Check box of the Timesary Described in the Timesary	Form 990-T	E	Exempt Organization Bus	sine	ss Income 7	Γax Return	ì	OMB No 1545-0047
Description		(and proxy tax under section 6033(e)) 912						2010
Do not enter SSM numbers on this form as it may be made public if your organization is a 501(c)(3). SW/Wind Trajemiczence CNUM SOIC Control Check box if name changed and see instructions. One of the property of the public if your organization is a 501(c)(3). SW/Wind Trajemiczence CNUM SOIC Control Check box if name changed and see instructions. One of the property of the public if you can be sufficient to the public if y	(-(
The BOYS AND GIRLS CLUB OF WASHINGTON CO 15-3445754 19 19 19 19 19 19 19 1	Department of the Treasury Internal Revenue Service							Open to Public Inspection for 501(c)(3) Organizations Only
Solicy Barriage Number, street, and room or sute no. If a P.D. box, see instructions. E Everalization seasons E Everalization E			Name of organization (Check box if name c	hanged	and see instructions.)		(Em	ployees' trust, see
Suite Burney Number, street, and room or suite no. It a P.D. box, see instructions. Equivarient business extently oceal (even encylicities)	B Exempt under section	Print	THE BOYS AND GIRLS CLU	в оі	F WASHINGTO	N CO	4	45-3445754
1908			Number, street, and room or suite no. If a P.O. box	x, see ir	nstructions.			
MARIETTA OH 45750 713200	408(e) 220(e)	Type	307 LANCASTER STREET				┧`	,
H Enter the number of the organization type ► X 501(c) corporation 501(c) trust 401(a) trust Other trust trade or businesses here ▶ PULIL—TAB GAMING It only one (rist) unrelated trades or businesses. ■ 1 Describe the only (or first) unrelated trade or businesses. ■ 1 It only one, complete Parts I-V. It more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and III, complete a Schedule M for each additional trade or business, then complete Parts III-V. 1 During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ► Yes X No III Yes, enter the name and identifying number of the parent corporation. ► 1 Telephone number ► 740 – 373 – 4123 Part Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1 Telephone number ► 740 – 373 – 4123 Part Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1 Telephone number ► 740 – 373 – 4123 Part Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1 Telephone number ► 740 – 373 – 4123 Part Unrelated Trade or Business Income (B) Expenses (C) Net 1 Telephone number ► 740 – 373 – 4123 Part Unrelated Trade or Business Income (B) Expenses (C) Net 1 Telephone number ► 740 – 373 – 4123 Part Unrelated Trade or Business Income (B) Expenses (C) Net 1 Telephone number ► 740 – 373 – 4123 Part Unrelated Trade or Business Income (B) Expenses (C) Net 1 Telephone number ► 740 – 373 – 4123 Part Unrelated Trade or Business Income (B) Expenses (C) Net 1 Telephone number ► 740 – 373 – 4123 Part Unrelated Trade or Business Income (B) Expenses (C) Net 1 Telephone number ► 740 – 373 – 4123 Part Unrelated Described or A Section (B) Telephone number ► 740 – 373 – 4123 Part Unrelated Described (B) Telephone number ► 740 – 373 – 4123 Part Unrelated Described (B) Telephone number ► 740 – 373 – 4123 Part Unrelated Described (B) Telephone number ► 740 – 373 – 4123 Part Unrelated Trade or Business (B) Telephone numbe	= - ''			r foreig	n postal code		713	3200
He first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business here ▶ PULL_TAB GAMING If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V. I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ ▼ S No II *Yes,* enter the name and identifying number of the parent corporation. ▶ 1 The books are in care of ▶ RBBECCA JOHNSON Telephone number ▶ 740-373-4123 Part ▼ Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales 369,763. c 6 Balance 1c 369,763. c 6 Balance 2c Cost of goods sold (Schedule A, Ine. 7) 2 Gost of goods sold (Schedule A, Ine. 7) 3 Gross profts, Subtract line 2 from line 1c 3 369,763. d 369,763. c 2 Cost of goods sold (Schedule A, Ine. 7) 4 Capital igain net income (attach Schedule D) 5 Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4 d 4 c 4 c 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2			F Group exemption number (See instructions.)					
