For Paperwork Reduction Act Notice, see instructions.

9-8

Form 990-T (2019)

| | | T (2019) BOYS AND GIRLS CLUB OF | BREVARD/ | 56-214282 | 9 | | Page 2 |
|-----------|--------|--|-----------------------------|-------------------------------|-------------|----------------|---|
| ·P | irtil) | Total Unrelated Business Taxable incom | e | | | | |
| 32 | Tota | I of unrelated business taxable income computed from all un | related trades or bus | sinesses (see | | | |
| | ınstr | uctions) | | | | 32 | 18,220 |
| 33 | Amo | ounts paid for disallowed fringes | | | | 33 | |
| 34 | | ritable contributions (see instructions for limitation rules) | | | | 34 | |
| 35 | Tota | I unrelated business taxable income before pre-2018 NOLs | and specific deduction | ons Subtract line | | | |
| | 34 fi | om the sum of lines 32 and 33 | | | | 35 | 18,220 |
| 36 | Ded | uctions for net operating loss arising in tax years beginning b | efore January 1, 20 | 18 (see | | | |
| | ınstr | uctions) | | | | 36 | |
| 37 | Tota | I of unrelated business taxable income before specific deduc | tion Subtract line 36 | 6 from line 35 | | 37 | 18,220 |
| 38 | | cific deduction (Generally \$1,000, but see line 38 instructions | | | | 38 | 1,000 |
| 39 | Unr | elated business taxable income. Subtract line 38 from line | 37 If line 38 is grea | iter than line 37, | | | |
| E | | r the smaller of zero or line 37 | | | | 39 | <u> </u> |
| Pa | | | | | | , | |
| 40 | Org | anizations Taxable as Corporations. Multiply line 39 by 21% | (0 21) | | • | 40 | 3,616 |
| 41 | | sts Taxable at Trust Rates. See instructions for tax comput | | | | | |
| | | Imount on line 39 from Tax rate schedule or Tax | Schedule D (Form 1 | 1041) | | 41 | |
| 42 | | ty tax. See instructions | | | | 42 | |
| 43 | | native minimum tax (trusts only) | | | | 43 | _ _ |
| 44 | | on Noncompliant Facility Income See instructions | _ | | | 44 | 3,616 |
| 45 | irt-V | II. Add lines 42, 43, and 44 to line 40 or 41, whichever applie | S | | | 45 | 3,616 |
| | | | Form 1116) | 460 | | Modarni | |
| 46a | | ign tax credit (corporations attach Form 1118, trusts attach F | -0//// / / / / / / | 46a | | | |
| ь | | er credits (see instructions) eral business credit. Attach Form 3800 (see instructions) | | 46b | | | |
| C | | lit for prior year minimum tax (attach Form 8801 or 8827) | | 46c 46d | | | |
| d | | Il credits. Add lines 46a through 46d | | | | 46e | |
| e 47 | | ract line 46e from line 45 | | | | 47 | 3,616 |
| 48 | Other | taxes | n 8866 Other (att.s | ah) | | 48 | 3,010 |
| 49 | | affrom Porm 4255 Porm 8611 Profit 8697 Porm 86 | 1 6666 Other (att \$ | un j | | 49 | 3,616 |
| 50 | | net 965 tax liability paid from Form 965-A or Form 965-B, P | art II. column (k) line | . 3 | | 50 | 3,010 |
| 51a | | ments A 2018 overpayment credited to 2019 | art ii, coluiliii (k) iiile | 51a | | | |
| b | | estimated tax payments | | | 1,400 | | |
| c | | deposited with Form 8868 | | 51c | | | |
| d | | ign organizations. Tax paid or withheld at source (see instru | ctions) | 51d | | | |
| e | | tup withholding (see instructions) | 5.15115) | 51e | | | |
| f | | it for small employer health insurance premiums (attach For | m 8941) | 51f | | | |
| g | | r credits, adjustments, and payments Form 2439 | 55 , | | | | |
| 3 | | Form 4136 Other | Total ► | 51g | | | |
| 52 | | I payments. Add lines 51a through 51g | | | | 52 | 4,400 |
| 53 | | nated tax penalty (see instructions) Check if Form 2220 is a | ttached | | ► X | 53 | 33 |
| 54 | | due. If line 52 is less than the total of lines 49, 50, and 53, ei | | | ▶ | 54 | 0 |
| 55 | | rpayment. If line 52 is larger than the total of lines 49, 50, ar | | overpaid | • | 55 | 751 |
| 56 | Enter | the amount of line 55 you want Credited to 2020 estimated tax I | → 7: | 51 Refu | nded 🕨 | 56 | |
| Pa | rt V | Statements Regarding Certain Activities | and Other Infor | rmation (see instri | uctions) | | |
| 57 | At ar | ny time during the 2019 calendar year, did the organization h | ave an interest in or | a signature or other a | uthority | | Yes No |
| | over | a financial account (bank, securities, or other) in a foreign of | ountry? If "YES," the | organization may have | e to file | | |
| | here | EN Form 114, Report of Foreign Bank and Financial Accour | its ii 1E5, enterth | ie name of the foreign | country | | X |
| 58 | | ng the tax year, did the organization receive a distribution fro | m. or was it the gran | tor of, or transferor to | a foreign | trust? | X |
| | If "Y | ES," see instructions for other forms the organization may ha | ive to file | | , a .o.o.g. | | |
| <u>59</u> | | r the amount of tax-exempt interest received or accrued duri | | Namenta, and in the best of m | , knawladaa | and balled . | |
| Sig | n i | nder penalties of perjury, I declare that I have examined this return, including according in complete. Declaration of preparer (other than taxpayer) is based of | | | y knowledge | and delier, in | May the IRS discuss this return |
| Her | e 🕨 | 17/10/20 TE | REASURER | | | | with the preparer shown below (see instructions)? |
| • | - 1 | Signature of officer Date Title | | | | l | X Yes No |
| | | Print/Type preparer's name Preparer's | | 0.20 | ate | Check | ıf PTIN |
| Paid | | TERRY B ANDERSEN CPA | 75. Har | CVAT 0 | 7/08/20 | self-emplo | yed P00932175 |
| | | Firm's name > CARLAND & ANDERSEN | INC. | | Firm's | EIN Þ | 04-3729830 |
| Use | | | / | | | | |
| | | Firm's address BREVARD, NC 28712 | | | Phon | e no 8 | 28-884-2021 |
| | | | | | | | Form 990-T (2019) |

