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

2016 Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

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

	ror un	le 20 to Calendar year, or tax year beginning 00L 1, 2016 and	enging U	ON 30, 2011				
В	Check if applicat	C Name of organization		D Employer identific	cation number			
	Addr Chan Name	BOYS AND GIRLS CLUB OF GLASGOW/BARKEN	CO	45.4	C020F4			
Ļ	chan	ge Doing business as			693954			
Ļ	returi	Number and street (or P.O box if mail is not delivered to street address)	Room/suite	E Telephone number				
L	Final			270-	<u>629-3871</u>			
	termi ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$ 533, 267.				
	Amer	ided CLACCOM PN 42142		H(a) Is this a group re	eturn			
7	Appli			for subordinates	——————————————————————————————————————			
pending P.O. BOX 1935, GLASGOW, KY 42142 H(b) Are all subordinates included?								
_		rempt status	or 527	1 ' '	list (see instructions)			
			UI [321	1	•			
		ite: WWW.BGCGLASGOWBARREN.COM	1	H(c) Group exemption				
		forganization: X Corporation Trust Association Other ►	<u>L Year (</u>	of formation: ZUIZIN	State of legal domicile KY			
	art I	Summary						
ĕ	1	Briefly describe the organization's mission or most significant activities TO E						
nance		ESPECIALLY THOSE FROM DISADVANTAGED CIRC			CH THEIR			
₽,E	2	Check this box if the organization discontinued its operations or dispo	sed of more	than 25% of its net as				
€Ş	3	Number of voting members of the governing body (Part VI, line 1a)		3	8			
20	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	8			
Ξ×	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)		5	0			
Τįį	6	Total number of volunteers (estimate if necessary)		6	0			
Σŧ	7 a	Total unrelated business revenue from Part VIII. column (G) rime 12		7a	0.			
J-J Activities & G		Net unrelated business taxable income from Form 990.1 line 34		7b	0.			
Ö	 -			Prior Year	Current Year			
ے.	8	Contributions and grants (Part VIII, line 1h)		407,333.	343,267.			
enge,	9	Program service revenue (Part VIII, line 2g)	₹ —	0.	0.			
~ <u>ē</u>		Investment income (Part VIII, column (A), lines 3 4, and 30		3,993.	<145,200.>			
# 	10		~	3,993.	0.			
7	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c=9c=10c, and 1 e)	J ├─	411,326.				
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)			198,067.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	 	0.	0.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)	-	0.	0.			
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		272,633.	245,078.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
Š	b	Total fundraising expenses (Part IX, column (D), line 25)	80.					
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u> </u>	338,046.	<u>218,078.</u>			
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>	610,679.	463,156.			
	19	Revenue less expenses Subtract line 18 from line 12		<199,353.	<u>> <265,089.</u> >			
Ces			Beg	ginning of Current Year	End of Year			
sets	20	Total assets (Part X, line 16)		4,065,162.	3,544,573.			
AB	21	Total liabilities (Part X, line 26)		388,689.	43,098.			
Net Assets or Fund Balances	22	Net assets or fund balances Subtract line 21 from line 20		3,676,473.	3,501,475.			
Pa	art II	Signature Block						
Und	er pena	alties of perjury, I declare that I have examined this return, including accompanying schedule	s and stateme	ents, and to the best of my	knowledge and belief, it is			
true	, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of wh	nich preparer	has any knowledge.				
		Ch to the CPA		11/15/1	<u> </u>			
Sig	n	Signature of officer		Date	<i></i>			
Her		Condy L. Creen CPA Transum						
пе	-	Type or print name and title						
				ate Check	PTIN			
D-		Print/Type preparer's name Preparer's signature Preparer's signature	Y (lıt 🗀	-			
Paid		ROBERT VAN SHEPARD ROBERT VAN SHEP		0/17/17 self-employe				
-	parer	Firm's name CAMPBELL, MYERS & RUTLEDGE, PLL		Firm's EIN	61-0975454			
Use	Only	Firm's address 410 SOUTH BROADWAY		. = =				
		GLASGOW, KY 42141		Phone no. (2	70)651-2163			
May	the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No			
6320	01 11-	11-16 LHA For Paperwork Reduction Act Notice, see the separate instruction	nns.		Form 990 (2016)			

	m 990 (2016) BOYS AND GIRLS CLUB OF GLASGOW/BARREN CO 45-465	3954 Page 2
Pa	art III Statement of Program Service Accomplishments	F-7
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission	
	TO ENABLE ALL YOUNG PEOPLE, ESPECIALLY THOSE WHO NEED US MOST,	TO
	REACH THEIR FULL POTENTIAL AS PRODUCTIVE, CARING, RESPONSIBLE	
	CITIZENS.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior 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 services?	Yes X No
3	If "Yes," describe these changes on Schedule O	
	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	v expenses
4	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total	
		expenses, and
	revenue, if any, for each program service reported	283,741.)
4a	(Code) (Expenses \$312,989. including grants of \$) (Revenue \$	
	PROVIDE AFTER SCHOOL CARE TO FOR APPROXIMATELY 200 QUALIFYING	CHILDREN.
	THIS INCLUDES HELPING WITH SCHOOL ASSIGNMENTS, SOCIAL INTERACT	TON AND
	PHYSICAL ACTIVITY.	
	20 600	22 600)
4b		23,600.)
	APPLYING FOR GRANTS AND SENDING EMPLOYEES TO EDUCATIONAL CONFI	
	AID IN PROVIDING QUALIFYING CHILDREN WITH THE ABILITY TO BECOM	
	SUBSTAINING ADULT BY TEACHING WORK ETHICS AND SOCIAL CONFIDENCE	CE.
4c	(Code) (Expenses \$	
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$	
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$	
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$	
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$	
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4c	(Code) (Expenses \$	
4 c	(Code) (Expenses \$)
4 c	(Code) (Expenses \$)
4 c	(Code) (Expenses \$)
4c		
	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$	
4d	Other program services (Describe in Schedule O)) Form 990 (2016)

