 1 8 16 1 8 15 15 15 15 15 15 15 15 15 15 15 15 15	9.4.34.545.85 S.
	3 4 5	Investment income (including divother similar amounts) Income from investment of taxee Royalties		>	36,149.			36,149.
	ı	Less rental expenses Rental income or (loss)	(i) Real 31,890. 0. 31,890.		31,890.	31,890.		
		Net rental income or (loss) Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other	31,090.	31,690.		
		and sales expenses Gain or (loss) Net gain or (loss)		7,747. -7,747.	-7,747.	-7,747.		
Other Revenue	8 4	Gross income from fundraising e including \$ 19,60 contributions reported on line 10 Part IV, line 18	O • of See	221,983.				
oth		Less direct expenses		102,329.			The second of th	
		 Net income or (loss) from fundra Gross income from gaming activ Part IV, line 19 		D	119,654.			119,654.
		Less direct expenses Net income or (loss) from gaming	b					
	ı	 a Gross sales of inventory, less retained allowances b Less cost of goods sold c Net income or (loss) from sales of 	a b					
		Miscellaneous Revenue		Business Code				
	11 a				•	,		
	•	All other revenue						
	12	Total. Add lines 11a-11d Total revenue. See instructions.		>	2,166,308.	1,578,060.	· 0 ·	155,803.

WESTFIELD, INC.

Form 990 (2017) WESTFIELD, IN Part IX Statement of Functional Expenses

	Check if Schedule O contains a respon				(D) ,
	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	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21			\$\text{\$\frac{1}{2}\text{\$\frac{1}\text{\$\frac{1}{2}\text{\$\frac{1}{2}\text{\$\frac{1}{2}\text{\$\frac{1}{2}\text{\$\frac{1}{2}\text{\$\frac{1}{2}\text{\$\frac{1}{2}\text{\$\frac{1}{2}\text{\$\frac{1}{2}\text{\$\frac{1}{2}\text{\$\frac{1}{2}\text{\$\frac{1}{2}\text{\$\frac{1}{2}\text{\$\frac{1}{2}\text{\$\frac{1}{2}\text{\$\frac{1}{2}\text{\$\frac{1}{2}\text{\$\frac{1}{2}\text{\$\frac{1}{2}\text{\$\frac{1}\text{\$\frac{1}\text{\$\fin}\text{\$\frac{1}\text{\$\frac{1}\text{\$\frac{1}\text{\$\frac{1}\t	10 10 10 10 10 10 10 10 10 10 10 10 10 1
2	Grants and other assistance to domestic				
_	individuals See Part IV, line 22			2年80分(スコルジュ 8年 - 11月44 でひる。	1.33 (1.42)(2.4) (4.44)
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			11/2/21/24/25	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
5	Compensation of current officers, directors,			, , , , , , , , , , , , , , , , , , , ,	
•	trustees, and key employees	142,217.	40,027.	43,136.	59,054
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	936,052.	833,574.	51,480.	50,998
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	17,981.		1,577.	1,714 4,706 7,975
9	Other employee benefits	58,370.	48,973.		4,706
10	Payroll taxes	83,681.	68,367.	7,339.	7,975
11	Fees for services (non-employees)			-	
а	Management		<u> </u>	-	
b	Legal	45 050	7	14 202	
С	Accounting	17,852.	3,570.	14,282.	
d	Lobbying		1 4 5 4 1 6 1 6 1 6 1 6 1 6 1 6 1 6 1 6 1 6 1	-25.4 W. Land John C. 18	
е	Professional fundraising services. See Part IV, line 17		化八年 经经产分	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
f	Investment management fees		ļ		
g	· · · · · · · · · · · · · · · · · · ·			,	
	column (A) amount, list line 11g expenses on Sch O.)	, 5,515.	4,454.		1 061
12	Advertising and promotion	22,095.	11,984.	5,537.	1,061 4,574
13	Office expenses	22,055.	11,504.	3,337.	1,3,1
14 15	Information technology	 -	<u> </u>		
15 16	Royalties Occupancy	94,803.	91,959.	1,896.	948
17	Travel	32,428.	31,801.	627.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		l :		•
19	Conferences, conventions, and meetings	21,908.	21,908.		
20	Interest	24,159.	23,676.	483.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	193,134.	188,306.	4,249.	579
23	Insurance	56,197.	52,825.	3,372.	
24	Other expenses. Itemize expenses not covered		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	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 0.)			Carly Colored Barrier	10 17 C 18 C 19 C 18 C 19 C
а	PROGRAM EXPENSES	245,877.	245,877.		7.5-
b	REPAIRS AND MAINTENANCE	48,817.	47,355.	975.	487
С	DUES, FEES, LICENSES	25,481.	22,376.	911.	2,194
d	EDUCATIONAL AND RECRUIT	2,830.	2,830.		
е	All other expenses	2 022 202	1 754 550	140 555	124 200
25	Total functional expenses. Add lines 1 through 24e	2,029,397.	1,754,552.	140,555.	134,290
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)		l		