| Form | n 990-T (2019) BOYS AND | GIRLS | _CLU | B OF | BR | EVARD/ | | <u>56-2</u> | 1428 <u>2</u> 9 | Page 3 |
|-----------------|---|---------------------------------------|------------|------------------|---------|---------------------------------------|--------------|---------------|---|---------------------------------------|
| <u>Sch</u> | nedule A - Cost of Goods | Sold. Ent | er met | hod of <u>ir</u> | nver | ntory valuation | on ▶ | COST | METHOD | |
| 1 | Inventory at beginning of year | 1 | _ | | 6 | Inventory at e | nd of | year | | 6 |
| 2 | Purchases | 2 | | | 7 | Cost of good | ls sol | d. Subtra | act | |
| 3 | Cost of labor | 3 | | | | line 6 from line | e 5 Er | nter here | and | |
| 4a | Additional sec 263A costs | | | | | ın Part I, line 2 | 2 | | ļ <u>.</u> | 7 381,288 |
| | (attach schedule) | 4a | | | 8 | Do the rules o | f sect | on 263A | (with respect to | Yes No |
| b | Other costs (attach schedule) STMT 3 | 46 | 38 | 1,288 | | | | | ed for resale) apply | |
| 5 | Total. Add lines 1 through 4b | 5 | | 1,288 | | to the organiza | | • | , , , , , | X |
| | edule C - Rent Income (F | From Real | | | Pe | | | | ed With Real Pr | |
| | ee instructions) | | | , | _ | | · - , | | | |
| | scription of property | | | | - | | | | | |
| (1) | GRAVY STORE REN' | TAL | | | | | | | | |
| (2) | | | | | | | | | · | |
| (3) | | | | | | | | | | |
| (4) | | | | | | | | | | |
| 1.7. | | 2 Rent receiv | ed or accr | ued | | | | · | | |
| | (a) From personal property (if the percents | | | | eal and | personal property | (if the | | 3(a) Deductions du | ectly connected with the income |
| | for personal property is more than 10% | - | p | | | or personal property | - | ds i | • • |) and 2(b) (attach schedule) |
| | more than 50%) | | | _ | | based on profit or | | | | E STATEMENT 2 |
| (1) | | | | | | · · · · · · · · · · · · · · · · · · · | 43 | , 565 | | 22,680 |
| (2) | | | | | | | | , , , , , | | |
| (3) | | | | | | | | | | |
| (4) | | | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| Total | | | Total | | | | 43 | , 565 | /h) Takal daduations | · · · · · · · · · · · · · · · · · · · |
| | otal income Add totals of column | ne 2(a) and 2 | | | | | | ,,,,,, | (b) Total deductions Enter here and on page | |
| | and on page 1, Part I, line 6, colu | | (5) =::: | ., | | • | 43 | , 565 | Part I, line 6, column | |
| | edule E – Unrelated Debt | | Incor | ne (see | ınstr | uctions) | | , , , , , , , | | · · · · · · · · · · · · · · · · · · · |
| | | | 1 | (000_ | | | | | 3 Deductions directly co | nnected with or allocable to |
| | 4 B | - 4 | | | | income from or | | | • | ced property |
| | 1 Description of debt-financed | property | 1 | alic | | to debt-financed property | | (a) St | raight line depreciation | (b) Other deductions |
| | | | | | • | | | | (attach schedule) | (attach schedule) |
| (1) | N/A | | | | | | | | | |
| (2) | | | | | | | | | | |
| (3) | | | | | | - | | | | |
| (4) | | | | | | | | | | |
| | 4 Amount of average 5 A | verage adjusted | basis | | | Column | | | | 8 Allocable deductions |
| | acquisition debt on or | of or allocable to | | | | divided | | | oss income reportable | (column 6 x total of columns |
| | allocable to debt-financed de property (attach schedule) | ebt-financed prop attach schedule) | | | by | column 5 | - 1 | (cc | dumn 2 x column 6) | 3(a) and 3(b)) |
| (1) | | <u> </u> | | | | | % | | | |
| (2) | | | | | | | % | | | |
| (3) | | | | | | | | | | <u> </u> |
| (<u>4)</u> | | | | | | | /9 % | | | |
| 7 | | | | | _ | | - '4 | Enter | nere and on page 1, | Enter here and on page 1, |
| | | | | | | | Ì | Part | , line 7, column (A) | Part I, line 7, column (B) |
| Tota | Is | | | | | | . | | | |
| | I dividends-received deduction | s included in | column | 8 | | | - 1 | | <u> </u> | |

