

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

2016 Open to Public

OMB No 1545-0047

_			Information about Form 990 and its instructions is at www.irs.			<u> </u>	nspectio	חנ
<u>A</u>	For th	he 2016 c	alendar year, or tax year beginning $07/01/16$, and ending $06/30/1$	L7				
В	Check if a	applicable	C Name of organization BOYS & GIRLS CLUB OF INDIAN]	D Employe	r identificati	on number	
	Address	change	RIVER COUNTY, INC.	ļ				
	,] ,,		Doing business as	i	59-3	62329	R	
<u> </u>	Name ch	nange	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephon			
	Initial retu	um	1729 17TH AVENUE		449			
	Final retu		City or town, state or province, country, and ZIP or foreign postal code					
	terminate	ed	VERO BEACH FL 32960		o C		1,934	753
	Amended	d return	F Name and address of principal officer	, '	G Gross rec	eipts \$	1,334	, 133
	Application	on pending		H(a) Is this a group	p return for si	ubordinates?	Yes	X No
	1	panamg	ELIZABETH THOMASON				一	吕
		İ		H(b) Are all subor	rdinates incli	uded?	Yes	No
_				If "No," a	attach a list	(see instructi	ons)	
1	Tax-exe	empt status	X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527					
J	Website	e ▶ W	WW.BGCIRC.ORG	H(c) Group exem	ption numbe	er		
ĸ	Form of o	organization	X Corporation Trust Association Other ▶ L Y	ear of formation			legal domicile	
F	art i		mmary	our of formation		iii otate or	icgui dominio	
2	T							
	1		scribe the organization's mission or most significant activities			_		
S	: [NABLE ALL YOUNG PEOPLE, ESPECIALLY THOSE WHO NEED US		REACH	i		
lan		THEL	R FULL POTENTIAL AS PRODUCTIVE, CARING, RESPONSIBLE	CITIZENS.				
err			<u>_</u>					
Activities & Governance	2 (Check this	s box > if the organization discontinued its operations or disposed of more than 25%	of its net assets				
ب	3 1	Number o	f voting members of the governing body (Part VI, line 1a)		3	20		
် လ	4 1		findependent voting members of the governing body (Part VI, line 1b)		4	20	· · · - · ·	
ij	-				<u> </u>	64		
弃	3		ber of individuals employed in calendar year 2016 (Part V, line 2a)		5			
ĕ			ber of volunteers (estimate if necessary)		6	55		
>>			lated business revenue from Part VIII, column (C), line 12		7a		<u> </u>	<u> </u>
% 	1 d	Net unrela	ited business taxable income from Form 990-T, line 34		7b			0
S.				Prior Year			rrent Year	
> ջ	8 (Contributi	ons and grants (Part VIII, line 1h)		,476	1	,004,	<u> 195</u>
ي و	9 F	Program s	service revenue (Part VIII, line 2g)	258	,273		265,	193
Revenue	10	Investmer	it income (Part VIII, column (A), lines 3, 4, and 7d)	2	,560		1,	756
2 8	111				,312		422,	066
•	12	Total reve	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10d, and 11e)	1,652		1	,693,	
i				- 7,002	/		, 000,	 -
			d similar amounts paid (Part IX, column (A), lines 1–3)					<u>~~</u>
2	1		aid to or for members (Part IX, column (A), line 4)		250		405	
Expenses	15 8		other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,045	,059	1	<u>,107,</u>	
SE SE	16a F	Profession	nal fundraising fees (Part IX, column (A), line 11e)					0
ğ	b1	Total fund	raising expenses (Part IX, column (D), line 25) ▶ 38,821					
Û	17 (enses (Part IX, column (A), lines 11a-11d, 11f-24e)	701	,470		843,	112
	1		enses Add lines 13–17 (must equal Part IX, column (A), line 25)	1,746		1	,950,	
			ess expenses Subtract line 18 from line 12		,908		-257,	
5 6	3	.5.011001	ood onportood odditidet inte 10 itotiffine 12	Beginning of Curre			nd of Year	<u> </u>
Net Assets or Fund Balances	20 ⊺	Total asse	ts (Part X, line 16)	9,261			,436,	169
Asse	24 7		ttes (Part X, line 26)		,182		187,	
et/	21 1		· ` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '					
			or fund balances Subtract line 21 from line 20	8,874	,019	8	,249,	046
	art II		nature Block					
			rjury, I declare that I have examined this return, including accompanying schedules and statements,		ny knowle	dge and bel	ief, it is	
tru	ue, corre	ct, and con	nplete Declaration of preparer (other than officer) is based on all information of which preparer has a	ny knowledge				
			Elizabeth Homesa		$\top T$	5-5-	-17	
Sig	n l	Sig	gnature of officer		Date			
He		.	ELIZABETH THOMASON A EXECU!	CIVE DIRE	ርርጥር ው			
. 16			pe or print name and title	TAR DIKE	CIOR	·		
_				T _{BO}			10.1	
D-2	.	Frintrype	preparer's name Preparer's stinatur	Date	Check	If PT	IN	
Paid		SCOTT A	. NUTTALL, CPA	09/12/	17 self-em		00290925	
	parer	Firm's nam	KMETZ, NUTTALL, ELWZLL, GRAHAM, PLLC	Fırr	m's EIN	27-	12389	21
Use	Only		2800 OCEAN DRIVE					
		Firm's addi	1000 DELGU DE 20062 0064	Dh/	one no	772-	231-6	5902
May	the IRS		this return with the preparer shown above? (see instructions)	1 Pric	5.10 110		X Yes	No
_			tion Act Notice, see the separate instructions.	 				
DAA	. abelwo	ork Keanc	non Act Notice, see the separate instructions.				Form 99	(2016)