			Yes	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		v	
_	If "Yes," complete Schedule A	2	X	ļ
2 3	is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		-21	
0	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		_X_
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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			<u> </u>
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	ļ	X
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_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
_	Schedule D, Part III	8		X
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	-		
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	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	11b		X
С	• • • • • • • • • • • • • • • • • • • •		!	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			37
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	X
f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e	Λ_	ļ
•	the organization's separate or consolidated manicial statements for the tax year mediate a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	' ' '		
	Schedule D, Parts XI and XII	12a	•	х
b	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	12b		_X_
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<u> </u>	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
þ	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	i	!	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b_		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	46		Х
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Α_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		-12	
10	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		x
			990	(2016)

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X

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Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197

If "Yes," complete Schedule R, Part V, line 2

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

Par	Check if Schedule O contains a response or note to any line in this Part V			
	,		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	,		122
b	Enter the number of Forms W-2G included in line 1a Enter 0 if not applicable	$\{$		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Ĺ	ļ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0	4 1		İ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		ļ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		Í	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	 	X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	 	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			١.,
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		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)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		 ^
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		\vdash
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
L	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Va		1
D	were not tax deductible?	6ь		ļ
7	Organizations that may receive deductible contributions under section 170(c).	00		
, 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?	7a		х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d]		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		ļ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		ļ
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	<u> </u>	ļ
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		İ	Ì
	sponsoring organization have excess business holdings at any time during the year?	8	— —	↓
9	Sponsoring organizations maintaining donor advised funds.		ĺ	ł
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter		j	
	Initiation fees and capital contributions included on Part VIII, line 12	- I		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter		ĺ	
	Gross income from members or shareholders 11a	1 1	ĺ	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		İ	
10-	amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ĺ	
		120		† -
		1 !		
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a		_
d	Note. See the instructions for additional information the organization must report on Schedule O	, Ja		
h	Enter the amount of reserves the organization is required to maintain by the states in which the			
U	organization is licensed to issue qualified health plans	1	ĺ	
^	Enter the amount of reserves on hand	1		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		T
			000	10040

Section A. Governing Body and Management

officer, director, trustee, or key employee?

Check if Schedule O contains a response or note to any line in this Part VI

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

1a Enter the number of voting members of the governing body at the end of the tax year

b Enter the number of voting members included in line 1a, above, who are independent

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Yes

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 $[\mathbf{x}]$

No

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BOYS AND GIRLS CLUB OF GLASGOW/BARREN CO Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other

Did the organization delegate control over management duties customarily performed by or under the direct supervision X 3 of officers, directors, or trustees, or key employees to a management company or other person? X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a Х 8b **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 Х 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code, No Yes 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Х 13 Did the organization have a written whistleblower policy? 13 Х Did the organization have a written document retention and destruction policy? 14 14 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 15a Other officers or key employees of the organization 15b X 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 Х taxable entity during the year? 16a 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 organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ KY Section 6104 requires an organization to make its Forms 1023 (or 1024 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 Own website X Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records 🕨

CAMPBELL, MYERS, AND RUTLEDGE, PLLC - 270-651-2163

410 SOUTH BROADWAY, GLASGOW, KY 42141

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Form 990 (2016)	BOYS	AND	GIRLS	CLUB	OF	GLASGOW/BARREN	CO	45-4693954	Page 7

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

1a 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

(A)	(B)			(C	C)	1		(D)	(E)	(F)
Name and Title	Average hours per	(do not check more than one box, unless person is both an			than		Reportable compensation	Reportable	Estimated amount of	
	week	offi	cer an	dad	recto	r/trus	tee)	from	compensation from related	other
	(list any	į						the	organizations	compensatio
	hours for	Individual trustee or director	}			8		organization	(W-2/1099 MISC)	from the
	related	tee	stee			ansat		(W-2/1099-MISC)		organization
	organizations	T ss	Institutional trustee		Key employee	Ē.				and related
	below	ag a	章	13	ешр	lest	æ			organization
	line)	亨	Instr	Officer	Key	Highest compensated employee	Former			<u> </u>
(1) MARY LEE ENGLAND	40.00]			i		١.,	}	i	
DIRECTOR		X						0.	33,429.	(
(2) JARAD BAGSHAW	40.00							-		
DIRECTOR		X						0.	25,798.	(
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BOYS AND GIRLS CLUB OF GLASGOW/BARREN CO 45-4693954 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (**D)** Revenue excluded from tax under (B) (C) (A) Related or Unrelated Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts Federated campaigns 1a Membership dues 1b 5.736 Fundraising events 1c 283,741 d Related organizations 1d Government grants (contributions) 1e 23,600 All other contributions, gifts, grants, and similar amounts not included above 1f 30,190 30,190 g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f ▶ 343,267 Business Code Program Service Revenue All other program service revenue Total. Add lines 2a-2f Investment income (including dividends, interest, and 3 other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory 190,000 b Less cost or other basis and sales expenses 335,200 c Gain or (loss) <145,200 d Net gain or (loss) <145,200 <145,200 8 a Gross income from fundraising events (not Other Revenue including \$ <u>283,741.</u> of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses 0 c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b