| Schedule F – Interest, Ann | nuities, Roya | alties, and R | ents F | rom Conti | rolled | Orga | nizati | ons (see in | struction | ns) |
|--|---|---|--|--|---|----------------------------------|--|--|----------------------------|---|
| | | | Exem | pt Controlle | d Org | anızat | ions | | | _ |
| Name of controlled organization | | 2 Employer identification number | | nrelated income ee instructions) | 1 | Total of specified payments made | | Part of column 4 that is included in the controlling organization's gross incomparation. | | 6 Deductions directly connected with income in column 5 |
| (1) N/A | | | | | <u> </u> | | | | | |
| (2) | | | | | <u> </u> | | | | - | |
| (3) | 1 | · · · · · · · · · · · · · · · · · · · | | | 1 | | | | | |
| (4) | | | | | | | | | | |
| Nonexempt Controlled Organiz | ations | | <u>. </u> | | | | | | | |
| 7 Taxable Income | 8 | Net unrelated incomoss) (see instructions | | 9 Total of spec payments made | | ind | cluded in th | lumn 9 that is ne controlling gross income | · · | Deductions directly nected with income in column 10 |
| (1) | | | | | | | | | | |
| (2) | | | | | | | | | | |
| (3) | | | | | | | | | | <u> </u> |
| (4) | | | | | | | | | | |
| | | | <u> </u> | | | En Pa | ter here ar | s 5 and 10 nd on page 1, column (A) | Ente | d columns 6 and 11 ir here and on page 1 i I, line 8, column (B) |
| Schedule G – Investment I | noomo of o | Section FO1 | (0)(7) | (0) 0= (47) | <u> </u> | | tion /a | | | |
| 1 Description of income | | 2 Amount of | | 3 De | ductions | | | Set-asides |)115) | 5 Total deductions and set-asides (col 3 |
| | | ļ | | (attach | schedul | e) | (at | tach schedule) | | plus col 4) |
| (1) N/A | | | | | | | | | | |
| (2) | | | | | | | | | | |
| (3) | | | | | | | | | | |
| (4) | | | | | | | | | | |
| Totals | • | Enter here and o Part I, line 9, co | | | | | | | Pa | er here and on page 1, rt I, line 9, column (B) |
| Schedule I - Exploited Exe | empt Activit | v Income. O | ther Th | | | | | | | |
| Description of exploited activity | 2 Gross unrelated business incom from trade or business | 3 Exper | nses ly d with on of ed | 4 Net income from unrelated or business (co 2 minus colum If a gain, comi cols 5 throug | (loss) trade olumn in 3) pute | 5 Gro from a | oss income activity that t unrelated ess income | 6 Exp | penses table to mn 5 | 7 Excess exempt expenses (column 6 minus column 5, but not more than column 4) |
| (1) N/A | | | | | | | | | | |
| (2) | | | | | | | | | | |
| (3) | | | | | | | | | | |
| (4) | | | | | | | | | | |
| Totals | Enter here and o page 1, Part I, line 10, col (A) | page 1, P | Part I, | | | | | | | Enter here and on page 1 Part II, line 25 |
| Schedule J - Advertising I | ncome (see | instructions) | | 4 sectoring Chales of party | uther d but | FrdE ili | Scattle 24 Hd P. | er Stather Indianal Att H | e a contention of | -11 |
| Part Income From F | | | a Con | solidated | Basi | s | - | | | |
| Militar India 4 - Cali Alamin | <u> </u> | T T | <u> </u> | 4 Advertisii | | | | <u> </u> | | 7 Excess readership |
| 1 Name of periodical | 2 Gross advertising income | 3 Dire advertising | | gain or (loss) 2 minus col 3 a gain, comp cols 5 throug | (col 3) If ute | | rculation ncome | | idership ists | costs (column 6 minus column 5, but not more than column 4) |
| (1) N/A | | |] | | | | | | | |
| (2) | | | | | | | | | | |
| (3) | | | | | | | | | | |
| (4) | | | | | 7 413 | | | | | |
| Totals (carry to Part II, line (5)) | | | | | | | | | | |