Pa	rt 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		End of year
	1	Cash - non-interest-bearing		1	0.05
	2	Savings and temporary cash investments	338,043.	2	296,734.
	3	Pledges and grants receivable, net	4,305.	3	1,580.
	4	Accounts receivable, net	144,911.	4	93,628.
	5	Loans and other receivables from current and former officers, directors,	学(第1)编码。	1 S.	
]	trustees, key employees, and highest compensated employees. Complete		25 (357) Mariana	
		Part II of Schedule L · ·		5	
	6	Loans and other receivables from other disqualified persons (as defined under	ALK FREE TONGS	6 / 3	
•		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing		465	
		employers and sponsoring organizations of section 501(c)(9) voluntary		125	Special Committee and the committee of t
ţ		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
Ř	8	Inventories for sale or use .		8	
	9	Prepaid expenses and deferred charges	.14,906.	9	11,463.
	10a	Land, buildings, and equipment cost or other		\$ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	75 S. S. S. S. S. S. S. S. S. S. S. S. S.
		basis Complete Part VI of Schedule D 10a 6,067,976.		200	
	Ь	Less accumulated depreciation 10b 2,737,370.	3,494,190.	10c	3,330,606.
	11	Investments - publicly traded securities	541,055.	11	746,275.
	12	Investments - other securities See Part IV, line 11	42,960.	12	44,441.
	13	Investments - program-related. See Part IV, line 11		13	* ,
	14	Intangible assets		14	,
	15	Other assets See Part IV, line 11	8,000.	15	8,000.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	4,588,370.	16	4,532,727.
	17	Accounts payable and accrued expenses	115,484.	17	110,640.
	18	Grants payable		18	
	19	Deferred revenue	16,057.	19	21,251.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	•
S	22	Loans and other payables to current and former officers, directors, trustees,		in it	规心感的减数(1.84%)
≝		key employees, highest compensated employees, and disqualified persons			
Liabilities	1	Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	633,216.	23	422,609.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X of		i	'
		Schedule D ,	14,106.	25	10,447.
	26	Total liabilities. Add lines 17 through 25	778,863.	26	564,947.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ ' X and			经营销 经发现的
es		complete lines 27 through 29, and lines 33 and 34.		完 答	
- DE	27	Unrestricted net assets	3,368,503.	27	3,524,210.
3ali	28	Temporarily restricted net assets	274,004.	28	276,570.
Ę.	29	Permanently restricted net assets	167,000.	29	167,000.
Ē	Ì	Organizations that do not follow SFAS 117 (ASC 958), check here ▶		% ()	
ō		and complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
455	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	3,809,507.	33	3,967,780.
	34	Total liabilities and net assets/fund balances	4,588,370:	34	4,532,727.

BOYS & GIRLS CLUB OF GREATER WESTFIELD, INC.

	· ·			
Forn	n 990 (2017) WESTFIELD, INC.	04-	-2464259	Page 12
Pa	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)		2,166	5,308.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,029	,397.
3	Revenue less expenses Subtract line 2 from line 1	3		5,911.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		507.
5	Net unrealized gains (losses) on investments	5	21	.,362.
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Pnor period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	1		
	column (B))	10	3,967	7,780.
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			لعا
				Yes No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	۔ تکت	
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	a no t	[*]	* w
	separate basis, consolidated basis, or both			
	Separate basis Consolidated basis L_ Both consolidated and separate basis		ه شد د	شند سي
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 separat	e basis	· \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	\$ 3000 \$ 2000 \$ 2000
	consolidated basis, or both		1.0	2% - 1 3 8 3 8 3 8
	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	e audıt,		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch		1' 1'	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Au	OII 2	ستشفأ
	Act and OMB Circular A-133?		<u></u> +-	X
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired aud		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	X

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization BOYS & GIRLS CLUB OF GREATER Employer identification number INC. 04-2464259 WESTFIELD, Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is: (For lines 1 through 12, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, rts supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the organization listed (III) Type of organization (v) Amount of monetary (vi) Amount of other (i) Name of supported (ii) EIN in your gov ına document (described on lines 1.10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

04-2464259 Page 2

Schedule A (Form 990 or 990-EZ) 2017 WESTFIELD, INC.

