Form 990

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

2018

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public ► Go to www.irs gov/Form990 for instructions and the latest information.

For the 2018 calendar year, or tax year beginning , 2018, and ending D Employer identification number Check if applicable Terre Haute Boys & Girls Club 35-0868182 Address change 924 North 13th Street E Telephone number Name change Terre Haute, IN 47807 (812) 232-2046 Initial return Final return/terminated G Gross receipts \$ 1,364,608. Amended return H(a) Is this a group return for subordinates X No F Name and address of principal officer Yes Application pending Kent Stultz H(b) Are all subordinates included?

If "No," attach a list (see instructions) Yes Same As C Above Tax exempt status X = 501(c)(3)(insert no) 4947(a)(1) or 501(c) (Website: ► thbac.ora H(c) Group exemption number 🕨 1908 M State of legal domicile Corporation X Other ► L Year of formation Form of organization Trust Association Part(I Summary Briefly describe the organization's mission or most significant activities To provide recreational activities, programs, and supervision for boys and girls, Activities & Governance If the organization discontinued its operations or disposed of more than 25% of its net assets Check this box ► Number of voting members of the governing body (Part VI, line 1a). Number of independent voting members of the governing body (Part VI, line 1b) 4 33 Total number of individuals employed in calendar year 2018 5 Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12. 7a b Net unrelated business taxable income from Form 990 F line \$816 n 6 2019 7b Prior Year Current Year Contributions and grants (Part VIII, line 1h) 176,320. 201,414. OGDEN, UT Program service revenue (Part VIII, line 2a) 177,874. 193,472. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 142,565. 57,194. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 99,633 95,477. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 621,486. 522,463. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 Benefits paid to or for members (Part IX, column (A), line 4) 14 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 352,235 385,077. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 310,593. 301,948. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 687,025. 662,828. Revenue less expenses Subtract line 18 from line 12 -41,342.-164,562. Beginning of Current Year End of Year Total assets (Part X, line 16) 3,980,830. 3,717,789. 20 21 Total liabilities (Part X, line 26). 63,787. 35,113. Net assets or fund balances Subtract line 21 from line 20 3,917,043. 3,682,676. 22 Partill Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here 7/15/19 PTIN Print/Type preparers name Preparer s signature Paid Eleanor M. Caldwell, CPA Eleanor M. Caldwell, CPA self employed P00634823 Preparer SACKRIDER & COMPANY, INC Firm's name **Use Only** Firms EIN > 35-1327464 1925 Wabash Avenue

May the IRS discuss this return with the preparer shown above? (see instructions)

Terre Haute, IN 47807-3326

Phone no 8122329492

Forn	n 990 (2018) Terre Haute Boys & Girls Club	35-08	6818	32	F	Page 2
Par	rt III Statement of Program Service Accomplishments				-	
	Check if Schedule O contains a response or note to any line in this Part III					X
1	Briefly describe the organization's mission		-			
	To provide recreational activities, programs, and supervision for	_boys	and	gir.	<u>ls_</u> _	
2	Did the organization undertake any significant program services during the year which were not listed on the prior	r				
	Form 990 or 990-EZ?			Yes	X	No
	If "Yes," describe these new services on Schedule O		_		_	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program ser	vices?		Yes	X	No
	If "Yes," describe these changes on Schedule O					
4	Describe the organization's program service accomplishments for each of its three largest program service	ces, as m	easure	d by	expen	ses
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations and revenue, if any, for each program service reported	s to others	s, the	otai e	xpens	es,
	and a series of a series by a great control of a series of a serie					
	(Code) (Expenses \$ 295,251. including grants of \$) (Re	evenue	<u> </u>			
	Baseball, football, and basketball camps and leagues as well as c		·	α 1	Flag	
	football, golf, tumbling, and volleyball for youths. The main obj					
	recreational programs is to get our kids involved with physical a					
	learning dicipline and helping with their self esteem. As with a					
	we are looking to build a sense of competence, usefulness, belong					ا
	influence in young people. The Boys & Girls Club is continually					
	our recreational programming and striving to be "The Positive Pla				Janu	
	our recreational programming and striving to be the rositive ria	<u>ce 101</u>				
	*					
						
4 h	(Code) (Expenses \$ 158,322. including grants of \$) (Re	venue \$				
40	Earlybird program for youths during the summer. Program provides			0n 1	nd	—′
	activities throughout summer months. The Early Bird program work	_znber	+ 202 1721	011_c	<u> </u>	
	support families by offering high quality affordable daycare whil					
	with a wide variety of fun and educational activities. The goal					
	children's knowledge and to increase their social skills and self			uen.	-ciie	
	children's knowledge and to increase their social skills and self	_e2ree	<u></u> – -			
			- - -			
10	(Code) (Expenses \$ 107,182 . including grants of \$) (Re	venue \$		-		
40	To provide recreational activities, programs and supervision for			1 ~ 1 0		—′
	10 provide recreational activities, programs and supervision for	poys_a	iiu_q	7772	<u>-</u> –	
		-				
				· – – ·		
		-				
		_ -	· – – -			
						
N -1	Other program corvices (Describe in Schodula O.)					
	Other program services (Describe in Schedule O) See Schedule O (Exposes \$				`	
	(Expenses \$ 69,334 including grants of \$) (Revenue \$.			<u> </u>	
4 e	Total program service expenses ► 630,089.			F	000 /	2010

Form 990 (2018) Terre Haute Boys & Girls Club Partiv Checklist of Required Schedules

*** X	4446			
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	Yes	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
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		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
á	Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If 'Yes,' complete Schedule D, Part VI	11 a	х	
ł	Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		_X_
	Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		<u> x</u>
C	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	11 d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	х	
	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Х	
t	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>X</u> .
4 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
t	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
6	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
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	Х	
9	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
:0a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20ь		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х

Form 990 (2018) Terre Haute Boys & Girls Club Part W Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
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	Х	
24	a 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		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		:
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a 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 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 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)			
;	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
I	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	c 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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
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		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
ŀ	olf '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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		X
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Х	
Pai	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	Ī	Yes	No
1:	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 12		162	110
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b. 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		Ü	
DAA	(gambling) winnings to prize winners?	1 c	X	20100

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Form 990 (2018) Terre Haute Boys & Girls Club

Statements Regarding Other IRS Filings and Tax Compliance (continued)