) (Revenue \$

Form 990 (2016)

including grants of \$

1,807,478

(Expenses \$

4e Total program service expenses ▶

Forr	n 990 (2016) BOYS & GIRLS CLUB OF INDIAN 59-3623298		Р	age 3
P	art IV Checklist of Required Schedules			
4			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		v	
2	complete Schedule A	1	X	x
3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2		
•	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	-3		-
	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 provide advice on the distribution or investment of amounts in such funds or accounts? If			ĺ
	"Yes," complete Schedule D, Part I	6		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 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	j j	}	Ì
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
40	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	40		x
11	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		^
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
9	VII, VIII, IX, or X as applicable		1	
2	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	ŀ
h	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	114		
~	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	ļ	x
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	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 Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	x	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
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	<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	_13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	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			
4-	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	4.5		
4.0	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	16		x
17	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	 	<u> </u>
1 1	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	17	1	x
18	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	-''-	 	1
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	x	1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		 -
	- a me argumentation report more than wile, ode or gross mounte from gaining activities on it art vin, line sa	19		x

Form 990 (2016) BOYS & GIRLS CLUB OF INDIAN Part IV Checklist of Required Schedules (continued)

	·		Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	Ī		
	through 24d and complete Schedule K. If "No," go to line 25a	24a		<u> </u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
		25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
		25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			7.5
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			37
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)		1	v
a		28a		<u> </u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	206		x
_		28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	20-	1	x
20	, , , , , , , , , , , , , , , , , , ,	28c	х	
29 20	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes." complete Schedule M	30	-	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N</i> ,	30		
31	Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		
JZ	complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	"-	$\overline{}$	
50	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
•	or IV, and Part V, line 1	34		X
35a	Г	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
-		35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
•	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
_	19? Note. All Form 990 filers are required to complete Schedule O	38	x	
			000	· · · ·

X

Form 990 (2016)

14b

Enter the amount of reserves on hand

Did the organization receive any payments for indoor tanning services during the tax year?