trade or business here ▶ PULL-TAB GAMING describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III II. I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? I The books are in care of ▶ RBBECCA JOHNSON Telephone number ▶ 740-373-4123 Part Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net a Gross receipts or sales 1 Gross receipts or sales 2 Cost of goods sold (Schedule A, Iner 7) 3 Gross prioft. Subtract line 2 from line 1c 3 3 369,763. 4 Capital gain net income (attach Schedule D) 4 Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4 Capital loss deduction for trusts 5 Income (Schedule C) 7 Unrelated deth-inanced income (Schedule E) 8 Interest, annuties, royalties, and rents from a controlled organization (Schedule G) 9 Interest annuties, royalties, and rents from a controlled organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule I) 12 Other income (See thous of the City), (9) or (17) organization (Schedule G) 13 Total. Combine lines 3 through 12 Part II Occupation (Schedule I) 14 Compensation of officers, directors, and trustees (Spifedule K) in increasing income (Schedule I) 15 Interest (attach schedule) (see instructions) 16 Repairs and maintenance 17 Bad debts 18 Interest (attach schedule) (see instructions) 19 Depreciation (attach Form 4562) 19 Depreciation (attach Form 4562) 10 Less depreciation chamed on Schedule A and elsewhere on return Ogden, UT 20 Elephono 20 Depreciation (attach Form 4562) 21 Less depreciation chamed on Schedule A and elsewhere on return Ogden, UT 21 Less depreciation chamed on Schedule A and elsewhere on return Ogden, UT 22 Elephono 24 Contributions to deferred compensation plans 25 Contributions to deferred compensation plans 26 Contributions to deferred compensation plans	720,4	31.	G Check organization type ► X 501(c) corp	poration	501(c) trust	401(a) trust	Other trust
describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V. 1 During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes		-		<u>1</u>	Describe	e the only (or first) ur	ırelate	d
Durng the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?								
During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No H*Yes, and the name and identifying number of the parent corporation. Yes, are not are of REBECCA JOHNSON Telephone number 740-373-4123				irts I an	d II, complete a Schedul	e M for each addition	al trad	le or
If "Yes," enter the name and identifying number of the parent corporation. Telephone number 740-373-4123								. 55.
Telephone number 740-373-4123 Part Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net	• • •	•	• • • • •	nt-subsi	idiary controlled group?	►l	Y	es X. No
Continued Cont					Talaal	nono numbor . 7	/ / O -	272 /122
1a Gross receipts or sales b Less returns and allowances c Cost of goods sold (Schedule A, line 7) Gross profit. Subtract line 2 from line 1c 3 3 369,763. 2 Cost of goods sold (Schedule A, line 7) Gross profit. Subtract line 2 from line 1c 3 3 369,763. 3 369,763. 3 369,763. 3 369,763. 3 369,763. 3 369,763. 3 369,763. 3 369,763. 3 369,763. 3 369,763. 4 Capital gain net income (attach Schedule D) b Net gain (loss) (from 4797, Part II, line 17) (attach Form 4797) c Capital loss deduction for trusts income (loss) from a partnership or an S corporation (attach statement) f Rent income (Schedule C) T Unrelated debt-financed income (Schedule E) interest, annuties, royalties, and rents from a controlled organization (Schedule G) investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) investment income (Schedule J) investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) investment income (schedule G) investment								