	•		Yes	No
	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2 a 29			
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	DATE OF THE PARTY
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
	b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b		
	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If (Note that the property of the foreign country).	1a	STATE	X
	b If 'Yes,' enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
_	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a	320203	X
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
	a 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?	6 a		X
	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b	narional con	Note that and large
7	Organizations that may receive deductible contributions under section 170(c).	umu drv		a denomina
	a 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?	7 a	X	
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	Х	
	c.Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d			, in
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X.
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g	- <u></u>	
	In If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h	· ·	
8		8		
9	Sponsoring organizations maintaining donor advised funds.	22.72	G 144	56.85
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		Market
	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter		7/3	
	a Initiation fees and capital contributions included on Part VIII, line 12			4.5
ı	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b			
11	Section 501(c)(12) organizations. Enter			
	a Gross income from members or shareholders			V.
1	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a	, m	ATTILL
ı	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
i	a is the organization licensed to issue qualified health plans in more than one state?	13 a		
	Note See the instructions for additional information the organization must report on Schedule O			
	b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	a Did the organization receive any payments for indoor tanning services during the tax year?	11 a		<u>X</u>
	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15	NECES ANTA	X
	If 'Yes,' see instructions and file Form 4720, Schedule N			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O	16		X Yan

a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 33 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 33 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision Χ of officers, directors, or trustees, or key employees to a management company or other person? 3 4 Did the organization make any significant changes to its governing documents Δ since the prior Form 990 was filed? 5 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 6 Did the organization have members or stockholders? 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Х 7 a members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b X stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Χ a The governing body? Яa X 8 b b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10 a Did the organization have local chapters, branches, or affiliates? 10 a Х b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b operations are consistent with the organization's exempt purposes? X 11 a llas the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Х 12 b to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Χ See Schedule O 12 c Schedule O how this was done Х 13 Did the organization have a written whistleblower policy? 13 14 X 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15 a 15_b Х b Other officers or key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16 a taxable entity during the year? b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16 b organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > IN Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Other (explain in Schedule O) Another's website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records 20 Kent Stultz 924 North 13th Street Terre Haute IN 47807 (812)232-2046

Part W Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or 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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

			(C)							
(A) Name and Title	(B) Average hours per	tha	n one s both dir	box, an o ector	unle: office: trust/		son 3	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W 2/1099 MISC)	from the organization and related organizations
(1) Greg Gauer	1									
Director	0	X						0.	0.	0.
(2) Ray Sumner	1									
Director	0	Х	Ш			<u> </u>		0.	0.	0.
(3) Stan Hawthorne	1				ŀ					
Director	0	X						0.	0.	0.
(4) Mika Cassell	1]								
Director	0	X				<u></u>		0.	0.	0.
(5) Kent Stultz	1]								
Treasurer	00	Х		X				0.	0.	0.
_(6) Justin Garzolini	1									
Vice President	0	X		X				0.	0.	0.
	1	ļ								
Director	0	X			<u> </u>			0.	0.	0.
(8) Tyler Dinkel	1									
Director	0	Х						0.	0.	0.
(9) Mark Elliott	1									
Director	0	Х						0.	0.	0.
(10) Molly Barrett	_ 1									
Director	0	X						0.	0.	0.
(11) Tom Jones	1	}								
Director	0	X						0.	0.	0.
(12) Dave Friedrich	1									
President	0	Χ		X				0.	0.	0.
(13) Chad Overton	1									
Director	0	Х						0.	0.	0.
(14) Rick Harruff	1									
Director	0	X						0.	0.	0.

traite in Section A. Officers, Directors, Th	31003,	.,.,		ייאיי		,	<u> </u>	a riigiiosi oon	iperisatea zii	.p.0,00	3 (00)((1)(00)
•	(B)				C) sition				-		(5)
(A)	Average hours	box	, unle	check ess p	mor erson	e than	h an		(E) Reportable		(F) Estimated
Name and title	per week	 	1	.—	1	lor/trus		compensation from	compensation from related organization	n amo	ount of other mpensation
	(list any hours	or director	좙	Officer	Key employee	a de	읔	(W-2/1099 MISC)	(W-2/1099 MISC)	01	from the ganization
	for related	dividual dividual	盲	द्ध	emp	oyee	₫				ind related ganizations
	organiza tions below	ا ا	1 2 4		loye	on g					
	dotted line)	stee	institutional trustee		"	Highest compensated employee					
	1		e			ଜ					
(15) Bob Heaton	1_1_				<u> </u>		Г				
Director	0	X				<u> </u>		0.	().	0.
(16) Dr. Jeremy Houser	1						l				
Director	0	X		Ĺ	_	<u> </u>	L	0.).	0.
(17) Mike Ireland	1_1_							j _	_		_
Director	0	X						0.).	0.
(18) John Plasse	1	1									
Director	0	X	Ш	ļ	<u> </u>	<u> </u>	<u> </u>	0.).	0.
(19) Brittany Millspaugh-Storms	1				i				_		
Director	0	X				 	<u> </u>	0.	().	0.
(20) Kim Kunz	1	١,,									^
Director	0_	X	\vdash			ļ		0.).	0.
(21) Matt Wayt	1	l,						0.).	0.
Director	0	Х	\vdash			 		- 0.	υ	<u>' - </u>	
(22) Brock Lough	$-\frac{1}{0}$	Х						0.	C	, [0.
Director (23) Pat Ralston	1	^	-					0.1		' 	
Director		Х						0.	C	ا . ر	0.
(24) Joe Pearison	1	 -									
Director	1	X						0.	C) <u>.</u>	0.
(25) Jeff Smith	1						\Box				
Director	0	X						0.	C) <u>.</u>]	0.
1 b Sub-total		•					>	0.	C).	0.
c Total from continuation sheets to Part VII, Secti	on A							53,818.	C).	11,201.
d Total (add lines 1b and 1c)							-	53,818.) <u></u>	11,201.
2 Total number of individuals (including but not limited	to those li	sted	abov	ve) v	vho	recei	ved	more than \$100,00	0 of reportable co	mpensatio	n
from the organization D											T., T.,
											Yes No
3 Did the organization list any former officer, direct	tor, or tru	stee,	key	em em	plo	yee,	or h	nighest compensat	ed employee	3	X
on line 1a ⁷ If 'Yes,' complete Schedule J for suc										المناط	
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate	reportabler than \$1	e co 50,00	003 mbe	nsa If '}	tion 'es,	and con	oth <i>ple</i>	ier compensation f ite Schedule J for	from	4	
such individualDid any person listed on line 1a receive or accrui	e compen	satio	n fro	om .	anv	unre	late	ed organization or	ındıvıdual	1	X
for services rendered to the organization? If 'Yes	,' comple	te Sc	hea	lule	J fo	r suc	hρ	erson		5	<u> </u>
Section B. Independent Contractors 1 Complete this table for your five highest compen			-i i		21.2	olore	Iba	t cooning mare th	200 \$100 000 of	.	
compensation from the organization. Report compen	sated indes sation for	the ca	alen	dar y	year	endii	ng v	vith or within the org	ganization's tax ye	ear	
(A)								(B)		((C)
Name and business add	ress							Description of	of services	Compe	ensation
								ļ			
									1		
								-	-		
2 Total number of independent contractors (including b	ut oot limi	led to	tho	ا می	istor	laho	ر (مر	who received more	than		
\$100,000 of compensation from the organization		içu i(, 1110	,3C II			٠٠)	MIO TECEIVEG IIIOTE			
4.00,000 of compensation from the organization	U U										000 (0010)