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

59-3623298 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 20 1a Enter the number of voting members of the governing body at the end of the tax year 1a 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 20 Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? X 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X 6 Did the organization have members or stockholders? 7a 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 X Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X The governing body? 8a X b Each committee with authority to act on behalf of the governing body? 8b 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No X 10a Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, X 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X describe in Schedule O how this was done 12c X 13 13 Did the organization have a written whistleblower policy? X 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b 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 X with a taxable entity during the year? 16a 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? 16b Section C. Disclosure None 17 List the states with which a copy of this Form 990 is required to be filed > 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 X Own website 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 19 financial statements available to the public during the tax year 20 State the name, address, and telephone number of the person who possesses the organization's books and records SUE HARVEY 1729 17TH AVENUE FL 32960 VERO BEACH, FL

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.

compensated employees, and former	such persons			•						
Check this box if neither the organ	nization nor any	relate	ed or	ganı	zatio	n con	per	sated any current officer, d	irector, or trustee	
(A) Name and Title	(B) Average hours per week (list any hours for	bo of	x, unli ficer a	Pos check ess pe	osition ck more than one person is both an a director/trustee)			(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
1	related organizations below dotted line)	Individual trustee or director	organization (W-2/1099-MISC) Highest compensated employee finantiful trustee individual trustee		organization and related organizations					
(1)WILLIAM MUNN		1 -								
	2.00			 		{ {	┪			
CO-CHAIRMAN	0.00	X		X				0	0	0
(2) DAN SOMERS										
	2.00						ı			
CO-CHAIRMAN	0.00	X		X				0	0	0
(3) ROBERT BAUCHMAN										
	2.00]]	•	}]]	Ì			
TREASURER	0.00	X		X				0	0	0
(4) VIRGINIA POWERS	:	1				1 1	- (
	2.00	1					ı	_	_	_
SECRETARY	0.00	X		X	<u> </u>		_	0	0	_0
(5) GEORGE DAVALA		1	1	}		1	- {			
	2.00	[l		_	
DIRECTOR	0.00	X		_	<u> </u>		_	0	0	0
(6) MARCIA DEWOLFE	0.00	1		1	Ì	1]			
	2.00					} }	-		^	0
DIRECTOR	0.00	X	-			 		0	0	0
(7) SAM DIFEO	2 00	1				1 1				
DIRECTOR	2.00	-					1	o	0	o
OIRECTOR (8) STEVE DUBORD	0.00	X	-		-	╁				-
(8) SIEVE DUBURD	2.00	-				1 1	- {			
DIRECTOR	0.00	$ \mathbf{x} $						0	0	o
(9) MARY GRIMM-MCCEL		+^	1	-	├	 	\dashv	<u> </u>		
(U) FIELD CICIPAL PICCEL	2.00		}				ł			
DIRECTOR	0.00	x					ļ	0	0	0
(10) BRUCE HAMMONDS		† 	 	\vdash		 	_			_
,	2.00		1			i i				
DIRECTOR	0.00	x		! 		{	I	0	0	0
(11) SHERMAN HOTCHKIS		1	 	-		\vdash	_			
	2.00									
DIRECTOR	0.00	X]]]]]	1	0	0	0
DAA										Form 990 (2016)