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Form 990 (2016)

All other revenue Total. Add lines 11a-11d Total revenue See instructions.

Sect	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a response			mplete column (A)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		CAPCHISCS	general expenses	
-	and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				<u></u>
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	59,227.	43,275.	15,952.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	144,082.	115,266.	28,816.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	21,932.	17,546.	4,386.	
10	Payroll taxes	19,837.	15,870.	3,967.	
11	Fees for services (non-employees)				
а	Management				
b	Legal	12,550.		12,550.	
С	Accounting				
d					
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,	500		500	
	column (A) amount, list line 11g expenses on Sch O.)	589.		589.	
12	Advertising and promotion	4 270		4 270	
13	Office expenses	4,278.		4,278.	
14	Information technology				
15	Royalties	7 047	3,524.	3,523.	
16	Occupancy	7,047. 4,536.	1,448.	3,088.	
17	Travel	4,550.	1,440.	3,000.	
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials	2,915.	2,915.		
19 20	Conferences, conventions, and meetings Interest	18,543.	4,913.	18,543.	
21	Payments to affiliates	10,020.		10,343.	
22	Depreciation, depletion, and amortization	41,688.	33,022.	8,666.	
23	Insurance	10,825.	9,779.	1,046.	
24	Other expenses. Itemize expenses not covered	10,023.			
_ •	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0)				
а	PROGRAM SUPPLIES	47,969.	47,969.		
b	CONSULTING FEES	29,868.	29,868.		
c	FUNDRAISING	21,580.			21,580.
ď	DUES AND SUBSCRIPTIONS	10,719.	10,719.		• • • • • • • • • • • • • • • • • • • •
	All other expenses	4,971.	2,416.	2,555.	
25	Total functional expenses Add lines 1 through 24e	463,156.	333,617.	107,959.	21,580.
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				
					Form 990 (2016)

	rt X	Balance Sheet	CHOD OF GHADGOW	/ DARREIN CO		<u> </u>
		Check if Schedule O contains a response or no	te to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		26,318.	1	22,408.
	2	Savings and temporary cash investments		361.	2	270.
	3	Pledges and grants receivable, net		2,865,655.	3	2,718,919.
	4	Accounts receivable, net		4		
	5	Loans and other receivables from current and for	ormer officers, directors,			
		trustees, key employees, and highest compens	ated employees Complete		ŀ	
		Part II of Schedule L			5	
	6	Loans and other receivables from other disqual				
		section 4958(f)(1)), persons described in section				
		employers and sponsoring organizations of sec	tion 501(c)(9) voluntary			
ŧ	t I	employees' beneficiary organizations (see instr)	Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net			7	
⋖	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other				
		basis Complete Part VI of Schedule D	10a 937,502. 10b 134,526.			
	b	Less accumulated depreciation	1,172,828.	10c	802,976.	
	11	Investments - publicly traded securities	<u>-</u>	11		
	12	Investments - other securities See Part IV, line	· · · · · · · · · · · · · · · · · · ·	12		
	13	Investments - program-related See Part IV, line	11		13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		15	0 544 550	
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	4,065,162.	16_	3,544,573.
	17	Accounts payable and accrued expenses		120,930.	17	21,796.
	18	Grants payable		18		
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete			21	
Liabilities	22	Loans and other payables to current and forme	·			
Ē		key employees, highest compensated employee	es, and disquained persons			
Lıa	00	Complete Part II of Schedule L	and the sad as a street		22	
	23	Secured mortgages and notes payable to unrelate Unsecured notes and loans payable to unrelate	·	···	23	
	24	• •	'		24_	
	25	Other liabilities (including federal income tax, pa parties, and other liabilities not included on lines				
		Schedule D	5 17-24) Complete Fait A of	267,759.	25	21,302.
	26	Total liabilities. Add lines 17 through 25		388,689.	26	43,098.
	20	Organizations that follow SFAS 117 (ASC 958	3), check here	300,003.		20,70300
w		complete lines 27 through 29, and lines 33 ar				
č	27	Unrestricted net assets	14 54.		27	
<u>aa</u>	28	Temporarily restricted net assets			28	
Ä	29	Permanently restricted net assets			29	
Š		Organizations that do not follow SFAS 117 (A	SC 958), check here			
ř		and complete lines 30 through 34.				
ts	30	Capital stock or trust principal, or current funds		0.	30	0.
SSe	31	Paid-in or capital surplus, or land, building, or ed	guipment fund	0.	31	0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	· ·	3,676,473.	32	3,501,475.
ž	33	Total net assets or fund balances	,	3,676,473.	33	3,501,475.
	l : -			4 OCE 1CO		2 544 572