Form 990

Continuation Sheet for Form 990

OMB No 1545 0047

2018

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

35-0868182

Terre Haute Boys & Girls Club

Partivill Continuation: Officers, Directors, Trustees, Key Employees, and
Highest Compensated Employees

(A)			(((D)	(E)	(F)	
Name and Title	Average hours per	Pos	ition ((check	(all t	hat app	ly)	Reportable compensation from	Reportable compensation from	Estimated amount of other compensation
	hours per week (list any hours for related organiza tions below dotted line)	Individual trustee or director	stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W 2/1099-MISC)	related organizations (W 2/1099-MISC)	from the organization and related organizations
Sally Stewart_	1_1_				_					<u> </u>
Director	0	Х	L					0.	0.	0
Lisa Pepperworth	11									
Director	0	X						0.	0.	0
Julie Schlosser	1_1_1									
Director	0	X						0.	0.	0
Bill Treash	111	ļ								
Director	0	X						0.	0.	0
Mark Unger	11									
Director	0	Х						0.	0.	0
Nick Williams	11	ļ								
Director	0	Х						0.	0.	0
<u> John Wright</u>	11									
Secretary	0	X		X				0.	0.	0
Steve Williams	1							_	_	_
Director	0	X	<u> </u>					0.	0.	0
Nate Green CPO	$-\frac{40}{0}$			х				27,017.	0.	5,299
Jeff Kochvar	40									
Former CPO	40						Х	26,801.	0.	5,902
	1									
									-	
										
										•
						•		·		
	1									
										·
	<u> </u>						_			
					- 1					

			Check if Schedule O	contains a	resp	onse or note to ar	ny line in this Part \	VIII		
			The state of the s	die here was de se de la commentation de la comment			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated Dusiness revenue	(D) Revenue excluded from tax under sections 512-514
nts	1		Federated campaigns.		1 a	<u>21,668.</u>				
irat		b	Membership dues		1 b					
S E		С	Fundraising events		1 c	41,150.				
ifts		d	Related organizations	-	1 d					
5 E			Government grants (contributi	ons)	1 e					
Si Si			-	·						
ž ž	1	ţ	All other contributions, gifts, g similar amounts not included	rants, and	11	113,502.				100
₽ 5	İ		Noncash contributions included	L		113,302.				
Contributions, Gifts, Grants and Other Similar Amounts		-	Total. Add lines 1a-1f	1 111 111122 14.1	۱ ۶		176 200			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	╀		Total. Add lines Ta-11		-	Business Code	176,320.			
ğ	١,		D		ŀ		100 470	102 472		
ě	4		<u>Programs</u> and e	<u>vents </u>		900099	193,472.	193,472.		
e B		b	~		·	, ~		<u> </u>	-	
<u>Ş</u> .		С.			·					
Š		d								
ä	ļ	е						<u> </u>		
Program Service Revenue	ĺ		All other program service	e revenue	• [The Name of the Control of the Contr	CYTE AND ASSESSMENT AS	- Name of the Annual An
<u> </u>		g	Total. Add lines 2a-2f			•	193,472.			
	3	3	Investment income (inc	luding divi	dend	s, interest and				
	١.		other similar amounts)				49,193.			49,193.
	4		Income from investmen	t of tax-ex	empt	bond proceeds.				
	5		Royalties			· · · · · · · · · · · · · · · · · · ·	CAPTER TAKE NO CELL SPERITURE AS TOWN	·	No. 5 to The Property and Company Total Action Company (1984) and Company	200000000000000000000000000000000000000
	١.			(ı) Rea		(ii) Personal				
	6		Gross rents	3,	<u>756</u>	<u>. </u>				
			Less rental expenses							
,		C	Rental income or (loss)	3,	<u>756</u>	<u>. </u>				
		d	Net rental income or (lo				3,756.	3,756.		
	7	a	Gross amount from sales of	(ı) Securi	ties	(ii) Other				
			assets other than inventory	814,	<u> 129</u>					
	i	b	Less cost or other basis							
			and sales expenses	806,	128					
_		C	Gain or (loss)	8,	001					
		d	Net gain or (loss)			-	8,001.			8,001.
ō	8	а	Gross income from fund	raising ev	ents					
			(not including \$	41,15	<u> 50.</u>			E sa		
) Ye			of contributions reported	on line 1	c)					
Other Reven			See Part IV, line 18		ä	104,938.				
Jer		b	Less direct expenses		ŀ	36,017.				
ᅗ		Ç	Net income or (loss) fro	m fundrais	sing e	vents	68,921.			
	9	а	Gross income from gam	ing activiti	es					
	Ī	_	Gross income from gam See Part IV, line 19		á					
٠,		b	Less direct expenses		ŀ					
		c	Net income or (loss) from	m gamıng	activ	ities				
	10	а	Gross sales of inventory	less retu	rns				The state of the s	
		_	and allowances	, 1000 1010	s	1				
		b	Less cost of goods sold		ŀ					
ĺ		С	Net income or (loss) from	m sales of	inve	ntory.			The state of the s	THE PARTY OF THE P
Ì			Miscellaneous Revenu	е	$\neg \tau$	Business Code				
İ	11	а	Miscellaneous			900099	22,800.	22,800.		
		b					,		-	
Ī		С								•
		ď	All other revenue				-			
		e	Total. Add lines 11a-11d	l	L	•	22,800.			
	12		Total revenue. See instr			>	522,463	220 028	0	57.194

Part X Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (A) (D) (B) Do not include amounts reported on lines Total expenses Program service Management and Fundráising 6b, 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and for-eign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members. Compensation of current officers, directors, trustees, and key employees 65,019 65,019 0 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 0 0 0. Other salaries and wages 258,229 258, 229. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 4,352 4,352 Other employee benefits 35,237 35,237 10 Payroll taxes 22,240 22,240 11 Fees for services (non-employees) a Management **b** Legal c Accounting 16,700 16,700 **d** Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees 17,459 17,459. g Other (If line 11g amount exceeds 10% of line 25, column 7,358 7,358 (A) amount, list line 11g expenses on Schedule () Advertising and promotion 13 Office expenses. 14 Information technology Royalties 15 Occupancy 16 97,481 97,481 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest Payments to affiliates 22 Depreciation, depletion, and amortization 46,892 46,892 28,743 25,869 2.874 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 29,316 a Contract Labor 29,316 b Admin. expenses _ _ 10,834 28,807 17,973 c Program Expense 24,589 24,589 d Development expenses <u>3,337</u> 2,892 445 e All other expenses 1,266 <u>1,</u>266 25 Total functional expenses Add lines 1 through 24e 687,025 56,936 630,089 0. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)