Part VII Section A. Officers (A)	, Directors, Iru (B)	stee	s, K		mpi c)	oyee	es, a	nd Highest Compensated	(E)	(F)
Name and title	Average	l		Pos	ition			Reportable	Reportable	Estimated
`	hours per week					than o		compensation from	compensation from related	amount of other
	(list any hours for	of	ficer a		directo	or/trust	<u> </u>	the organization	organizations (W-2/1099-MISC)	compensation from the
	related organizations	ndivi	nstit	Officer	ey e	emple	Form	(W-2/1099-MISC)		organization and related
	below dotted	dual t ector	tiona] "	key employee	st cor	Ē			organizations
	line)	ndıvıdual trustee or director	nstitutional trustee		· ê	Highest compensated employee				
			ee			ed.				
(12) SANDRA JOHNSO										
DIDECTOR	2.00 0.00	x		ļ	!			o	o	o
DIRECTOR (13) TRENT LEYDA	0.00	^		 		<u> </u>		 		
(13) 110111 111111	2.00									
DIRECTOR	0.00	x						0	0	0
(14) ROGER LYNCH	_									
	2.00						İ		_	
DIRECTOR (15) WILSON MCKANE	0.00	X	-	-	-	-	-	0	0	0
(15) WILSON MCKANE	2.00					İ	İ			
DIRECTOR	0.00	x						0	0	0
(16) ROD PARKER										
	2.00									
DIRECTOR	0.00_	X	<u> </u>	-	<u> </u>	ļ	<u> </u>	0	0	0
(17) JERRY SHEEHAN	2.00					-				
DIRECTOR	0.00	x						0	o	o
(18) JOHN SPOONER	0.00_		H	Ì		1	1-			
,	2.00									
DIRECTOR	0.00	X			<u> </u>	_	<u> </u>	0	0	0
(19) CHRIS TALBOT										
DIDECTOR	2.00	x						0	o	o
DIRECTOR 1b Sub-total	0.00	<u> A</u>	<u> </u>	<u> </u>	Ь		—			
c Total from continuation she	ets to Part VII,	Sect	ion .	Α			•	103,547		4,513
d Total (add lines 1b and 1c)							<u>></u>	103,547		4,513
2 Total number of individuals (inc			to th	nose	liste	d ab	ove)	who received more than \$1	00,000 of	
reportable compensation from	the organization	_	<u>+</u>							Yes No
3 Did the organization list any for	r mer officer, dire	ctor,	or tr	uste	e, ke	ey en	nploy	yee, or highest compensated	d	3 X
employee on line 1a? If "Yes," of any individual listed on line	complete Sched	ule J	for s	such ble c	<i>indi</i> v omn	/Idua ensa	il ition	and other compensation fro	m the	3 22
organization and related organi	izations greater t	than	\$150	0,000)? <i>If</i>	"Yes	," co	mplete Schedule J for such		
individual					4	£			duudual	4 X
5 Did any person listed on line 1a for services rendered to the org	a receive or accr ganization? <i>If "Ye</i>	ue co es," c	omp comp	ensa olete	uon Sch	edule	any J fo	or such person		5 X
Section B. Independent Contracto	ors							····		
Complete this table for your five compensation from the organize	e highest compe	nsat	ed in	depe	ende	nt co	ontra	ctors that received more that	an \$100,000 of	
	(A) business address	mpe	isat	011 10	יונו וכ	e Car	end a		(B)	(C) Compensation
Name and	business address						+	Descri	ption of services	Compensation
							T			
							\bot			
							+			
					_		+		·	
										
2 Total number of independent c	ontractors (inclu	ding	but	not li	mite	d to t	hose	e listed above) who	0	
received more than \$100,000 c	or compensation	iron	the	orga	ınıza	แอก	_			Form 990 (2016

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (A) Total revenue (D) Revenue excluded from tax under sections 512-514 exempt function business revenue Gifts, Grants Ilar Amounts 1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c 1d d Related organizations 130,912 e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 873,283 111,595 g Noncash contributions included in lines 1a-1f 1,004,195 h Total. Add lines 1a-1f Program Service Revenue Busn Code 230,633 230,633 2a PROGRAM SERVICE FEES 34,560 b 34,560 MEMBER DUES ď f All other program service revenue 265,193 g Total. Add lines 2a-2f Investment income (including dividends, interest, 1,110 1,110 and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 6a Gross rents b Less rental exps C Rental inc or (loss) > Net rental income or (loss) Gross amount from (i) Securities (II) Other sales of assets 112,450 other than inventor **b** Less cost or other 111,595 209 basis & sales exps -209 855 c Gain or (loss) 646 646 d Net gain or (loss) ▶ 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) 551,805 See Part IV, line 18 129,739 **b** Less direct expenses 422,066 422,066 c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn. Code 11a b C d All other revenue Total. Add lines 11a-11d 422,066 1,693,210 266,949 Total revenue. See instructions