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2 Cost of goods sold (Schedule A, line 7) 3 Gross profit. Subtract line 2 from line 1c 4a Capital gain net income (attach Schedule D) 4b Net gain (loss) (Form 4797, Part III, line 17) (attach Form 4797) c Capital loss deduction for trusts 1 Income (loss) from a partnership or an S corporation (attach statement) 6 Rent income (Schedule C) 7 Unrelated debt-financed income (Schedule E) 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule G) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 11 Advertising income (Schedule J) 12 Other income (See instructions, attach schedule) 13 Total, Combine lines 3 through 12 14 Compensation of officers, directors, and trustees (Spfiedule K) trust income) 15 Compensation of officers, directors, and trustees (Spfiedule K) trust income) 16 Repairs and maintenance 17 Bad debts 18 Interest (attach schedule) (see instructions) 19 Taxes and incenses 20 Depreciation (lattach Form 4562) 21 Less depreciation claimed on Schedule A and elsewhere on return Ogden, UT 22 Depletion 23 Contributions to deferred compensation plans 24 Employee benefit programs	•		-	10	369.763.			<i> </i>
3 Gross profit. Subtract line 2 from line 1c 4a Capital gain net income (attach Schedule D) b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) c Capital loss deduction for trusts fincome (loss) from a partnership or an S corporation (attach statement) fincome (loss) from a partnership or an S corporation (attach statement) fincome (Schedule C) funcilated debt-financed income (Schedule E) finterest, annuties, royafties, and rents from a controlled organization (schedule G) finvestment income of a section 501(c)(7), (9), or (17) organization (Schedule G) finvestment income (Schedule J) finded exempt activity income (Schedule I) finded exempt activity income (Schedule II) finded exempt activity activities and income activities activities activities activitie	· ·			-				
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Income (loss) from a partnership or an S corporation (attach statement) 5 6 6 7 7 7 7 7 7 7 7	b Net gain (loss) (Form	4797, P	art II, line 17) (attach Form 4797)	4b			_	
Rent income (Schedule C) 7 Unrelated debt-financed income (Schedule E) 8 Interest, annuties, royatities, and rents from a controlled organization (Schedule F) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (See instructions, attach schedule) 13 Total. Combine lines 3 through 12 Part III Peductions Not Taken Elsewhere (See instructions for limitations on deductions) (Ceductions must be directly connected with the unrelated business income) 14 Combination of officers, directors, and trustees (Schedule K) must recovered business income) 15 Salaries and wages Received US Bank - USB 16 Repairs and maintenance 17 Bad debts 18 Interest (attach schedule) (see instructions) 19 Depreciation (attach Form 4562) 20 Depreciation (attach Form 4562) 21 Less depreciation claimed on Schedule A and elsewhere on return Ogden, UT 22 Depletion 22 Contributions to deterred compensation plans Employee benefit programs	c Capital loss deduction	n for trus	sts	4c		. /		
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Interest, annuities, royalties, and rents from a controlled organization (Schedule F) Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) Exploited exempt activity income (Schedule I) Advertising income (Schedule J) Other income (See instructions, attach schedule) Total. Combine lines 3 through 12 Part III Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Coductions must be directly connected with the unrelated business income) Compensation of officers, directors, and trustees (Schedule K) unail Take Schedule Sched	6 Rent income (Schedu	le C)		6				
Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9	7 Unrelated debt-finance	ed incon	ne (Schedule E)	7				
Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (See instructions, attach schedule) 13 Total. Combine lines 3 through 12 14 Total. Combine lines 3 through 12 15 Total Combine lines 3 through 12 16 Compensation of officers, directors, and trustees (See instructions for limitations on deductions) 16 Compensation of officers, directors, and trustees (Schedule K) unai Revening Stanker 17 Salaries and wages 18 Received US Bank - USB 19 Taxes and licenses 20 Depreciation (attach Form 4562) 21 Less depreciation claimed on Schedule A and elsewhere on return Ogden, UT 22 Contributions to deterred compensation plans 23 Employee benefit programs						···		