		. Check if Schedule O contains a response or note to	o any l	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing			66,742.	1	49,027.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			21,200.	3	10,600.
ι	4	Accounts receivable, net		,	13,695.	4	4,190.
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated e Part II of Schedule L	officer mploye	rs, directors, ees Complete		5	
	· 6	Loans and other receivables from other disqualified p section 4958(f)(1)), persons described in section 4958(c)(employers and sponsoring organizations of section 501(c) beneficiary organizations (see instructions) Complete	3)(B), a (9) vol	and contributing untary employees'	Sign Sign Sign Sign Sign Sign Sign Sign	6	
2	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
۲	9	Prepaid expenses and deferred charges			2,651.	9	2,651.
	10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10 a	1,795,046.			
	b	Less accumulated depreciation	10 b	908,233.	928,703.	10 c	886,813.
ł	11	Investments – publicly traded securities			2,931,701.	11	2,750,405.
	12	Investments – other securities See Part IV, line 11			,,	12	
	13	Investments - program-related See Part IV, line 11			,	13	
- 1	14	Intangible assets				14	
- 1	15	Other assets See Part IV, line 11			16,138.	15	14,103.
	16	Total assets. Add lines 1 through 15 (must equal line	34)		3,980,830.	16	3,717,789.
$\neg \uparrow$	17	Accounts payable and accrued expenses	·		39,493.	17	13,767.
	18	Grants payable			,	18	·
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities		•		20	
S	21	Escrow or custodial account liability Complete Part I	V of S	chedule D		21	
Liabilities	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	rs, dire I disqu	ectors, trustees, palified persons		22	
	23	Secured mortgages and notes payable to unrelated th	ırd par	rties		23	
	24	Unsecured notes and loans payable to unrelated third	partie	S		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Compared to the c	s to re plete F	lated third parties, Part X of Schedule D	24,294.	25	21,346.
	26	Total liabilities. Add lines 17 through 25			63,787.	26	35,113.
Ses		Organizations that follow SFAS 117 (ASC 958), check her lines 27 through 29, and lines 33 and 34.	re >	X and complete			
ă	27	Unrestricted net assets			3,124,169.	27	2,926,848.
<u>ख</u>	28	Temporarily restricted net assets			792,874.	28	755,828.
9	29	Permanently restricted net assets		_		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), ch and complete lines 30 through 34.					
S	30	Capital stock or trust principal, or current funds			30		
Se		Paid-in or capital surplus, or land, building, or equipm	ent fur	nd		31	
As		Retained earnings, endowment, accumulated income,				32	
et	33	Total net assets or fund balances		ļ	3,917,043.	33	3,682,676.
_	34	Total liabilities and net assets/fund balances			3,980,830.	34	3,717,789.

For	rm 990 (2018) Terre Haute Boys & Girls Club	35-0868182	Page 12
Pa	Reconciliation of Net Assets		
	Check if Schedule O contains a response or note to any line in this Part XI		X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	522,463.
2	2 Total expenses (must equal Part IX, column (A), line 25)	2	687,025.
3	Revenue less expenses Subtract line 2 from line 1	3	-164,562.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,917,043.
5	Net unrealized gains (losses) on investments	5	-67,771.
6	5 Donated services and use of facilities	6	
7	/ Investment expenses	7	
8		8	
9	Other changes in net assets or fund balances (explain in Schedule O) See Schedule O	9	-2,034.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	3,682,676.
Pa	art XIII Financial Statements and Reporting		
	Check if Schedule O contains a response or note to any line in this Part XII		
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 O		Yes No
2	a 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 reseparate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis	viewed on a	
	b Were the organization's financial statements audited by an independent accountant?		2 b X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a s basis, consolidated basis, or both X Separate basis Consolidated basis Both consolidated and separate basis	eparale	
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audit,	2 c X
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule ${\sf O}$		

TEEA0112L 08/03/18

3 a

3 b

Form 990 (2018)

Х

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

BAA

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit

SCHEDULE A (Form 990 or 990-EZ)

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 **20**18 Open(o Rubile Open(o Rubile

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

	re Haute Boys & Girl					35-086818						
-	Reason for Public Ch						tions					
The	organization is not a private four	ndation because it is	(For lines 1 through 12	check or	nly one	box)						
1	A church, convention of churc			•		(i).						
2	A school described in section	* * * *				1)+						
3	A hospital or a cooperative					_						
4	A medical research organization	ation operated in conj	unction with a hospital	described	d in se	ction 170(b)(1)(A)(ıiı) E	Inter the hospital's					
	name, city, and state											
5	An organization operated for section 170(b)(1)(A)(iv). (C	or the benefit of a collo omplete Part II)	ege or university owned	d or opera	ated by	a governmental unit de	escribed in					
6 7	A federal, state, or local gov	3										
	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)											
	8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)											
9	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 university.											
10	An organization that normally											
	from activities related to its investment income and unre June 30, 1975 See section	exempt functions—su elated business taxab	bject to certain exception le income (less section	ons, and	(2) no	more than 33-1/3% of i	its support from gross					
11	An organization organized a	and operated exclusive	ely to test for public saf	ety See	section	1 509(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											
a	Type I. A supporting organizate organization(s) the power to recomplete Part IV, Sections 2	ion operated, supervise	d. or controlled by its sui	poorted or	ganızat	ion(s), typically by giving	the supported on You must					
b	Type II. A supporting organi management of the supporting must complete Part IV, Seci	zation supervised or o	controlled in connection the same persons that c	with its sontrol or r	support manage	ed organization(s), by the supported organizat	having control or ion(s) You					
c	Type III functionally integrated organization(s) (see instruct	I. A supporting organiza	tion operated in connection	n with, an	d function	onally integrated with, its	supported					
d	Type III non-functionally integrated. The	grated. A supporting org	ganization operated in co z must satisfy a distribu	nnection v	vith its s							
e	instructions) You must com Check this box if the organiz				hat it is	o Tupo I Tupo II Tup	a III functionally					
·	integrated, or Type III non-fu	unctionally integrated	supporting organization	และเกรเ	110111115	a type t, type ii, typ	e in functionally					
	Enter the number of supported	•										
g	Provide the following information	n about the supporte	d organization(s)									
(i) Name of supported organization	(II) EIN	(III) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is organizalio in your go docum	on listed	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)					
				Yes	No							
		 		1.05								
(A)												
(B)												
(C)												
(D)												
(E)												
Total												