Form 990-T (2019) BOYS AND GIRLS CLUB OF BREVARD/ 56-2142829 · Part II

Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns

| 2 through / | on a line-by-line ba | SIS) | | | | |
|-----------------------------|--|--|--|----------------------|-----------------------|---|
| 1 Name of periodical | 2 Gross advertising income | 3 Direct advertising costs | 4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 | 6 Circulation income | 6 Readership costs | 7 Excess readership costs (column 6 minus column 5, but not more than column 4) |
| 1) N/A | | | | | | |
| 2) | | | | | | |
| 3) | | | | | | |
| 4) | | | | | | |
| Totals from Part I | > | | | | | |
| fotals, Part II (lines 1-5) | Enter here and on page 1, Part I, line 11, col (A) | Enter here and on page 1, Part I, line 11, col (B) | | | | Enter here and on page 1, Part II, line 26 |

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

| 1 Name | 2 Title | 3 Percent of time devoted to business | 4 Compensation attributable to unrelated business |
|---|---------|---------------------------------------|---|
| (1) N/A | | % | |
| (2) | | % | |
| (3) | | % | |
| (4) | | % | |
| Total. Enter here and on page 1, Part II, line 14 | | • | |

Form **990-T** (2019)

Federal Statements

Statement 1 - Form 990-T - Primary Unrelated Business Activity

Description

THE BOYS AND GIRLS CLUB OPERATES A THRIFT STORE AT A SEPARATE LOCATION THAT GENERATES SALES AND HAS SPACE THAT IS LEASED BY LOCAL VENDORS. THIS GENERATES SOME RENTAL INCOME AND THE ORGANIZATION RECEIVES A PERCENTAGE OF THE VENDOR'S SALES.

Statement 2 - Form 990-T, Schedule C, Column 3 - Deductions

| Description | Deduction |
|--------------------|-----------|
| GRAVY STORE RENTAL | |
| LEASE EXPENSE | 22,680 |
| TOTAL | 22,680 |

Statement 3 - Form 990-T, Schedule A, Line 4b - Other Costs

| Description | Amount |
|-------------|-----------|
| GRAVY STORE | \$381,288 |
| TOTAL | \$381,288 |