Form **990** (2016)

34 Total liabilities and net assets/fund balances

Form	990 (2016) BOYS AND GIRLS CLUB OF GLASGOW/BARREN CO	45-4	593954	Pag	ge 12
Pa	rt XI 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			<u>67.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2			<u>56.</u>
3	Revenue less expenses Subtract line 2 from line 1	3	<u> </u>	<u>, o</u>	<u>89.</u> :
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,676	<u>, 4</u>	<u>73.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			•
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	90	0,0	91.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	3,501	.,4	75.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			1
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			1
	consolidated basis, or both.				1
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,		ĺ	
	review, or compilation of its financial statements and selection of an independent accountant?		2c		ł
	If the organization changed either its oversight process or selection process during the tax year, explain in Schi	edule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Audit		l	
	Act and OMB Circular A:133?	-	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2016)

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.

Open to Public

Employer identification number

Department of the Treasury Internal Revenue Service

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

OMB No 1545-0047

Name of the organization 45-4693954 BOYS AND GIRLS CLUB OF GLASGOW/BARREN CO Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 12, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv), (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture (see instructions). Enter the name, city, and state of the college or university 10 X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) is the organization listed (I) Name of supported (III) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1 10 organization support (see instructions) support (see instructions) above (see instructions))

Schedule A (Form 990 or 990-EZ) 2016 BOYS AND GIRLS CLUB OF GLASGOW/BARREN CO45-4693954 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Se	ction A. Public Support						,
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not	1					1
	include any "unusual grants ")						
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to					1	
	or expended on its behalf						
3	The value of services or facilities	-					
	furnished by a governmental unit to						
	the organization without charge	ļ	 	 	 	 	
4	Total. Add lines 1 through 3		ļ	<u> </u>	 	<u> </u>	ļ <u>-</u>
5	The portion of total contributions	j]
	by each person (other than a						
	governmental unit or publicly					Ì	1
	supported organization) included	ļ				}	
	on line 1 that exceeds 2% of the						į
	amount shown on line 11,						
_	column (f)			 	 	 	
	Public support, Subtract line 5 from line 4 ction B. Total Support	<u> </u>			<u> </u>	<u> </u>	
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 4	(a) 2012	(6) 2013	(0) 2014	(u) 2013	(e) 2010	(I) Total
8	Gross income from interest.						
٥	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business				 	 	
Ŭ	activities, whether or not the	j					ļ
	business is regularly carried on						
10	Other income Do not include gain						
-	or loss from the sale of capital		İ				
	assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10		Ţ <u> </u>				
12	Gross receipts from related activities,	etc (see instructi	ions)			12	
13	First five years. If the Form 990 is for	r the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3)	
	organization, check this box and stor	here					
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				<u>. </u>
14	Public support percentage for 2016 (I	line 6, column (f) d	livided by line 11,	column (f))		14	%
15	Public support percentage from 2015	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2016. If the c	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or	more, check this bi	ox and
	\ensuremath{stop} here. The organization qualifies		•				
b	33 1/3% support test - 2015. If the o	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/39	% or more, check to	his box
	and stop here. The organization qual	ifies as a publicly	supported organiz	ation			
17a	10% -facts-and-circumstances tes	-					
	and if the organization meets the "fac	ts-and-circumstar	nces" test, check t	his box and stop i	here. Explain in Pa	art VI how the organ	nization
	meets the "facts-and-circumstances"	_	•		-		
b	10% -facts-and-circumstances test	_	•				
	more, and if the organization meets the						·
	organization meets the "facts-and-circ	cumstances" test	The organization	qualifies as a publ	icly supported org	anization	▶∟
<u> 18</u>	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17	<u>b, check this box</u>	and see instruction	s ▶
					Sch	edule A (Form 990	or 990-EZ) 2016