Partill 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 I f the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support						
	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	202,275.	248,806.	193,681.	.201,414.	176,320.	1,022,496.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	202,275.	248,806.	193,681.	201,414.	176,320.	1,022,496.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						30,928.
6	Public support. Subtract line 5 from line 4						991,568.
Sec	tion B. Total Support	The second secon	and the second s	Backward a 12 radia 12 20 3	among the control of the second	Security of Company of Company of	
	ndar year (or fiscal year , nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	202,275.	248,806.	193,681.	201,414.	176,320.	1,022,496.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	. 22,239.	38,295.	. 21,902.	35,943.	49,193.	167,572.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	22,237.	30,233.	. 21, 302.	33, 343.	43,133.	0.
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	23,957.	36,141.	18,239.	35,611.	-22,800.	136,748.
11	Total support. Add lines 7 through 10						1,326,816.
12	Gross receipts from related activ	ities, etc. (see ins	structions)			12	996,637.
13	First five years. If the Form 990 is organization, check this box and		s first, second, thi	rd, fourth, or fifth t	ax year as a section	n 501(c)(3)	> [
	tion C. Computation of Pul						
	Public support percentage for 20	•	•	e 11, column (f))		14	74.73%
	Public support percentage from 2	·				15	73.73%
16a	33-1/3% support test—2018. If the and stop here. The organization	ne organization di qualifies as a pub	d not check the b dicly supported or	ox on line 13, and ganization	d line 14 is 33-1/3	% or more, check	this box
b	33-1/3% support test—2017. If th and stop here. The organization				, and line 15 is 33	3-1/3% or more, c	heck this box
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	ind-circumstances	test, check this	box and stop here	e. Explain in Part	VI how
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances' t	nd-circumstances est The organiza	test, check this tion qualifies as a	box and stop here a publicly supported	e. Explain in Part ed organization	VI how the ►
18	Private foundation. If the organiz	zation did not che	ck a box on line 1	3, 16a, 16b, 17a,	or 17b, check this	s box and see ins	tructions

19a 33-1/3% support tests—2018. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

b 33-1/3% support tests—2017. 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 not check a box on line 14, 19a, or 19b, check this box and see instructions

Investment income percentage from 2017 Schedule A, Part III, line 17

18

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)(1), (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 (h) and (r) helow (if applicable). Also, provide detail in Part VI, including (i) the names and FIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the 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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? // 'Yes,' complete Part I of Schedule L. (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes, answer 10b below
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

		-	
		Yes	No
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	10a	VNN. 32 /	None or Call
	10b		

Rand Will Supporting Organizations (continued)			
11 Has the organization accepted a gift or contribution from any of the following persons?	ESSE	Yes	No
A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below governing body of a supported organization?	w, the 11ā		
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			
Section B. Type I Supporting Organizations			
		Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' di Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization that more than one supported organization, describe how the powers to appoint and directors or trustees were allocated among the supported organizations and what conditions or restrict applied to such powers during the tax year	escribe in ion's activities d/or remove		
2 Did the organization operate for the benefit of any supported organization other than the supported organization? If 'Yes,' explain in Part VI how pin benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlling organization.	roviding such		
Section C. Type II Supporting Organizations			
•	Establish to the second	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or man supporting organization was vested in the same persons that controlled or managed the supported organization.	nagement of the		
Section D. All Type III Supporting Organizations			
	Ready.	Yes	No
Did the organization provide to each of its supported organizations, by the last day of the fifth month organization's tax year, (i) a written notice describing the type and amount of support provided during year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) coporganization's governing documents in effect on the date of notification, to the extent not previously provided the support of the extent of the control of	the prior tax pies of the		
Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the sup organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Pa the organization maintained a close and continuous working relationship with the supported organization.	irt VI how		
3 By reason of the relationship described in (2), did the organization's supported organizations have a size voice in the organization's investment policies and in directing the use of the organization's income or all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organization in this regard	assets at		4
Section E. Type III Functionally Integrated Supporting Organizations			
1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (s	ee instructions).		
a The organization satisfied the Activities Test Complete line 2 below	·		
b The organization is the parent of each of its supported organizations. Complete line 3 below			
c The organization supported a governmental entity Describe in Part VI how you supported a govern	nment entity (see instruc	tions)	
2 Activities Test Answer (a) and (b) below.		Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposupported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supportations and explain how these activities directly furthered their exempt purposes, how the organizations and those supported organizations, and how the organization determined that these activities substantially all of its activities	ported nization was		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the the organization's position that its supported organization(s) would have engaged in these activities but organization's involvement	e reasons for		
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 each of the supported organizations? Provide details in Part VI.	3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of ear supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard			

Ra	Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	anıza	ations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	t on f	Nov 20, 1970 (explain in	Part VI) See through E
Sec	ction A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	·	
Sec	tion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)			
- 7	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	i Total (add lines 1a, 1b, and 1c)	1d		
•	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally inte	grate	d Type III supporting orga	anization

Schedule A (Form 990 or 990-EZ) 2018

Pa	在V图 Type III Non-Functionally Integrated 509(a)(3) S	Supporting Organiza	tions (continued)	
Sec	ction D – Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt p	urposes		
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of			
4	Amounts paid to acquire exempt-use assets -		****	
5	Qualified set-aside amounts (prior IRS approval required)	·		
6	Other distributions (describe in Part VI) See instructions	,		
7	Total annual distributions. Add lines 1 through 6	· · · · · · · · · · · · · · · · · · ·		
8	Distributions to attentive supported organizations to which the organization Part VI) See instructions	ition is responsive (provide	details	,
9	Distributable amount for 2018 from Section C, line 6	•		
10	Line 8 amount divided by line 9 amount		•••	
Sec	tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required — explain in Part VI) See instructions	100 T T T T T T T T T T T T T T T T T T		
3	Excess distributions carryover, if any, to 2018	4		
a	From 2013			
t	From 2014			
C	From 2015		7-70-1658 x 25-753	
С	From 2016			
e	From 2017			
1	f Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	i Carryover from 2013 not applied (see instructions)			e - annun tunno 11 11 tanun na amun tunno 11 11 tanun
]	Remainder Subtract lines 3g, 3h, and 3i from 3f			managara (masara) na managara (masara)
4	Distributions for 2018 from Section D, line 7 \$			
a	Applied to underdistributions of prior years			e (gradi
b	Applied to 2018 distributable amount			
<u>.</u> C	Remainder Subtract lines 4a and 4b from 4		28 C. A. S.	
5	Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
7	Excess distributions carryover to 2019. Add lines 3j and 4c			
8	Breakdown of line 7			
а	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			mentalisa (1972) salah manan mentalisa dan salah salah salah salah salah salah salah salah salah salah salah s

BAA

e Excess from 2018

Schedule A (Form 990 or 990-EZ) 2018

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1,

Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1, Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.