Form **990T**

Two Year Comparison Report

For calendar year 2019, or tax year beginning

| | For calendar year 2019, or tax year beginn | ing | , er | nding | | |
|------------------|---|---------------|---|--------------------------------------|--------------------|--------------------------|
| Name | | | | | Тахрау | er Identification Number |
| | S AND GIRLS CLUB OF BREVARD/ | | | | | |
| | RANSYLVANIA COUNTY, INC. | | | | 56-2 | 2142829 |
| | | | 2018 | 2019 | | Differences |
| 1. | Gross profit/loss on business activities | 1. | 1,279 | -2 | , 665 | -3,944 |
| | Capital gains/losses | 2. | | | | |
| 9 3. | Income/loss from partnerships and S corporations | 3. | | | | |
| 5 4. | Rent income (net of expense) | 4. | 20,366 | 20 | ,885 | 519 |
| > 5. | Unrelated debt-financed income (net of expense) | 5. | | | | |
| ov 6. ∣ | Income from controlled organizations (net of expense) | 6. | | | | |
| 7. | Section 501(c)(7)(9)(17) organization income (net of expense) | 7. | | 1 | | |
| 8. | Exploited exempt activity income (net of expense) | 8 | | | | |
| 9. / | Advertising income (net of expense) | 9. | | | | |
| 10. | Other income | 10. | | | | |
| 11. | Total trade or business income. Combine lines 1 through 10 | 11. | 21,645 | 18 | ,220 | -3,425 |
| | Compensation of officers, directors, and trustees | 12. | | | | |
| 13. | Other salaries and wages | 13. | | | | |
| 14. 1 | Repairs and maintenance | 14 | | | | |
| 15. 1 | Bad debts | 15. | | | | |
| ဖ 16. i | Interest | 16. | | | | |
| a. | Taxes and licenses | 17. | | | | |
| - 18. € | Charitable contributions | 18. | | | | |
| Φ | Depreciation and Depletion | 19. | | reteratelle -heldweite wite ensemble | - mi-sustant maded | |
| ₩ | Contributions to deferred compensation plans | 20. | | | | |
| | Employee benefit programs | 21. | | | | |
| | Other deductions | 22. | | | | |
| - 1 | Total deductions. Add lines 12 through 22 | 23. | | | | |
| | Net income (990T/first activity), Subtract line 23 from 11 | 24. | 21,645 | 18 | ,220 | -3,425 |
| | Number of unrelated business activities for this return | 25. | 1 | 1 | | 3,423 |
| | Unrelated business taxable income from all trades | 26. | 21,645 | | ,220 | -3,425 |
| l l | Disallowed employee fringe benefits | 27. | | | , LLU | 3,423 |
| | Charitable contributions | 28. | | | | |
| 1 | Taxable income before NOL loss | 29. | 21,645 | 18 | ,220 | -3,425 |
| | Net operating loss (pre-2018) | 30 | 21,045 | | , 220 | 3,423 |
| | Specific deduction | 31. | 1,000 | 1 | ,000 | |
| 1 | Unrelated business taxable income. | 32. | 20,645 | | ,220 | -3,425 |
| - | ncome tax (corporate or trust) | 33. | 4,335 | | ,616 | -3, <u>423</u> -719 |
| | Proxy tax | 34. | 4,333 | <u>J</u> | , 010 | -119 |
| | Other taxes | 35. | | | | |
| ~ | Total taxes | 36 | 4,335 | 3 | ,616 | -719 |
| 0 27 / | Other credits | $\overline{}$ | 4,333 | | , 010 | -119 |
| ~ | General business credit | 37. | | | - | |
| I | | 38. | | | | |
| · 1 | Credit for prior year minimum tax | 39. | | | | |
| 1 | Total credits | 40. | 4 225 | 2 | C1.C | 710 |
| | Net tax after credits | 41. | 4,335 | 3 | ,616 | -719 |
| | Recapture taxes and 965 tax | 42. | 4 225 | | | 510 |
| | Total Taxes | 43. | 4,335 | | <u>,616</u> | |
| | Prior year overpayment and estimated tax payments | 44. | 1,900 | 4 | ,400 | 2,500 |
| | Payment made with extension | 45. | | | | |
| ~ 1 | Backup withholding and foreign withholding | 46 | | | | |
| ~ | Other payments | 47. | 4 | | | |
| I | Total payments | 48. | 1,900 | | ,400 | 2,500 |
| | Balance due/(Overpayment) | 49. | 2,435 | | -784 | |
| | Overpayment applied to next year | 50. | · · · · · · · · · · · · · · · · · · · | | 751 | 751 |
| l | Penalties | 51. | 91 | | 33 | -58 |
| 52. 1 | Fotal due/(Refund) | 52. | 2,526 | | | -2,526 |