Part II 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)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")	989,284.	314,308.	326,197.	513,009.	432,445.	2,575,243.
2	Tax revenues levied for the organ-						_
	ization's benefit and either paid to	l .					
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	989,284.	314,308.	326,197.	513,009.	432,445.	2,575,243.
5	The portion of total contributions	大学等2000 L	医结束 含含				
	by each person (other than a		"L" X (\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the					<i>图</i> . 经基础分	
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4	32.805.70 m B	で変数なな変数がは	対の必要とい	\$15480 \$ F-311.6	2/2/3/3/3/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2	2,575,243.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	989,284.	314,308.	326,197.	513,009.	432,445.	2,575,243.
8	Gross income from interest,						
	dividends, payments received on		,				
	securities loans, rents, royalties,						
	and income from similar sources	56,927.	14,536.	0.	7,525.	28,402.	107,390.
9	Net income from unrelated business						
	activities, whether or not the	•					
	business is regularly carried on						
10	Other income Do not include gain					1	
	or loss from the sale of capital						
	assets (Explain in Part VI)	124,106.	143,386.	98,337.	104,593.	151,544.	621,966.
11		255 7400	\$13413545A		3,444, 397	(人) (在 1000年)	3,304,599.
	Gross receipts from related activities.		ons)			12	
	First five years. If the Form 990 is fo	•		d. fourth, or fifth ta	ax vear as a sectio	n 501(c)(3)	
-	organization, check this box and stop	•	, .	, ,	•		▶□
Sec	ction C. Computation of Pub	ic Support Pe	rcentage				
14	Public support percentage for 2017 (line 6, column (f) d	ivided by line 11, o	column (f))		14	77.93 %
15	Public support percentage from 2016	Schedule A, Part	II, line 14			15	79.83 %
	33 1/3% support test - 2017. If the			n line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and
	stop here. The organization qualifies						►X
ь	33 1/3% support test - 2016. If the		_		line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qua					•	▶□
17a	10% -facts-and-circumstances tes		-		e 13. 16a. or 16b. a	and line 14 is 10%	or more.
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						▶□.
ь	10% -facts-and-circumstances tes	_	-			17a, and line 15 is	10% or
	more, and if the organization meets to				_		
	organization meets the "facts-and-cire						▶[
18	Private foundation. If the organization						, , ,
	Title Touridation. If the Organization	did not officer a	207 011 1110 10, 10	_,,		edule A (Form 990	

Schedule A (Form 990 or 990-EZ) 2017 WESTFIELD, INC.

04	- 2	24	64	25	9	Page:	3

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization failed to qualify under the tests listed below, please complete Part II) Section A. Public Support (e) 2017, Calendar year (or fiscal year beginning in) (a) 2013 (b) 2014 (c) 2015 (d) 2016 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b 8 Public support. (Subtract line 7c from line 6. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 20/13 **(b)** 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated buşiness activities not included in line 10b, whether or not the business, is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI') 13 Total support. (Add lines 9,/10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)) 15 % 16 Public support percentage from 2016 Schedule A, Part III, line 15 % Section D. Computation of Investment Income Percentage

17 %

17	Investment in	come percentage for 2017 (line 10c, column (f) divided by line 13, columi	า (f))
18	Investment in	come percentage from 2016 Schedule A. Part III. line 17	

9a 33 1/3% support	tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line
more than/33 1/3%	6, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20	Private foundation	. If the organization did	d not check a box on line 1	4, 19a, or 19	b, check this box and see instructions

%

Schedule A (Form 990 or 990-EZ) 2017 WESTFIELD, INC.

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

- 1 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?
- 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 charitable 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.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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)

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04-2464259 Page 5 Schedule A (Form 990 or 990-EZ) 2017 WESTFIELD, INC. Supporting Organizations (continued) Yes Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) 11a below, the governing body of a supported organization? b A family member of a person described in (a) above? 11b c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. 11c Section B. Type I Supporting Organizations 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 during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or 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 supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year 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 in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization Section C. Type II Supporting Organizations Yes Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s) 1 Section D. All Type III Supporting Organizations Yes No Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s) By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's 3 supported organizations played in this regard Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions). The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below ь The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions) c Yes Nο Activities Test Answer (a) and (b) below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities 2a b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement 3 Parent of Supported Organizations Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. За ~X. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard 3b