Advertising income (Schedule J) 12 Other income (See instructions, attach schedule) 13 Total. Combine lines 3 through 12 13 Total. Combine lines 3 through 12 13 369,763. Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Deductions must be directly connected with the unrelated business income) 14 Compensation of officers, directors, and trustees (Schedule K) main recommendations on deductions) 15 Salaries and wages 16 Repairs and maintenance 17 Bad debts 18 Interest (attach schedule) (see instructions) 19 Taxes and licenses 19 Depreciation (attach Form 4562) 21 Less depreciation claimed on Schedule A and elsewhere on return Ogden, UT 22 Depletion 23 Contributions to deferred compensation plans 24 Employee benefit programs								
12 Other income (See instructions, attach schedule) 13 Total. Combine lines 3 through 12 14 Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Deductions must be directly connected with the unrelated business income) 14 Compensation of officers, directors, and trustees (Schedule K) unai recording Starting Star	· · · · · · · · · · · · · · · · · · ·	•	,	-		 		
Total. Combine lines 3 through 12 13 369,763. Part M. Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Deductions must be directly connected with the unrelated business income) 14 Compensation of officers, directors, and trustees (Schedule K) unai Revenue 354 Minus 155 Salaries and wages Received US Bank - USB 15 15 15 15 15 15 15 15 15 15 15 15 15 1	• •		· /			 		-
Part Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Deductions must be directly connected with the unrelated business income) 14 Compensation of officers, directors, and trustees (Schedule K) war received US Bank - USB 15 15 15 15 16 16 17 18 18 18 19 19 19 19 19	,			-	369 763	<u></u>		369 763
(Deductions must be directly connected with the unrelated business income) 14 Compensation of officers, directors, and trustees (Schedule K) and trustees (Schedule Schedule S	Part I - Deductio	ns No	t Taken Elsewhere (See instructions fo			<u> </u>		3037703.
Salaries and wages Received US Dath Repairs and maintenance 16 Repairs and maintenance 17 Bad debts Interest (attach schedule) (see instructions) 18 Interest (attach schedule) (see instructions) 18 Depreciation (attach Form 4562) 20 Less depreciation claimed on Schedule A and elsewhere on return 21 Depletion 22 Contributions to deferred compensation plans 23 Employee benefit programs 24	(Deductions	must b	e directly connected with the unrelated busin	ess inc	come)			
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Repairs and maintenance 16 17 Bad debts 18 Interest (attach schedule) (see instructions) 19 Taxes and licenses 20 Depreciation (attach Form 4562) 21 Less depreciation claimed on Schedule A and elsewhere on return 22 Depletion 23 Contributions to deferred compensation plans 24 Employee benefit programs		•	Received US Da	ınk - i	كاتر		15	
Taxes and licenses Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on return Ogden, UT Depletion Contributions to deferred compensation plans Employee benefit programs	16 Repairs and mainten	ance	321				16	
Taxes and licenses Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on return Ogden, UT Depletion Contributions to deferred compensation plans Employee benefit programs	17 Bad debts		31.23	งกรถ			17	
Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on return Ogden, UT Depletion Contributions to deterred compensation plans Employee benefit programs 20 21a 22b 22c 23 24 Employee benefit programs	18 Interest (attach sche	dule) (se	ee instructions)				18	
Less depreciation claimed on Schedule A and elsewhere on return Ogden. Depletion Contributions to deferred compensation plans Employee benefit programs 21a 21b 22 23 24			·				19	
23 Contributions to deferred compensation plans 23 24 Employee benefit programs 24	20 Depreciation (attach	Form 45	62)	U			<u> </u>	-
23 Contributions to deferred compensation plans 23 24 Employee benefit programs 24	21 Less depreciation cla	nmed on	Schedule A and elsewhere on return		[21a]		1	