Part IX Statement of Functional Expenses

Sec	tion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respon			column (A)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic		· · · · · · · · · · · · · · · · · · ·		····
_	individuals See Part IV, line 22				
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	103,547	77,660	15,532	10,355
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	839,519	810,733	5,171	23,615
8	Pension plan accruals and contributions (include	07.040	04.461	1 405	1 176
_	section 401(k) and 403(b) employer contributions)	27,042	24,461	1,405	1,176 696
9	Other employee benefits	64,711	53,037	10,978	2,979
10	Payroll taxes	72,799	68,341	1,479	2,919
11	Fees for services (non-employees)				
a	-				
b	 	12,955	6,150	6,805	
c	F	12,935	8,130	0,005	
d					
e f	Investment management fees				
' g	The state of the s				
9	(A) amount, list line 11g expenses on Schedule O)				
12		3,569	2,759	810	
13	Office expenses	15,359	9,582	5,777	
14	Information technology		1		
15	Royalties				
16	Occupancy	43,725	43,725		
17	Travel	23,817	21,105	2,712	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	13,668	7,287	6,381	
20	Interest	2,815	2,112	703	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	236,183	222,217	13,966	
23	Insurance	53,685	47,279	6,406	
24	Other expenses Itemize expenses not covered	}		1	
	above (List miscellaneous expenses in line 24e If			1	
	line 24e amount exceeds 10% of line 25, column	1		‡	
	(A) amount, list line 24e expenses on Schedule O)	450 005	150 075	0.020	
a	REPAIRS AND MAINTENANCE	152,905	150,875	2,030	
b	PROGRAM ACTIVITIES	93,521	93,521	337	
C	TELEPHONE AND UTILITIES	78,712	78,375	6,406	
d	RENTALS	40,503 71,695	34,097 54,162	17,533	<u> </u>
e 25	All other expenses	1,950,730	1,807,478	104,431	38,821
<u>25</u> 26	Total functional expenses Add lines 1 through 24e Joint costs. Complete this line only if the	1,350,730	1,001,410	TO4,42T	30,621
20	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ If				
DAA	following SOP 98-2 (ASC 958-720)				5 000 (00

Form 990 (2016) BOYS & GIRLS CLUB OF INDIAN

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) (A) End of year Beginning of year 1,279,220 1,414,601 Cash-non-interest bearing Savings and temporary cash investments 2 93,228 487,758 3 Pledges and grants receivable, net 3 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 organizations (see instructions) Complete Part II of Schedule L 7 7 Notes and loans receivable, net 8 8 Inventories for sale or use 23,605 40,869 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 7,170,355 other basis. Complete Part VI of Schedule D. 10a 1,125,646 6,279,071 6,044,709 10c b Less accumulated depreciation 10b 11 Investments—publicly traded securities 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 14 14 Intangible assets 995,237 1,038,962 15 Other assets See Part IV, line 11 15 8,436,169 9,261,261 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 131,077 314,475 17 17 Accounts payable and accrued expenses 18 18 Grants payable 6,000 5,000 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, -iabilities trustees, key employees, highest compensated employees, and 22 disqualified persons Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 66,707 51,046 of Schedule D 187,123 387,182 26 Total liabilities. Add lines 17 through 25 X and Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 7,320,506 1,553,573 7,154,279 27 Unrestricted net assets 1,094,767 28 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 8,874,079 9,261,261 8,249,046 33 Total net assets or fund balances 33 8,436,169 Total liabilities and net assets/fund balances

Form 990 (2016)

-orm	1 990 (2016) BOYS & GIRLS CLUB OF INDIAN 59-3623298			Р	age 12
Pa	art XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,	693	210
2	Total expenses (must equal Part IX, column (A), line 25)	2		950	
3	Revenue less expenses Subtract line 2 from line 1	3		257,	520
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,	874,	<u>079</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	_	367,	513
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	_33, column (B))	10	8,	249,	046
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				1
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				1
	Schedule O				1
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2:	,	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both		-		1
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		21	$\mathbf{x} \mid \mathbf{x}$	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both				ł
	Separate basis X 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		-		1
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2	\mathbf{x}	
	If the organization changed either its oversight process or selection process during the tax year, explain in				1
	Schedule O		ţ		1
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				İ
	the Single Audit Act and OMB Circular A-133?		3	.	x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		<u> </u>		1
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		31	,	1