632022 09-21-16

Schedule A (Form 990 or 990-EZ) 2016 BOYS AND GIRLS CLUB OF GLASGOW/BARREN CO45-4693954 Page 3 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")	787,230.	445,836.	4354330.	407,333.	343,267.	6337996.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	787,230.	445,836.	4354330.	407,333.	343,267.	6337996.
7 a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						0.
	amount on line 13 for the year						0.
	Add lines 7a and 7b		<u> </u>	-			6337996.
	Public support. (Subtract line 7c from line 6) ction B. Total Support						033/330.
		(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	ndar year (or fiscal year beginning in)	787,230.	445,836.	4354330.	407,333.	343,267.	6337996.
-	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	707,230.	11.	3.	3,993.	343,207.	4,007.
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b		11.	3.	3,993.		4,007.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital						
13	assets (Explain in Part VI) Total support (Add lines 9, 10c, 11, and 12)	787,230.	445,847.	4354333.	411,326.	343,267.	6342003.
	First five years. If the Form 990 is for					n 501(c)(3) organiz	ation,
	check this box and stop here	· · · · · · · · · · · · · · · · · · ·		<u> </u>			▶ □
Sec	ction C. Computation of Publ	<u>ic Support Per</u>	rcentage			· · · · · · · · · · · · · · · · · · ·	
15	Public support percentage for 2016 (ine 8, column (f) di	vided by line 13, c	olumn (f))		15	99.94 %
<u>16</u>						16	<u>99.93 %</u>
Sec	ction D. Computation of Inves	stment Income	e Percentage				
17	Investment income percentage for 20	116 (line 10c, colum	nn (f) divided by Iir	ne 13, column (f))		17	.06_%
18	Investment income percentage from	2015 Schedule A, f	Part III, line 17			18	.07 %
19a	33 1/3% support tests - 2016. If the	organization did n	ot check the box	on line 14, and line	15 is more than 3	3 1/3%, and line 1	
	more than 33 1/3%, check this box a 33 1/3% support tests - 2015. If the	nd stop here . The	organization qual	ifies as a publicly s	supported organiza	ation	\triangleright X
	line 18 is not more than 33 1/3%, che						▶ □
<u>20</u>	Private foundation. If the organization	n did not check a l	box on line 14, 19:	a, or 19b, check th	is box and see ins	structions	Der 000 57) 2040

Schedule A (Form 990 or 990-EZ) 2016 BOYS AND GIRLS CLUB OF GLASGOW/BARREN CO45-4693954 Page 4 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)			
Sec	tion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing	1		
	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	1_1_		
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)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a		
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	3b_		
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	3c		
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	4a		
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	4b		
С	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	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,	İ		
	(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)	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?		T	
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		
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.	9a		

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

b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which

c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit

supporting organizations)? If "Yes," answer 10b below

the supporting organization had an interest? If "Yes," provide detail in Part VI.

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)

Schedule A (Form 990 or 990-EZ) 2016

9a

9b

9с

10a

10b

	edule A (Form 990 or 990 EZ) 2016 BOYS AND GIRLS CLUB OF GLASGOW/BARREN CO45-4	169395	4 Pa	age 5
Ра	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a	-	
	A family member of a person described in (a) above?	11b	-	
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	L	L
Sec	Con B. Type I Supporting Organizations		Yes	No
	Old the discrete A setting a second s		res	NO
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported		:	
•	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			İ
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
500	supervised, or controlled the supporting organization	22	<u></u>	<u> </u>
Sec	tion C. Type II Supporting Organizations			
	Mario a management of the agreement and a discontinuous and a second support the Associated Second support to the advantage of the advantage o		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
500	the supported organization(s) stion D. All Type III Supporting Organizations	1 1		
000	Clott D. All Type III Supporting Organizations		Vaa	Na
4	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
2	organization's governing documents in effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	1		
~	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			-
3	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations		L	L
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions			
' a	The organization satisfied the Activities Test. Complete line 2 below	·y.		
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	netructions	٠1	
с 2	Activities Test Answer (a) and (b) below.	istractions	Yes	No
z a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		165	140
а	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	0-		
	that these activities constituted substantially all of its activities	2a	 	
D	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
_	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а				
	trustees of each of the supported organizations? Provide details in Part VI.	3a		_
h				
	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

Schedule A (Form 990 or 990-EZ) 2016 BOYS AND GIRLS CLUB OF GLASGOW/BARREN CO45-4693954 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (B) Current Year Section A - Adjusted Net Income (optional) Net short-term capital gain 2 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 4 Add lines 1 through 3 4 5 Depreciation and depletion 5 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) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year (A) Prior Year Section B - Minimum Asset Amount (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) a Average monthly value of securities 1b b Average monthly cash balances c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI) 2 2 Acquisition indebtedness applicable to non-exempt-use assets 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, Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by 035 6 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 2 Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Enter greater of line 2 or line 3 4 4 Income tax imposed in prior year 5

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2016

instructions)

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

emergency temporary reduction (see instructions)

Schedule A (Form 990 or 990 EZ) 2016 BOYS AND GIRLS CLUB OF GLASGOW/BARREN CO45-4693954 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 Amounts paid to perform activity that directly furthers exempt purposes of supported 2 organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 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 Total annual distributions. Add lines 1 through 6 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2016 from Section C, line 6 Line 8 amount divided by Line 9 amount (i) (iii) (ii) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2016 Amount for 2016 Distributable amount for 2016 from Section C, line 6 Underdistributions, if any, for years prior to 2016 (reasonable cause required explain in Part VI) See instructions Excess distributions carryover, if any, to 2016 b c From 2013 d From 2014 e From 2015 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2016 distributable amount Carryover from 2011 not applied (see instructions) Remainder Subtract lines 3g, 3h, and 3i from 3f Distributions for 2016 from Section D. a Applied to underdistributions of prior years b Applied to 2016 distributable amount c Remainder Subtract lines 4a and 4b from 4 Remaining underdistributions for years prior to 2016, 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 2016 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI See instructions Excess distributions carryover to 2017. Add lines 3j and 4c