(See instructions)

Part II, Line 10 - Other Income

Nature and Source			<u>2018</u> <u>2017</u>			2016			2015		2014	
Miscellaneous To	al	\$ \$	22,800. 22,800.	\$ \$	35,611. 35,611.	\$ \$	18,239. 18,239.	\$ \$	36,141. 36,141.	\$ \$	23,957. 23,957.	

SCHEDULE D (Form 990)

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 2018

Open to Public Inspection Employer identification number

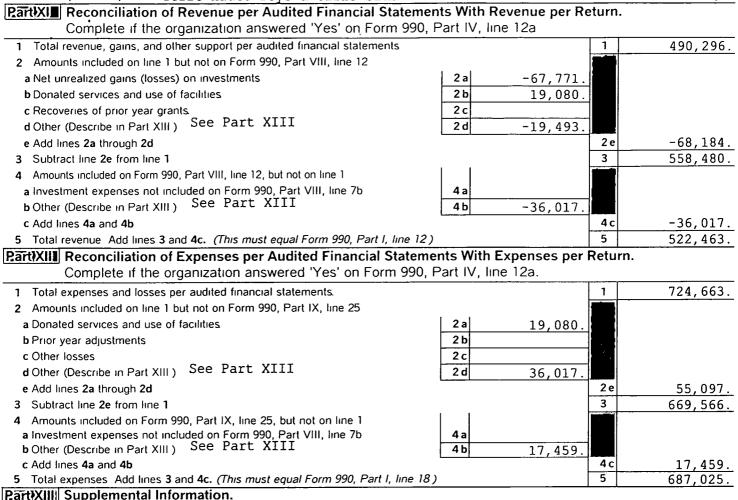
Department of the Treasury Internal Revenue Service Name of the organization

Terre Haute Boys & Girls C	lub	35-0868182
Part I Organizations Maintaining Done	or Advised Funds or Other Similar Fu	nds or Accounts.
Complete if the organization ans	wered 'Yes' on Form 990, Part IV, line	
- -	(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	L	
5 Did the organization inform all donors and do are the organization's property, subject to the	nor advisors in writing that the assets held in deorganization's exclusive legal control?	lonor advised funds Yes No
	ors, and donor advisors in writing that grant fun t of the donor or donor advisor, or for any othe	
Part II Conservation Easements.	wered 'Yes' on Form 990, Part IV, line	e 7
Purpose(s) of conservation easements held be		
Preservation of land for public use (e.g.,	_	of a historically important land area
Protection of natural habitat	L_1	of a certified historic structure
Preservation of open space		
2 Complete lines 2a through 2d if the organization	held a qualified conservation contribution in the for	m of a conservation easement on the
last day of the tax year	,	
		# 1 Held at the End of the Tax Year
a Total number of conservation easements		2 a
b Total acreage restricted by conservation ease	ments	2 b
c Number of conservation easements on a certi	ified historic structure included in (a).	2 c
d Number of conservation easements included	ın (c) acquired after 7/25/06, and not on a histo	oric al
structure listed in the National Register		2 d
3 Number of conservation easements modified, trail tax year ►	nsterred, released, extinguished, or terminated by t	the organization during the
4 Number of states where property subject to conse	envation easement is located >	
* * * *	egarding the periodic monitoring, inspection, ha	— andling of violations
and enforcement of the conservation easeme		Yes No
6 Staff and volunteer hours devoted to monitoring,	inspecting, handling of violations, and enforcing co	onservation easements during the year
7 Amount of expenses incurred in monitoring, insper	ecting, handling of violations, and enforcing conser	vation easements during the year
8 Does each conservation easement reported o and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of se	ection 170(h)(4)(B)(i) Yes No
include, if applicable, the text of the footnote	s conservation easements in its revenue and exper to the organization's financial statements that (nse statement, and balance sheet, and describes the organization's accounting for
conservation easements Part III Organizations Maintaining College Complete of the organization and	ections of Art, Historical Treasures, or wered 'Yes' on Form 990, Part IV, line	r Other Similar Assets.
1 a If the organization elected, as permitted unde art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its final	eld for public exhibition, education, or research in f	urtherance of public service, provide,
b If the organization elected, as permitted unde historical treasures, or other similar assets held fi following amounts relating to these items	r SFAS 116 (ASC 958), to report in its revenue or public exhibition, education, or research in furth	statement and balance sheet works of art, erance of public service, provide the
(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, to amounts required to be reported under SFAS		ncial gain, provide the following
a Revenue included on Form 990, Part VIII, line		► \$
b Assets included in Form 990, Part X		► \$