04-2464259 Page 6 Schedule A (Form 990 or 990-EZ) 2017 WESTFIELD, INC. Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year (A) Prior Year Section A - Adjusted Net Income (optional) * Net short-term capital gain 1 1 2 2 Recoveries of prior-year distributions Other gross income (see instructions) 3 Add lines 1 through 3 4 5 Depreciation and depletion 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) 8 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) Aggregate fair market value of all non-exempt-use assets (see 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) 2 Acquisition indebtedness applicable to non-exempt-use assets 3 Subtract line 2 from line 1d Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, 4 see instructions) 5 5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by '035 6 6 7 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6) 8 Current Year Section C - Distributable Amount : માં અંદ્રિકેટ્સ્ટ્રે (માં અંદ્રિકેટ્સ્ટ્રેક્સ્ટ્રેક્સ્ટ્રે Adjusted net income for prior year (from Section A, line 8, Column A) (6) 医克克克斯氏征肾炎 动 Enter 85% of line 1 2 · 被交换 1. 14. 第二十十二 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 4 Enter greater of line 2 or line 3

CONTRACTOR STATE emergency temporary reduction (see instructions) Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions)

5

Schedule A (Form 990 or 990-EZ) 2017

Income tax imposed in prior year

Distributable Amount. Subtract line 5 from line 4, unless subject to

04-2464259 Page 7 Schedule A (Form 990 or 990-EZ) 2017 WESTFIELD, INC. Part V. 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 4 Amounts paid to acquire exempt-use assets 5 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 2017 from Section C, line 6 Line 8 amount divided by line 9 amount (iii) (ii) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2017 Amount for 2017 はがないだがからがら 'Distributable amount for 2017 from Section C, line 6 Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in Part VI) See instructions Excess distributions carryover, if any, to 2017 a 是是是不多的人的意思的意思的 **b** From 2013 c From 2014 d From 2015 아양물이 되는 사선가 e From 2016 きょうとくぶんぱいこう f' Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2017 distributable amount Carryover from 2012 not applied (see instructions) Remainder Subtract lines 3g, 3h, and 3i from 3f Distributions for 2017 from Section D. a Applied to underdistributions of prior years 対応がないないは b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI. See instructions Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI See instructions Excess distributions carryover to 2018. Add lines 3 and 4c Breakdown of line 7 R GOV CXXXXX a Excess from 2013 b Excess from 2014

1872 A 1874 L

Schedule A (Form 990 or 990-EZ) 2017

c Excess from 2015

d Excess from 2016

e Excess from 2017

Schedule A (Form 990 or 990-EZ) 2017 WESTFIELD, INC. 04-2464259
Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12,

04-2464259 Page 8

	line 1, Section	Part on D, I	IV, Section	on D, lir	nes 2 and 3	; Part IV	, Section E, Iir	nes 1c, 2a,	2b, 3a,	and 3b, Part	ection B, lines 1 and 2, Par V, line 1, Part V, Section B t for any additional informat	, line 1e, Part V,
SCHE	DULE A	Α,	PART	II,	LINE	10,	EXPLAN	ATION	FOR	OTHER	INCOME:	
SPEC	IAL EV	/EN	TS				. <u>-</u> .			<u>.</u>		
2013	AMOUN	T:	\$	98,	843.					<u></u>		
2014	AMOUN	IT:	\$	114	,893.							·
2015	AMOUN	VT :	\$	69,	292.							
2016	AMOUN	VT:	\$	73,	316.	1						
2017	AMOUN	VT:	\$	119	,654.	•						
PRODU	JCTIVE	E E	NTERI	PRIS	ES			· · · · · · · · · · · · · · · · · · ·				
2013	AMOUN	IT :	\$	25,	263.							
2014	AMOUN	IT:	\$	28,	493.		··· <u>·</u> ··				11-15-1 8	
2015	AMOUN	IT :	\$	29,	045.							
2016	AMOUN	1T :	\$	31,	277.							
2017	AMOUN	IT :	\$	31,	890.							, ,
						-	····				1 1 14,014	
			· · · · ·			·						