Schedule A (Form 990 or 990-EZ) 2016

8 Breakdown of line 7

b Excess from 2013c Excess from 2014d Excess from 2015e Excess from 2016

Part VI	(Form 990 or 990-EZ) 2016 BOYS AND GIRLS CLUB OF GLASGOW/BARREN CO45-4693954 Page I 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)
 	
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SCHEDULE D

Department of the Treasury

(Form 990)

Part I

2

3

5

6

Part III

year 🕨

Supplemental Financial Statements

OMB No 1545-0047 Open to Public

Internal Revenue Service Name of the organization

➤ 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. Inspection ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number 45-469395<u>4</u> BOYS AND GIRLS CLUB OF GLASGOW/BARREN CO Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? VAC In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2016

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Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets(continued)			D GIRLS CLU							Page 2
(c) Check all that apply) a Public exhibition d	Pa	··· —								
a Public exhibition d Loan or exchange programs b Scholarly research e Other c Preservation for future generations d Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Parl XIII 5 During the year, did the organization's collections and explain how they further the organization's exempt purpose in Parl XIII 5 During the year, did the organization's collections and explain how they further the organization's exempt purpose in Parl XIII 5 During the year in did not be maintained as part of the organization answered "Yes" on Form 990, Parl IV, line 9, or reported an amount on Form 990, Parl X, line 21 1 Is the organization an again, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Parl X, line 21 1 Is the organization and again, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Parl X, line 21 2 Is gently in the arrangement in Parl XIII and complete the following table 2 Beginning balance Armount 2 Ending balance Armount 2 Endowment play 3 Endowment Armount 4 Endowment Armount 5 Ending balance Armount 5 Ending balance Armount 5 Endowment Armount 6 Endowment Armount 7 Endowment Armount 7 Endowment Armount 7 Endowment Armount 8 Endowment Armount 9 Endowm	3		ion, and other record	s, check any of th	ne following tha	it are a sigi	nificant	use of its	collection	ıtems
b Scholarly research Cother Cother Cother Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 5 During the year, did the organization solicit or receive donations of air, instoricit treasures, or other similar assets to be self to tase funds either than to be maniferation sollection? Yee No Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21 1b If "Yes," explain the arrangement in Part XIII and complete the following table 2 Beginning balance Distributions during the year 5 Ending balance Distributions during the year 6 Ending balance Distributions during the year 1 Ending balance Distributions during the year 1 Ending balance Distributions during the year 1 Ending balance Distributions during the year 1 Ending balance Distributions during the year 2 End Dut the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yee No 3 End Tyes, "explain the arrangement in Part XIII Distribution has been provided on Part XIII 1 Part V Endowment Funds, Complete if the organization has been provided on Part XIII 1 Part V Endowment Funds, Complete if the organization has been provided on Part XIII 1 Part V Endowment Funds, Complete if the organization has been provided or Part XIII 2 Part V Endowment Funds, Complete if the organization is explained by a part XIII 3 End of year balance 3 End of year balance 4 Endowment Funds not in the possession of the organization that are held and administered for the organization by 5 Engography restricted endowment Septiment Funds 6 Endowment Funds, are										
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e Other 140,608. 92,831. 47,777.										
		• •			10 600		12 0	1	17	777
Total. Add lines 1a through 1e (Column (d) must equal Form 990. Part X. column (B), line 10c)			qual Form 200. Dod \				<u>, , 0</u>		<u>4 /</u>	,777.

Schedule D (Form 990) 2016

Schedule D (Form 990) 2016 BOYS AN Part VII Investments - Other Securit	D GIRLS CLU	B OF GL	BOOON/ DEMIN		43-4033334
Complete if the organization answere		Part IV line 11	h See Form 990 P	art Y line 12	
(a) Description of security or category (including name of					or end-of-year market v
1) Financial derivatives	(2)		(0)		<u> </u>
2) Closely-held equity interests					
3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
otal (Col. (b) must equal Form 990, Part X, col. (B) line	: 12.)				
Part VIII Investments - Program Rela			_ 		
Complete if the organization answere		Part IV line 11	c See Form 990 Pa	art X line 13	
(a) Description of investment	(b) Book		(c) Method of value	uation Cost of	or end-of-year market v
(1)					
(2)					
(3)					
(4)					
(5)					
(6)			-		
(7)					
(8)					
	l l				
(0)					
	d "Yes" on Form 990,	Part IV, line 11	d See Form 990, Pa	art X, line 15	
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	edule D (Form 990) 2016 BOYS AND GIRLS CLUB OF			Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial St		e per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV,	line 12a		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 - 1		
a	Net unrealized gains (losses) on investments			
b	Donated services and use of facilities	2b		
С.	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b	1 4- 1		
a b	Other (Describe in Part XIII)	4a 4b		
C		46	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 1.	21	5	
	rt XII Reconciliation of Expenses per Audited Financial S			
	Complete if the organization answered "Yes" on Form 990, Part IV.	•		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		•	
a	Donated services and use of facilities	2a	l	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d	20		
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
a .	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1 1	
b	Other (Describe in Part XIII)	4b		
	Add lines 4a and 4b	- 40		
			1 40 1	
		18)	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information.	18)	5	
5 Pa	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line at XIII Supplemental Information.		5	
Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line	I 4, Part IV, lines 1b and 2b, Pa	5	
Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	I 4, Part IV, lines 1b and 2b, Pa	5	
Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	I 4, Part IV, lines 1b and 2b, Pa	5	
Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	I 4, Part IV, lines 1b and 2b, Pa	5	
Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	I 4, Part IV, lines 1b and 2b, Pa	5	
Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	I 4, Part IV, lines 1b and 2b, Pa	5	
Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	I 4, Part IV, lines 1b and 2b, Pa	5	
Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	I 4, Part IV, lines 1b and 2b, Pa	5	
Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	I 4, Part IV, lines 1b and 2b, Pa	5	
Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	I 4, Part IV, lines 1b and 2b, Pa	5	
Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	I 4, Part IV, lines 1b and 2b, Pa	5	
Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	I 4, Part IV, lines 1b and 2b, Pa	5	
Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	I 4, Part IV, lines 1b and 2b, Pa	5	
Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	I 4, Part IV, lines 1b and 2b, Pa	5	
Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	I 4, Part IV, lines 1b and 2b, Pa	5	
Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	I 4, Part IV, lines 1b and 2b, Pa	5	
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Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	I 4, Part IV, lines 1b and 2b, Pa	5	
Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	I 4, Part IV, lines 1b and 2b, Pa	5	
Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	I 4, Part IV, lines 1b and 2b, Pa	5	
Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	I 4, Part IV, lines 1b and 2b, Pa	5	
Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	I 4, Part IV, lines 1b and 2b, Pa	5	
Pa Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	I 4, Part IV, lines 1b and 2b, Pa	5	
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SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990 or Form 990-EZ.