24 Employee benefit programs 24	22 Depletion	/						
	/		npensation plans					
25 Excess exempt expenses (Schedule I)			hadula I\				25	
26 Excess readership costs (Schedule J)	/							
27 Other deductions (attach schedule) SEE STATEMENT 1 286,846.	/				SEE STAT	TEMENT 1		286,846.
28 Total deductions. Add lines 14 through 27 28 286,846.	,							
29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 29 82,917.	/			line 28	from line 13			
30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018	/						\prod	
(see instructions)	(see instructions)					(T	30	
31 Unrelated business taxable income Subtract line 30 from line 29 923701 01-27-20 LHA For Paperwork Reduction Act Notice, see instructions. Form 990-T (2019)					····		<u> </u>	

_	m 990-T (2			45-344575	4 Page Z
ĮĮ.	artilli	Total Unrelated Business Taxable Income			
,	32 Tota	al of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	32 82,	917.
,	33 Am	ounts paid for disallowed fringes	'	38	
	34 Cha	ritable contributions (see instructions for limitation rules)		34	0.
		al unrelated business taxable income before pre-2018 NOLs and specific deduction Subtract line 34 from the sum of	lines 32 and 33	35 82,	917.
		luction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)		36	
				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	917.
		al of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	Ć		
;		cific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	($O \mid \frac{38}{1} \mid \frac{1}{2}$	000.
1	39 Unr	elated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,	ζ,		
` _		r the smaller of zero or line 37		$39 \mid 81$,	<u>917.</u>
\ [<u>F</u>	artijV	Tax Computation			
``	40 Org	anizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	\ ▶	4d 17,	203.
	41 Tru	sts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from:			
		Tax rate schedule or Schedule D (Form 1041)	_		
	IO Dra	xy tax. See instructions		42	
		1/2. V 4 11		43	
		rnative minimum tax (trusts only)			
		on Noncompliant Facility Income. See instructions	~	44	
		Add lines 42, 43, and 44 to line 40 or 41, whichever applies		45 17,	203.
	artiy/	Tax and Payments			
` '	16a Fore	eign tax credit (corporations attach Form 1118; trusts attach Form 1116)			
	b Oth	er credits (see instructions) . \ \ 46b \			
	c Gen	eral business credit. Attach Form 3800			
	d Cre	dit for prior year minimum tax (attach Form 8801 or 8827)			
		al credits. Add lines 46a through 46d		46e	
		tract line 46e from line 45			203.
					203.
		_	attach schedule)		202
		al tax. Add lines 47 and 48 (see instructions)	_		203.
;		9 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3		50	0.
;	i 1 a Pay	ments: A 2018 overpayment credited to 2019	4 4 4 5 5		
	b 201		19,470	- ↓	
	c Tax	deposited with Form 8868		j_	
	d Fore	rign organizations: Tax paid or withheld at source (see instructions)			
	e Bac	kup withholding (see instructions) 5 te			
	f Cred	dit for small employer health insurance premiums (attach Form 8941)			
		er credits, adjustments, and payments. Form 2439	-		
	• 🗀	Form 4136 Other Total 5ig			
	i2 Tota	Il payments. Add lines 51a through 51g		2 52 19,	470.
		mated tax penalty (see instructions). Check if Form 2220 is attached	E		245.
ì					<u> </u>
		due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	10	J#	022.
		rpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid in the amount of line 55 you want. Credited to 2020 estimated tax	_	5,6	
ينتع				- 1 2/0	0.
_		Statements Regarding Certain Activities and Other Information (see Instruc	LIONS)	.	T .:
		ny time during the 2019 calendar year, did the organization have an interest in or a signature or other authority		Ye	s No
		a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file			
	FinC	EN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country			
	here	>			X
5	8 Dur	ng the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreig	ın trust?		X
	If "Y	es," see instructions for other forms the organization may have to file.			