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 Open to Public Inspection

Name of the organization

BOYS & GIRLS CLUB OF GREATER WESTFIELD

Employer identification number 04-2464259

Pa	Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds
	are the organization's property, subject to the organization's	exclusive legal control?	└── Yes └── No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be u	used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose o	conferring
	impermissible private benefit?		Yes No
Pa	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, P	art IV, line 7
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply)	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a histo	rically important land area
	Protection of natural habitat	Preservation of a certif	ied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quality	fied conservation contribution in the form of	
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic structu	re
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements in		└─ Yes └─ No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	ervation easements during the year
			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservat	ion easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(l	
	and section 170(h)(4)(B)(ii)?		└── Yes └── No
9	In Part XIII, describe how the organization reports conservati		
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes t	he organization's accounting for
-	conservation easements	(A.A. Iliahania - I Tananana an OA	hau Cimilar Assats
Pai	t III Organizations Maintaining Collections o		ner Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under SFAS 116 (AS	**	
	historical treasures, or other similar assets held for public ext		ice of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri		
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ea	ducation, or research in furtherance of pub	lic service, provide the following amounts
	relating to these items		
	(i) Revenue included on Form 990, Part VIII, line 1		► \$ ► \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		gain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items	
а	Revenue included on Form 990, Part VIII, line 1		S
b	Assets included in Form 990, Part X		▶ \$

Sche	edule D (Form 990) 2017 WESTFIE	LD, INC.	01 0112112				04-24	64259	Page 2
	rt III Organizations Maintaining C		rt, Historical Tr	easures, o	or Othe				
3	Using the organization's acquisition, accessi								
	(check all that apply)			_		•			
а	Public exhibition	d	Loan or exc	hange progra	ıms				
b	Scholarly research	e							
c	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	n how they further t	he organizatio	on's exer	mpt purp	ose in Par	t XIII.	
5	During the year, did the organization solicit of								
	to be sold to raise funds rather than to be ma							Yes	☐ No
Pa	rt IV Escrow and Custodial Arran				Yes" on	Form 99	0, Part IV,	line 9, or	
	reported an amount on Form 990, Pa		•						
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for contribution	s or other as:	sets not	ıncluded		, .	
	on Form 990, Part X?		•					Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table						
	, ,	•	· ·					Amount	
С	Beginning balance					1c			
đ	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for escrow or cu	ustodial accol	unt liabili			Yes	No
ь	If "Yes," explain the arrangement in Part XIII.	•	•			•			
Pa					_	0			
		(a) Current year	(b) Prior year	(c) Two years			ears back	(e) Four ye	ars back
1a	Beginning of year balance	584,015.	513,698.	517	,315.	5	20,228.	4	33,503.
b	Contributions	151,301.		25	,445.		1,269.		2,135.
С	Net investment earnings, gains, and losses	55,400.	70,317.	-29	,062.	-4.182.			84,590.
d	Grants or scholarships	· · · · · · · · · · · · · · · · · · ·		-					
е	Other expenditures for facilities								
	and programs				İ				
f	Administrative expenses								
g	End of year balance	790,716.	584,015.	513	,698.	5	17,315.	5.	20,228.
2	Provide the estimated percentage of the curi		e (line 1a. column (a)) held as					
а	Board designated or quasi-endowment	47.00	%	-,,					
b	Permanent endowment ► 32.00	%	—						
С		1.00 %							
	The percentages on lines 2a, 2b, and 2c sho								
За	Are there endowment funds not in the posse	•	ation that are held a	nd administer	red for th	ne organiz	zation		
	by					J		Γy	es No
	(i) unrelated organizations							3a(i) 2	ζ
	(ii) related organizations							3a(ii)	X
ь	If "Yes" on line 3a(ii), are the related organiza	tions listed as requi	red on Schedule R?					3b	1
4	Describe in Part XIII the intended uses of the								
Pai	t VI Land, Buildings, and Equipm			***			**		
	Complete if the organization answered). Part IV. line 11a. S	See Form 990.	Part X.	line 10			
	Description of property	(a) Cost or o		or other		cumulate	ed be	(d) Book v	alue
	Edden prior of property	basis (investr		(other)		reciation		(0) 200	
1a	Land	- 		†	<u>-</u>				
b	Buildings		5.70	0,380.	2.4	55,3	33.	3,245,	047.
c	Leasehold improvements								
d	Equipment		23	2,777.	1	60,2	64.	72.	513.
	Other			4,819.		21,7			046.
	l. Add lines 1a through 1e. (Column (d) must e	gual Form 990. Part				<u> • • • • • • • • • • • • • • • • • • </u>		3,330,	

Schedule D (Form 990) 2017

BOYS & GIRLS CLUB OF GREATER 04-2464259 Page 3 WESTFIELD, INC. Schedule D (Form 990) 2017 Part VII Investments - Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b See Form 990, Part X, line 12 (c) Method of valuation Cost or end-of-year market value (a) Description of security or category (including name of security) (b) Book value (1) Financial derivatives (2) Closely-held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c See Form 990, Part X, line 13 (c) Method of valuation Cost or end-of-year market value (a) Description of investment (b) Book value (1) (2) (3)(4) (5) (6) (7) (8) (9)Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description (b) Book value