Part III Organizations Mainta	ining Colle	ections o	of Art, Histo	orical Treasures,	or Other Similar As	sets (continu	леа)
 Using the organization's acquisition items (check all that apply) 	n, accession, a	nd other re	cords, check a	iny of the following that	are a significant use of its	collection	on	
a Public exhibition			d D Loan	or exchange programs	5			
b Scholarly research			e Other					
c Preservation for future gene	rations							
4 Provide a description of the organia Part XIII	zation's collecti	ions and ex	plain how they	y further the organizatio	n's exempt purpose in			
5 During the year, did the organization be sold to raise funds rather to	than to be mai	intained as	s part of the c	organization's collectio	n?	Yes		No
Rartiva Escrow and Custodia line 9, or reported an	I Arrangen amount on	nents. Co Form 99	omplete if t 90, Part X,	the organization a line 21.	nswered 'Yes' on Fo	orm 99 	0, Pai ——	rt IV,
1 a is the organization an agent, tru on Form 990, Part X?	stee, custodia	n or other	intermediary	for contributions or of	her assets not included	Yes	; [No
bif 'Yes,' explain the arrangement	t in Part XIII a	ind comple	ete the follow	ng table				
						Amour	t	
c Beginning balance	•				1 c			
d Additions during the year					1 d			
e Distributions during the year					1 e			
f Ending balance					1 f			
2 a Did the organization include an a	amount on For	rm 990, Pa	art X, line 21,	for escrow or custodia	al account liability?	Yes		No
b If 'Yes,' explain the arrangement	t in Part XIII	Check here	e if the explar	nation has been provid	ded on Part XIII	_	[
DEWINE L	\	4l		annered Weet on F	Form OOO Dort IV I	no 10		
Part M Endowment Funds. C								ra book
1 December of weathers	(a) Current	year	(b) Prior year	r (c) Two years ba	ck (d) Three years back	(e)	Four year	S Dack
1 a Beginning of year balance								
b Contributions						-		
c Net investment earnings, gains, and losses								
d Grants or scholarships.				<u> </u>				
 Other expenditures for facilities and programs 								
f Administrative expenses								
g End of year balance								
Provide the estimated percentag	e of the curre	nt year en	d balance (lin	e 1g, column (a)) held	d as			
a Board designated or quasi-endowm	ient ►		%					
b Permanent endowment ►	8							
c Temporarily restricted endowmer	nt ►	9	8					
The percentages on lines 2a, 2b, a	nd 2c should e	qual 100%						
3 a Are there endowment funds not in to organization by	he possession	of the orga	nization that a	re held and administere	ed for the		Yes	No
(i) unrelated organizations						3a(i)		
(ii) related organizations						3a(ii)		
b If 'Yes' on line 3a(ii), are the rela	ated organizat	ions listed	as required of	on Schedule R?		3b		
4 Describe in Part XIII the intended	-		•					.
PartiVII Land, Buildings, and					· · · · · · · · · · · · · · · · · · ·			
Complete if the organi	• •		es' on Forr	m 990, Part IV, Iın	e 11a. See Form 99	90, Par	t X, lı	ne 10.
Description of property			other basis stment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d)	Book va	alue
1 a Land				140,000.			140	,000.
b Buildings				1,448,477.	757,533.		690	<u>,944.</u>
c Leasehold improvements	Ī							
d Equipment	Ţ			76,536.	72,709.		3	,827.
e Other	Ì			130,033.	77,991.			,042.
Total. Add lines 1a through 1e (Column	n (d) must ec	jual Form :	990, Part X, c		>			,813.
ВАА					Sched	lule D (F		

Rankvills Investments - Other Securities.	N/	N/A
		D, Part IV, line 11b. See Form 990, Part X, line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests (3) Other		
(A) (B)		
(C)		
(D)	·	
(E)		
(E)		
(G)		
<u></u>	-	
(1)		
Total (Column (b) must equal Form 990, Part X, column (B) line 12.)		
Part VIII Investments - Program Related.	'Yes' on Form 990	N/A), Part IV, line 11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)	(b) Dook value	(c) Michiga of Valuation 5550 of Charles 1,555 million
(1)	.,	
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10) Total (Column (h) must squal Form 000, Part Y, sqlumn (P) lisa 12.)		
Total (Column (b) must equal Form 990, Part X, column (B) line 13)	N/A	33. ACM BAR 7. (1971)3. AND AND AND AND AND AND AND AND AND AND
Complete if the organization answered	'Yes' on Form 990), Part IV, line 11d. See Form 990, Part X, line 15
(a) Desc	cription	(b) Book value
(1)	A.W · · ·	
(3)		
(4)		
(5)		
(6)		
(7) (8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B,) line 15)	>
Part X Other Liabilities.		
Complete if the organization answered 'Yes' on Fo		e or 11f. See Form 990, Part X, line 25.
(a) Description of liability (1) Federal income taxes	(b) Book value	
(2) Accrued Payroll	11,31	7
(3) Membership Fees	10,02	<u></u>
(4)	20,02	
(5)		
(6)		
(7)		
(8)		
(10)		
(11)		
Total (Column (b) must equal Form 990, Part X, column (B) line 25)	► 21,34	6.

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.



Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Part X - FIN 48 Footnote

The Club's policy is to evaluate any potential uncertain tax positions and the likelihood that they will prevail upon examination based on the extent to which those positions have substantial support within the Internal Revenue Code and Regulations, Revenue Rulings, court decisions, and other evidence. It is the opinion of managment that the Club has no uncertain tax positions.

Part XIII Supplemental Information (continued)

Schedule D, Part XI, Line 2d	
Other Revenue Included In F/S But Not Included On Form 990)

Change in interest in net assets-others	\$	-2,034.
Custodial Fees		-17 <u>,459.</u>
	Total \$	-19,493.

Schedule D, Part XI, Line 4b Other Revenue Included On Form 990 But Not Included In F/S

Special event expenses
$$\begin{array}{ccc} \$ & -36,017. \\ \hline \text{Total} & \$ & -36,017. \end{array}$$

Schedule D, Part XII, Line 2d Other Expenses And Losses Per Audited F/S

Special event expenses	\$	36,017.
•	Total 💲	36,017.

Schedule D, Part XII, Line 4b Other Expenses Included On Form 990 But Not Included In F/S

Custodial	ees	!	\$]	17,459.
		Total	\$ 1	17 459

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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 irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization	Club				1 .	-086818	
Terre Haute Boys & Girls Fundraising Activities. Comple		ation answ	ered 'Yes' o	on Form 990, Part IV, line		000010	
Form 990-EZ filers are not re	quired to comp	lete this p	part				
1 Indicate whether the organization	raised funds th	rough any		_			
a Mail solicitations			е	\sqsubseteq	_	-	
b Internet and email solicitations	5		f	Solicitation of gove	_	nts	
c Phone solicitations			g	Special fundraising	g events		
d In-person solicitations							
2 a Did the organization have a written o employees listed in Form 990, Par	t VII) or entity	in connec	tion with p	rofessional fundraising	services		Yes X No
b If 'Yes,' list the 10 highest paid incompensated at least \$5,000 by the	lividuals or ent ie organization	ities (fund	raisers) pu	irsuant to agreements i	under which	the fundra	ser is to be
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	I have custo	fundraiser ody or control ributions?	(iv) Gross receipts from activity	(v) Amour (or retain fundraise colum	ned by) r listed in	(vi) Amount paid to (or retained by) organization
		Yes	No				
1							
		 	1	<u> </u>			
2							
3				_			
4				1.40			
5						***************************************	
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6							
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8							
9							
10							
rotal (<u> </u>	<u> </u>	<u>'</u>	<u> </u>			0.
List all states in which the organization or licensing	on is registered o	or licensed	to solicit co	ontributions or has been	notified it is	exempt from	