_5	9 Ente	r the amount of tax-exempt interest received or accrued during the tax year 🕒 💲			
_		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the I	best of my knowl	ledge and belief, it is true,	
Si	gn	correct, and complete Declaration of greparer (other than taxpayer) is based on all information of which preparer has any knowledge	*		
He	ere	LARCONCOMM \ \(\D\B\\)\\ \ EXECUTIVE DIREC	aman i	May the IRS discuss this retur the preparer shown below (see	
		Signature of officer Date Title			X No
_				if PTIN	1
			Check	i	
	aid	THINK I DIVING OD $(1000000000000000000000000000000000000$	self- employed		1
	repare	In a property of a downtamed abad a contract of the contract o		P0188389	
U	se On	y firm's name ▶ PERRY & ASSOCIATES, CPAS A.C.	Firm's EIN	<u> 55-07716</u>	<u> </u>
		313 2ND STREET		/740\ 272	0.5.6
_	_	Firm's address ► MARIETTA, OH 45750	Phone no.	(740) 373-0	
	711 01-27	-20		Form 990-	T (2019)

Schedule A - Cost of Good	s Sold. Enter	method of inver	ntory valuation N/A	<u> </u>		
1 Inventory at beginning of year 1			6 Inventory at end of year	6		
2 Purchases 2			7 Cost of goods sold. Subtract line 6]
3 Cost of labor	3		from line 5. Enter here	and in Part I,	<u> </u>	
4a Additional section 263A costs		-	line 2		7	<u> </u>
(attach schedule)	4a		8 Do the rules of section	263A (with respect to		Yes No
b Other costs (attach schedule)	4b		property produced or a	acquired for resale) apply to		
5 Total. Add lines 1 through 4b	5		the organization?			
Schedule C - Rent Income (see instructions)	(From Real	Property and	i Personal Property L	eased With Real P	roperty)	<u> </u>
1. Description of property						
(1)						
(2)						
(3)					-	
(4)						
	2. Rent receiv	ed or accrued				
(a) From personal property (if the per rent for personal property is mor 10% but not more than 50%	e than	of rent for	and personal property (if the percenta personal property exceeds 50% or if int is based on profit or income)			eted with the income in attach schedule)
(1)						
(2)						
(3)						
(4)	-					
Total	0.	Total		0.		
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	n (A)	>		(b) Total deduction Enter here and on page Part I, line 6, column (B	1,	0.
Schedule E - Unrelated Del	bt-Financed	Income (see	instructions)			
			2. Gross income from	 Deductions directly to debt-f 	y connected v inanced prop	
1. Description of debt-fr	nanced property		or allocable to debt- financed property	(a) Straight line depreciation (attach schedule)	n	(b) Other deductions (attach schedule)
(1)						····
(2)		· · · · · · · · · · · · · · · · · · ·				
(3)		·				
(4)						-
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a	adjusted basis allocable to nced property n schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	(8. Allocable deductions column 6 x total of columns 3(a) and 3(b))
(1)	1		%	· ·-	_	
(2)			%			
(3)			%			
(4)			%			
			<u>- </u>	Enter here and on page 1, Part I, line 7, column (A)		Enter here and on page 1, Part I, line 7, column (B)
Totals			>		0.	_ 0.
Total dividends-received deductions	ncluded in column	18				0.

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Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1. Name of po	eriodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)	· · · · · ·						
(2)							
(3)							
(4)							
Totals from Part I	•	0.	0.		2	•	0
		Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)], . · ·		and the second s	Enter here and on page 1, Part II, line 26
Totals, Part II (lines 1-5) >	0.	0.			7	l 0

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		▶	0.

Form 990-T (2019)

THE BOYS AND GIRLS CLUB OF WASHINGTON CO

FORM 990-T	OTHER DEDUCTIONS	STATEMENT 1
DESCRIPTION		AMOUNT
PULL-TAB EXPENSES CHARGED B	Y GAMING COMPANY	286,846.
TOTAL TO FORM 990-T, PAGE 1	, LINE 27	286,846.