(1)
(2)
(3)
(4)
(5)
(6)
(7)
(8)
(9)

Total. (Column (b) must equal Form 990, Part X, col (B) line 15)

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25

1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2) DUE TO INTERNAL MEMBER GROU	PS.	10,447.	
(3)			
(4)			
(5)	,	•	
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	10,447.	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

BOYS & GIRLS CLUB OF GREA	TER			
Schedule D (Form 990) 2017 WESTFIELD, INC.		04-2	464259	Page 4
Part XI Reconciliation of Revenue per Audited Financial Staten	nents With Revenue per I	₹eturn.		
Complete if the organization answered "Yes" on Form 990, Part IV, line 12	ła			
Total revenue, gains, and other support per audited financial statements		1	2,194,	111.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		1		
a Net unrealized gains (losses) on investments	2a 21,362.			
b Donated services and use of facilities	2b 6,441.]\.\\${		
c Recovenes of prior year grants	2c], , , , , ,		
d Other (Describe in Part XIII)	2d			
e Add lines 2a through 2d		2e		803.
3 Subtract line 2e from line 1		3	2,166,	308.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		, <u>;</u> ;		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b Other (Describe in Part XIII)	4b			
c Add lines 4a and 4b		4c		0.
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	2,166,	308.
Part XII Reconciliation of Expenses per Audited Financial State		r Retur	n.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a	<u>. </u>		
1 Total expenses and losses per audited financial statements		1	2,035,	838.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25				
a Donated services and use of facilities	2a 6,441.			
b Pnor year adjustments	· 2b			
c Other losses	2c	1,783		
d Other (Describe in Part XIII)	2d		_	
e Add lines 2a through 2d		2e	6, 2,029,	441.
3 Subtract line 2e from line 1		3	2,029,	<u> 397.</u>
4 Amounts included on Form 990, Part IX, line 25, but not on line 1				
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	」 , ⋰┃		
b Other (Describe in Part XIII)	4b			_
c Add lines 4a and 4b		4c		0.
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	2,029,	397.
Part XIII Supplemental Information.				
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa	irt IV, lines 1b and 2b, Part V, line	4, Part X	, line 2, Part X	(1,
lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any ac	ditional information			
4-14-24-1-1				
				
			· · · ·	

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Schedule D (Form 990) 2017

SCHEDULE G

Department of the Treasury

Internal Revenue Service

113

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

➤ Attach to Form 990 or Form 990-EZ.

Go to www.lrs.gov/Form990 for the latest instructions.

2017

OMB No 1545-0047

Open to Public - 5

Name of the organization

BOYS & GIRLS CLUB OF GREATER WESTFIELD, INC.

Employer identification number 04-2464259

WDDIII	DD, INC.				01 2101	200
Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17 Form 990 EZ filers are not required to complete this part					I filers are not	
1 Indicate whether the organization rais	sed funds through any of the follows	na acti	vities	Check all that apply		
<u></u>	, , <u> </u>	•				
a Mail solicitations				overnment grants		
b Internet and email solicitations				nment grants		
c Phone solicitations	g L Special	fundra	aising	events		
d In-person solicitations						
2 a Did the organization have a written of	or oral agreement with any individual	l (mehu	dina o	fficare directors tax	stage or	
_	-		-			┌
key employees listed in Form 990, P						
b If "Yes," list the 10 highest paid indi	viduals or entities (fundraisers) pursi	uant to	agree	ements under which	the fundraiser is to t	oe e
compensated at least \$5,000 by the	organization.					
		,				
		(iii)	Did		(v) Amount paid	(vi) Amount paid
(i) Name and address of individual	(ii) Activity	fundi have c	raiser ustody	(iv) Gross receipts	to (or retained by)	to (or retained by)
or entity (fundraiser)	(,,)	I or cor	ntrol of utions?	from activity	fundraiser listed in col (i)	organization
		CONTRIB	ulionar		iisted iii coi (i)	_
		Yes	No			
				1		
		 				
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	L					
Total ►						
3 List all states in which the organization	n is registered or licensed to solicit of	contrib	outions	s or has been notified	d it is exempt from re	egistration
or licensing						
	•			-		
	· · · · · · · · · · · · · · · · · · ·					
	· · · · · · · · · · · · · · · · · · ·			 		
						