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection

Employer identification number

45-4693954 BOYS AND GIRLS CLUB OF GLASGOW/BARREN CO Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17 Form 990-EZ filers are not Part I required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply X Mail solicitations e Solicitation of non-government grants X Internet and email solicitations f X Solicitation of government grants X Phone solicitations g X Special fundraising events X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or Yes X No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (iii) Did fundraiser have custody or control of contributions (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) or entity (fundraiser) fundraiser from activity organization listed in col (i) Yes No 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

632081 09-12-16

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2016

- 1		•	gross income on Form 99 (a) Event #1	(b) Event #2	(c) Other events	(d) Total events
l		•			NONE	(add col (a) through
			FUNDRAISING (event type)	(event type)	(total number)	col (c))
3			(ovoin typo)	(event type)	(total namber)	
PONCHING	1	Gross receipts	283,741.			283,741
	2	Less Contributions	283,741.			283,741
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes			· 	
	5	Noncash prizes				
	6	Rent/facility costs				
		Food and beverages				
		-				
	8	Entertainment				
	9	Other direct expenses	<u> </u>	<u></u>		
1		Direct expense summary Add lines 4 through	- ' '		>	
1	<u>11</u> rt li	Net income summary Subtract line 10 from II Gaming. Complete if the organization		- 000 Dat IV I - 10		L
		\$15,000 on Form 990-EZ, line 6a	manswered tes on rom	n 990, Part IV, line 19, or	reported more than	
T		trojece dr. drivece EE, into eq		(b) Pull tabs/instant		(d) Total gaming (a
			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col (a) through col
-						
+	1_	Gross revenue				
İ	1_					
	2	Gross revenue Cash prizes				
	3	Cash prizes				
	3	Cash prizes Noncash prizes Rent/facility costs				
	3	Cash prizes Noncash prizes	Vac 96	Vos. %	Vas %	
	3 4 5	Cash prizes Noncash prizes Rent/facility costs		Yes%	☐ Yes%	
	3 4 5	Cash prizes Noncash prizes Rent/facility costs Other direct expenses	No	I I		
	3 4 5 6	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	Mo gh 5 in column (d)	I I		
	3 4 5 6	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add lines 2 throu	Mo gh 5 in column (d)	I I		
	3 4 5 6 7 8	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add lines 2 throu	No gh 5 in column (d) 7 from line 1, column (d)	I I		
	3 4 5 6 7 8 Ente	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add lines 2 throu Net gaming income summary Subtract line	No gh 5 in column (d) 7 from line 1, column (d) ducts gaming activities	No No		Yes
a	3 4 5 5 6 7 8 Enter list th	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add lines 2 throu Net gaming income summary Subtract line er the state(s) in which the organization cond	No gh 5 in column (d) 7 from line 1, column (d) ducts gaming activities activities in each of these	No No		Yes
a	3 4 5 5 6 7 8 Enter list th	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add lines 2 throu Net gaming income summary Subtract line er the state(s) in which the organization conta	No gh 5 in column (d) 7 from line 1, column (d) ducts gaming activities activities in each of these	No No		Yes
a	3 4 5 5 6 7 8 Enter is the list if "N	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add lines 2 throu Net gaming income summary Subtract line er the state(s) in which the organization conta	No gh 5 in column (d) 7 from line 1, column (d) ducts gaming activities activities in each of these	No No	No D	
ab	3 4 5 5 6 7 8 Enter the string th	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add lines 2 throu Net gaming income summary Subtract line er the state(s) in which the organization conta	No gh 5 in column (d) 7 from line 1, column (d) ducts gaming activities activities in each of these	states?	No P pyear?	Yes Yes