Form **990** (2016)

Form 990 (2016) BOYS & Part VII Section A. Offi							es, a	59-362 nd Highest Compensated				'	Page
(A). Name and title	(B) Average hours per week (list any	(d	lo not	Pos check ess pe	C) ition more	than one both	one i an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations		(F Estim amou oth comper	ated nt of er isation	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)		from organi and re organiz	zation lated	
(20) KEN WESSEL		 	-	_	-	-				 -			
	2.00												
DIRECTOR (21) ELIZABETH	0.00	X	├		-	├ ─		0	0	 			
(21) HILLADUIN .	40.00			}			1			}			
EXECUTIVE DIRECTOR	0.00	-	-	x	-		-	103,547	0			4,	513
													
											•		
1b Sub-total							>	103,547				4,	51:
c Total from continuation		Secti	on A	١.			>			 			
d Total (add lines 1b and 1 Total number of individuals		nited	to th	ose l	iste	d abo	ve) v	who received more than \$10	00,000 of	<u> </u>			
reportable compensation fr												Yes	No
3 Did the organization list an	y former officer, dire	ctor,	or tru	ıstee	, ke	y em	ploye	ee, or highest compensated				163	1
	line 1a, is the sum o	frepo	ortab	le co	mpe	ensati		and other compensation from	n the		3		-
 individual Did any person listed on lir for services rendered to the 			•				•	unrelated organization or inc	lividual		5	-	-
Section B. Independent Contr													
 Complete this table for you compensation from the org 	ır five highest compei janization Report cor	nsate npen	d ind	iepei in foi	nder r the	nt con cale	ntrac ndar	tors that received more that year ending with or within t	n \$100,000 of he organization's tax year				
	(A) ie and business address								(B) ion of services		C	(C) ompensa	ation
													
	· · · · · · · · · · · · · · · · · · ·												
				_			_						
2 Total number of independe								listed above) who					

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047 **2016**

Open to Public Inspection

Name	me of the organization BOYS & GIRLS CLUB OF INDIAN RIVER COUNTY, INC. Employer identification number 59-3623298												
D.	art l	Poss			•	must so	mplete t	bio port \ Soo					
					Status (All organizations			nis part) See	instructions) <u>.</u>			
	orga				it is (For lines 1 through 12, ch	-	•	• • • •					
1	H				ciation of churches described in			A)(i).					
2	Н				A)(ii).(Attach Schedule E (Form								
3	Щ				e organization described in sec								
4	Ш	A medical res	-	ation operated	in conjunction with a hospital d	escribed in	section '	170(b)(1)(A)(iii). E	Enter the hosp	tal's name,			
5		•		r the benefit of	in college or consequently according		h		مرام ما بم				
3		_			a college or university owned o	or operated	by a gove	ernmental unit des	scribed in				
6			(b)(1)(A)(iv). (C	•	ii <i>)</i> vernmentał unit described in s∈	ation 170	L\/4\/A\/	۸					
7	X												
'		described in section 170(b)(1)(A)(vi). (Complete Part II)											
8	Ц	A community	trust described	in section 17	70(b)(1)(A)(vi).(Complete Part	II)							
9					ribed in section 170(b)(1)(A)(i agriculture (see instructions)								
10		•	on that normall	v receives (1)	more than 33 1/3% of its supp	ort from co	ntributions	. membership fee	s. and gross				
	ш	-		•	ot functions—subject to certain			•	.				
		support from	gross investme	ent income and	d unrelated business taxable inc	come (less	section 51	l1 tax) from busin	esses				
	_	acquired by the	he organization	after June 30,	, 1975 See section 509(a)(2).	(Complete	Part III)						
11	Ц	An organizati	on organized a	nd operated ex	xclusively to test for public safe	ty See sec	tıon 509(a)(4).					
12					xclusively for the benefit of, to p								
					ations described in section 509								
		Check the bo	x in lines 12a th	nrough 12d tha	at describes the type of support	ing organiz	ation and	complete lines 12	e, 12f, and 12	g			
	а			•	rated, supervised, or controlled		_						
			-		er to regularly appoint or elect a		f the direc	tors or trustees o	f the				
					omplete Part IV, Sections A a								
	b			•	pervised or controlled in connec			-					
					ng organization vested in the s	ame persor	is that cor	ntrol or manage th	ie supported				
				· ·	Part IV, Sections A and C.								
	С				upporting organization operated ructions) You must complete				tegrated with,				
	d	Type III	non-functiona	Illy integrated	dA supporting organization ope	rated in coi	nection v	vith its supported	organization(s)			
		that is no	t functionally in	tegrated The	organization generally must sat	tisfy a distri	bution req	uirement and an	attentiveness				
		requireme	ent (see instruc	tions) You m	iust complete Part IV, Sectio	ns A and	D, and Pa	art V.					
	е				eived a written determination fro			Type I, Type II, T	ype III				
					-functionally integrated supporti	ing organiza	ation			<u> </u>			
	f		nber of support	•									
	g	Provide the fo	ollowing informa	ation about the	supported organization(s)			<u></u>					
(1		e of supported	(11) [EIN	(iii) Type of organization	1 ' '	organization	(v) Amount of		(vi) Amount of			
	OIE	anization			(described on lines 1–10 above (see instructions)		ur governing ment?	support instructi	•	other support (see instructions)			
					,	Yes	No		,	•			
(A)						· · · · · ·							
(**)									,				
(B)	-					+	 						
(13)		· · · ·											
(C)													