35	_	Λ	0	c	o	٦	0.0	1
.3.7	, —	u	o.	O	O	1	0/	

يوت.		more than \$15,000 of fundraising List events with gross receipts gr	event contribution:	s and gross income	e on Form 990-EZ,	lines 1 and 6b.
R E		320	(a) Event #1 Terre Haute Go (event type)	(b) Event #2 Dinner/Dance A (event type)	(c) Other events 1 (total number)	(d) Total events (add column (a) through column (c))
REVEXUE	1	Gross receipts	68,787.	52,105.	25,196.	146,088.
Ē	2	Less Contributions	22,400.	18,750.		41,150.
	3	Gross income (line 1 minus line 2)	46,387.	33,355.	25,196.	104,938.
	4	Cash prizes				
	5	Noncash prizes				
DIRECT	6	Rent/facility costs				
Č	7	Food and beverages				
E X P	8	Entertainment				
EXPENSES	9	Other direct expenses	11,806.	14,454.	9,757.	36,017.
	11	Direct expense summary Add lines 4 thr Net income summary Subtract line 10 fr Gaming. Complete if the organiza	om line 3, column (d)	s' on Form 990 Par	rt IV line 19 or rer	36,017. 68,921.
, u,	CHI	\$15,000 on Form 990-EZ, line 6a.	mion answered Tes			
REVERUE			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
E	1	Gross revenue				
E	2	Cash prizes				
D-RECT	3	Noncash prizes	_			
C S T E S	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes %	Yes %	Yes %	
	7	Direct expense summary Add lines 2 three	ough 5 in column (d)		•	
	8	Net gaming income summary Subtract lii	ne 7 from line 1, colum	n (d)	>	
а	Is th	er the state(s) in which the organization co e organization licensed to conduct gaming o,' explain				Yes No
		any of the organization's gaming license	s revoked, suspended,	or terminated during the	e tax year?	Yes No
BAA			TEFA37021 07	702/18	Schedule G (Form	1 990 or 990-EZ) 2018

Sch	edule G (Form 990 or 990-EZ) 2018 Terre Haute Boys & Girls Club	35-086	8187	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	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?	0	Yes	No
13	Indicate the percentage of gaming activity conducted in	1 1		
á	a The organization's facility	13 a		%
t	b An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and recor	ds		<u> </u>
	Name >			
	Address ►			
15 a	a Does the organization have a contract with a third party from whom the organization receives gaming revei	nue?	Yes	∏No
	· · · · · · · · · · · · · · · · · · ·	the amou	unt	
	of gaming revenue retained by the third party > \$			
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
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	1 the		
DK 3	organization's own exempt activities during the tax year > \$	-1	(\ ===	
<u>rar</u>	Supplemental Information. Provide the explanations required by Part I, line 2b, c and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide a information. See instructions	ny addit	tional	,v),
	· ·			
	•			

SCHEDULE J (Form 990)

Compensation Information

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

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

Mame of the organization

Terre Haute Boys & Girls Club

Emp

2018

Employer identification number

35-0868182

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OMB No 1545-0047

Pa	Regarding Compensation				
	Michigan L			Yes	No
1	a Check the appropriate box(es) if the organization provided any of VII, Section A, line 1a Complete Part III to provide any relevant	f the following to or for a person listed on Form 990, Part vant information regarding these items			
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (such as maid, chauffeur, chef)			
	b If any of the boxes on line 1a are checked, did the organization for reimbursement or provision of all of the expenses described		1 b	W. Silver	
2	Did the organization require substantiation prior to reimbursi trustees, and officers, including the CEO/Executive Director,		2		
3	Indicate which, if any, of the following the filing organization used CEO/Executive Director Check all that apply Do not check a establish compensation of the CEO/Executive Director, but e	any boxes for methods used by a related organization to			
	Compensation committee	Written employment contract			
	Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	Approval by the board or compensation committee	42		
4	During the year, did any person listed on Form 990, Part VII, organization or a related organization	, Section A, line 1a, with respect to the filing			
	a Receive a severance payment or change-of-control payment		4 a		Χ
ı	b Participate in, or receive payment from, a supplemental none	qualified retirement plan?	4 b		Χ
(c Participate in, or receive payment from, an equity-based con	mpensation arrangement?	4 c		_X
	If 'Yes' to any of lines 4a-c, list the persons and provide the	applicable amounts for each item in Part III			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organization	ns must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did t contingent on the revenues of	the organization pay or accrue any compensation			
į	a The organization?	,	5 a		X
١	h Any related organization?		5 b		X
	If 'Yes' on line 5a or 5b, describe in Part III	·		100	
6	For persons listed on Form 990, Part VII, Section A, line 1a, did to contingent on the net earnings of	he organization pay or accrue any compensation ,			à.
ä	The organization?		6 a	Pictor No.	X
ł	Any related organization?		6 b		X
	If 'Yes' on line 6a or 6b, describe in Part III				
7	For persons listed on Form 990, Part VII, Section A, line 1a, payments not described on lines 5 and 6? If 'Yes,' describe in	did the organization provide any nonfixed in Part III	7	ļ	Х
8	Were any amounts reported on Form 990, Part VII, paid or at to the initial contract exception described in Regulations sect If 'Yes,' describe in Part III	ccrued pursuant to a contract that was subject tion 53 4958-4(a)(3)?	8		X
9	If 'Yes' on line 8, did the organization also follow the rebuttable pr	resumption procedure described in Regulations			

section 53 4958-6(c)?

Page 2

Terre Haute Boys & Girls Club Schedule J (Form 990) 2018

Partil Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. 35-0868182

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of	Breakdown of W-2 and/or 1099-MISC compensation	3 compensation) o lot o L	
(A) Name and Title		(I) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	and other deferred compensation	benefits	columns(B)(I)-(D)	(r) Compensation in column (B) reported as deferred on prior Form 990
Jeff Kochvar	ε	26,801.	0	0 - 0		0		
(1)			0	0.	5,902		5,902	
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16								
ВАА			TEEA4102L 10/29/18	/18			Schedule	Schedule J (Form 990) 2018

हिबेत्।।। Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE O (Form 990 or 990-EZ)

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.

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

OMB No. 1545 0047

35-0868182

Terre Haute Boys & Girls Club

Form 990, Part III, Line 4d - Other Program Services Description

Programming related to education, including special programming and tutoring youths. The objective of each education program is to build a sense of competence, usefulness, belonging, power, and influence in our members. We are always looking for new and innovative programs to improve the quality of live of our members. Our qoal is to help each young person who comes through our doors reach his or her maximum potential.

Form 990, Part VI, Line 11b - Form 990 Review Process

The 990 is reviewed by the treasurer as well as the executive director before it is signed and submitted.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Conflict of interest policy is required to be completed each year.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

The Club makes its governing documents, conflict of interest policy, and financial statements available to the public upon request and can be obtained at the Club's office at 924 North 13th Street, Terre Haute, IN 47807

Form 990, Part XI, Line 9 Other Changes In Net Assets Or Fund Balances

Change in interest at WVCF

	\$ -2,034.
Total	\$ -2,034.