Schedule G (Form 990 or 990-EZ) 2016 BOYS AND GIRLS CLUB OF GLASGOW/BARREN C	
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 chàritable gaming?	Yes No
13 Indicate the percentage of gaming activity conducted in	
a The organization's facility	13a %
b An outside facility	13b 9
14 Enter the name and address of the person who prepares the organization's gaming/special events books and rec	ords
Name	
Address >	
7.00(1000 P	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
Jose the organization have a contract with a time party from whom the organization receives gaining revenue.	
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the an	nount
	nount
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 sper	
·	it in the
organization's own exempt activities during the tax year \$	1.5
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and	Part III, lines 9, 9b, 10b, 15b,
15c, 16, and 17b, as applicable. Also provide any additional information. See instructions	
	e G (Form 990 or 990-EZ) 2016

Schedule C	(Form 990 or 990-EZ)	BOYS	AND	GIRLS	CLUB	OF	GLASGOW/BARREN	CO45-	<u>469395</u>	4 Page 4
Part IV	Supplemental Infor	mation (continue	ed)			_ _			
	· ·									
	•									
										
										
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SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization BOYS AND GIRLS CLUB OF GLASGOW/BARREN CO Employer identification number 45-4693954

Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	Method of noncash conti		_	:s
1	Art - Works of art		nterns contributed	TOTTI 950, T art VIII, IIIIe	.9			
2	Art - Historical treasures							
3	Art - Fractional interests					-		
4	Books and publications							
5	Clothing and household goods	X		15.095	FAIR MARK	ET VA	LUE	
6	Cars and other vehicles				7 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
7	Boats and planes							
8	Intellectual property						_	
9	Securities - Publicly traded	- 						
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or					,. <u> </u>		
	trust interests							
12	Securities Miscellaneous							
13	Qualified conservation contribution							
	Historic structures							
14	Qualified conservation contribution · Other							
15	Real estate - Residential							
16	Real estate · Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory	X		15.095	FAIR MARKI	T VA	LUE	
20	Drugs and medical supplies			20,03	<u> </u>			
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens						-	
24	Archeological artifacts							
25	Other							
26	Other ()							
27	Other • ()							
28	Other ()							
29	Number of Forms 8283 received by the organiz	ation during	the tax year for c	ontributions				
	for which the organization completed Form 828	-	-	1 1				
	·		•	,			Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I, lines 1 thr	ough 28, that it			
	must hold for at least three years from the date	of the initia	I contribution, and	which isn't required to be	e used for			i
	exempt purposes for the entire holding period?		,			30a		X
b	If "Yes," describe the arrangement in Part II					332		
31	Does the organization have a gift acceptance p	olicy that re	quires the review	of any nonstandard contr	ibutions?	31		Х
	Does the organization hire or use third parties of	•	•	•		<u> </u>		_
u	contributions?		g	s, process, or serriorica		32a		х
h	If "Yes," describe in Part II					323		
33	If the organization didn't report an amount in co	olumn (c) for	a type of property	y for which column (a) is o	hecked			
-	describe in Part II	(0) 101	~ .,po or property	, milon column (a) is c				ī
НΔ	For Paperwork Reduction Act Notice see t	bo Instruct	ions for Form 000	<u> </u>	Schedule	M /Form	000) (2016)

Part II	Supplemental Informations reporting in Part I, column (to this part for any additional info	tion. Provide the information b), the number of contributions	required by Part I, lines 30b, the number of items received.	REN CO 45-469 b, 32b, and 33, and whether the ved, or a combination of boti	
	,				
					
			 		
					
					

632142 08-23-16

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.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public

Internal Revenue Service Name of the organization

Inspection Employer identification number

BOYS AND GIRLS CLUB OF GLASGOW/BARREN CO 45-4693954
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
FULL POTENTIAL AS PRODUCTIVE, CARING, AND RESPONSIBLE CITIZENS.
FORM 990, PART VI, SECTION B, LINE 11B:
THE BOYS AND GIRLS CLUB OF GLASGOW/BARREN COUNTY PROVIDES A COMPLETE COPY
OF FORM 990 TO ALL MEMBERS OF ITS GOVERNING BODY.
FORM 990, PART VI, SECTION B, LINE 12C:
THE BOYS AND GIRLS CLUB OF GLASGOW/BARREN COUNTY REGULARLY AND CONISTENTLY
MONITORS COMPLIANCE WITH THIS POLICY BY REQUIRING OFFICERS, DIRECTORS, ETC.
TO DISCLOSE ANNUALLY ANY INTERESTS THAT COULD GIVE RISE TO CONFLICTS.
FORM 990, PART VI, SECTION B, LINE 15B:
COMPENSATION OF KEY EMPLOYEES INCLUDE A REVIEW AND APPROVAL BY THE
ORGANIZATION'S BOARD OF DIRECTORS.
FORM 990, PART VI, SECTION C, LINE 19:
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC
THROUGH THE USE OF ANOTHER'S WEBSITE. THEY ARE ALSO AVAILABLE UPON
REQUEST.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:
ADJUSTMENT FOR CACELATION OF PLEDGES 90,091.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2016)