	1 24112-211					
					-	

Schedule G (Form 990 or 990 EZ) 2017 WESTFIELD, INC. 04-2464259 Page 2 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000 (a) Event #1 (b) Event #2 (c) Other events (d) Total events HALF (add col (a) through \mathtt{GOLF} MARATHON col (c)) (total number) (event type) (event type) 36,529 75,609. 241,583. 129,445 Gross receipts 19,600. 19,600 2 Less Contributions 75,609. 221,983. 36,529 109,845 3 Gross income (line 1 minus line 2) 4 Cash prizes Noncash prizes Direct Expenses Rent/facility costs Food and beverages Entertainment 62,501. 102,329 31,677. 8,151. Other direct expenses 102,329. 10 Direct expense summary Add lines 4 through 9 in column (d) 119,654. 11 Net income summary Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo F Revenue bingo/progressive bingo col (a) through col (c)) Gross revenue 2 Cash prizes Expenses 3 Noncash prizes Rent/facility costs 5 Other direct expenses Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities a is the organization licensed to conduct gaming activities in each of these states? b If "No," explain __ Yes 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? b If "Yes," explain

(1)

Sch	nedule G (Form 990 or 990 EZ) 2017 WESTFIELD, INC. 04-	2464	259	Page 3
11		7	Yes	No No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
-	to administer charitable gaming?		Yes	□ No
13	Indicate the percentage of gaming activity conducted in:			
	a The organization's facility	13a		%
	b An outside facility	13b		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address >		,	
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
t	o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained by the third party >\$			
c	c If "Yes," enter name and address of the third party			
	Name			
	Address ►			
16	Gaming manager information			
	Name			
	Gaming manager compensation ▶ \$			
	Description of services provided			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions			
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	☐ No
t	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year 🕨 \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III,	lines 9,	9b, 10	b, 15b,
	15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
			-	•
				

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'SCHEDULE O

4|+

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

BOYS & GIRLS CLUB OF GREATER Name of the organization WESTFIELD, INC.

Open to Public

04-2464259

OMB No 1545-0047

Inspection -Employer identification number

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TO INSPIRE AND ENABLE ALL YOUNG PEOPLE ESPECIALLY THOSE FROM
DISADVANTAGED CIRCUMSTANCES, TO REALIZE THEIR FULL POTENTIAL AS
PRODUCTIVE, RESPONSIBLE AND CARING CITIZENS.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TO INSPIRE AND ENABLE ALL YOUNG PEOPLE, ESPECIALLY THOSE FROM
DISADVANTAGED CIRCUMSTANCES, TO REALIZE THEIR FULL POTENTIAL AS
PRODUCTIVE, RESPONSIBLE AND CARING CITIZENS. THE BOYS AND GIRLS CLUB
OF GREATER WESTFIELD WILL SERVE AS A SPOKESPERSON AND ADVOCATE FOR THE
YOUTH AND WILL PROVIDE PROGRAMS AND SERVICES BUILT ON MEMBER AND
COMMUNITY INVOLVEMENT WHICH ARE RESPONSIVE TO LOCAL NEEDS.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
AT THE BOYS & GIRLS CLUB OF GREATER WESTFIELD (THE CLUB) THE MISSION IS
TO INSPIRE AND ENABLE ALL YOUNG PEOPLE, ESPECIALLY THOSE WHO NEED US
MOST, TO REALIZE THEIR FULL POTENTIAL AS PRODUCTIVE, RESPONSIBLE AND
CARING CITIZENS.
FOR 49 YEARS, THE CLUB HAS BEEN IN THE FOREFRONT OF YOUTH DEVELOPMENT,
WORKING WITH YOUNG PEOPLE FROM DISADVANTAGED ECONOMIC, SOCIAL AND
FAMILY CIRCUMSTANCES. IN FULFILLING OUR MISSION, WE PROVIDE A SAFE
HAVEN FOR YOUTH WHERE OUR CARING AND PROFESSIONAL MENTORING STAFF
INSPIRE YOUNG PEOPLE TO DREAM BIG AND WORK HARD TO ACHIEVE THEIR
PERSONAL GOALS.

. . . .

Name of the organization BOYS & GIRLS CLUB OF GREATER WESTFIELD, INC.

Employer identification number 04-2464259

OPERATES WITHIN THE BEST PRACTICES OF A NONPROFIT ORGANIZATION. IN DOING SO. THE CLUB EARNS ITS ROLE IN GREATER WESTFIELD AS A STABLE, COLLABORATIVE, RESPECTED AND RESPONSIVE YOUTH SERVING ORGANIZATION. IN 2017, THE CLUB WAS ABLE TO MAKE A POSITIVE IMPACT ON 1,983 MEMBERS IN THE GREATER WESTFIELD AREA. OVER 900 MEMBERS PARTICIPATED IN PROGRAMS DEVELOPING PHYSICAL FITNESS AND POSITIVE USE OF LEISURE TIME. OVER 600 MEMBERS PARTICIPATED IN ARTS PROGRAMMING. 115,000 SNACKS AND MEALS WERE SERVED DURING THE SCHOOL YEAR AND OVER 27,000 MEALS WERE SERVED AT TEN SITES DURING THE SUMMER. EVERY CLUB MEMBER WHO WAS A HIGH SCHOOL SENIOR, GRADUATED IN MAY OF 2018. THE POWDERMILL VILLAGE PUBLIC HOUSING BOYS & GIRLS CLUB UNIT PROVIDED PROGRAMS FOR 110 YOUTH MEMBERS. WITH COMMUNITY SUPPORT TO THE BEST EXTENT POSSIBLE, THE CLUB IS ABLE TO BE AN INNOVATOR IN THE DELIVERY OF PROGRAMS AND ACTIVITIES DESIGNED TO MEET THE EVER-CHANGING ACADEMIC, CULTURAL, SOCIAL AND RECREATIONAL NEEDS OF CHILDREN IN GREATER WESTFIELD. PROGRAMS ARE RUN IN FIVE CORE PROGRAM AREAS INCLUDING: SPORTS, FITNESS AND RECREATION; CHARACTER AND LEADERSHIP DEVELOPMENT; HEALTH AND LIFE SKILLS; EDUCATION AND CAREER DEVELOPMENT; AND THE ARTS. IN ADDITION TO OUR PROGRAM GEARED TOWARDS 3 TO 5 YEAR OLDS, THE CLUB IS AVAILABLE TO SERVE ALL YOUNG PEOPLE BETWEEN THE AGES OF 5 AND 18 EVERY DAY AFTER SCHOOL AND FULL DAYS DURING THE SUMMER. NO CHILD IS TURNED

FORM 990, PART VI, SECTION A, LINE 2:

AWAY DUE TO AN INABILITY TO PAY THE MEMBERSHIP FEE.

TWO BOARD MEMBERS ARE RELATED TO ONE ANOTHER VIA A FAMILIAL RELATIONSHIP.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS REVIEWED BY THE FINANCE DIRECTOR, CHIEF EXECUTIVE OFFICER

Schedule O (Form 990 or 990-EZ) (2017)	Page 2
Name of the organization BOYS & GIRLS CLUB OF GREATER WESTFIELD, INC.	Employer identification number 04-2464259
AND TREASURER PRIOR TO FILING. THE FORM 990 IS MADE AVAIL	ABLE TO ALL BOARD
MEMBERS FOR REVIEW PRIOR TO FILING.	
	<u> </u>
FORM 990, PART VI, SECTION B, LINE 12C:	
THE CHIEF EXECUTIVE OFFICER, FINANCE DIRECTOR, AND EXECUT	IVE COMMITTEE
MONITOR AND ENFORCE COMPLIANCE WITH THE CONFLICT OF INTER	EST POLICY ON AN
ON GOING BASIS THROUGHOUT THE YEAR. THE CLUB DISCLOSES AN	Y RELATED PARTY
TRANSACTIONS IN THE ANNUAL FINANCIAL STATEMENTS.	
FORM 990, PART VI, SECTION B, LINE 15A:	
THE EXECUTIVE COMMITTEE AND BOARD PRESIDENT REVIEW AND AP	PROVE OF THE CHIEF
EXECUTIVE OFFICER'S SALARY ANNUALLY. THE LEVEL OF COMPENS	ATION IS COMPARED
TO COMPARABLE ORGANIZATIONS WITHIN THE COMMUNITY AND WAGE	INFORMATION
RECEIVED FROM THE REGIONAL SERVICE DIRECTOR OF THE BOYS A	ND GIRLS CLUB OF
AMERICA.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE CLUB MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTER	EST POLICY, AND
FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST	OF THE INTERESTED
PARTY.	
FORM 990, PAGE 12, PART XII, LINE 2C	
THERE WERE NO CHANGES TO THE ORGANIZATION'S OVERSIGHT PRO	CESS OR
SELECTION PROCESS DURING THE YEAR.	

732212 09-07-17

Schedule O (Form 990 or 990-EZ) (2017)