(D)

(E)

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 II the organization	talls to quality t	inder the tests li	sted below, ple	ase complete i	Part III)	
$\overline{}$	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")	1,084,475	1,047,254	4,009,719	997,476	1,004,195	8,143,119
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
5	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	1,084,475	1,047,254	4,009,719	997,476	1,004,195	8,143,119
6	Public support. Subtract line 5 from line 4						8,143,119
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	1,084,475	1,047,254	4,009,719	997,476	1,004,195	8,143,119
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,741	482	1,539	2,064	1,110	6,936
9	Net income from unrelated business activities, whether or not the business is regularly carried on	322,258	342,969	361,669	393,312	421,066	1,841,274
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						9,991,329
12	Gross receipts from related activities, etc. (s	see instructions)				12	266,303
13	First five years. If the Form 990 is for the o	rganization's first, s	econd, third, fourth,	or fifth tax year as	a section 501(c)(3)	
	organization, check this box and stop here						<u> </u>
Sec	tion C. Computation of Public Sup	port Percenta	ge				
14	Public support percentage for 2016 (line 6,	column (f) divided b	y line 11, column (f))		14	81.50%
15	Public support percentage from 2015 Scheo	fule A, Part II, line 1	4			15	78.72%
16a	33 1/3% support test—2016. If the organize	ation did not check	the box on line 13,	and line 14 is 33 1/	3% or more, check	this	
	box and stop here. The organization qualifi	es as a publicly sup	ported organization				► X
b	33 1/3% support test—2015. If the organize				33 1/3% or more, o	check	. \Box
_	this box and stop here. The organization qu						▶ ∐
17a		-					
	10% or more, and if the organization meets						
	Part VI how the organization meets the "faci	ts-and-circumstance	es" test. The organiz	zation qualifies as a	publicly supported	i	▶ □
	organization	= 16.11		1 10 10- 1	01 - 47 - 11		
b	10%-facts-and-circumstances test—201					e	
	15 is 10% or more, and if the organization in					,	
	Explain in Part VI how the organization mee supported organization	is the "facts-and-cir	cumstances" test 1	ne organization qu	annes as a publicly	•	▶ 🗌
18	Private foundation. If the organization did instructions	not check a box on	line 13, 16a, 16b, 1	7a, or 17b, check th	nis box and see		▶ []

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)

Sec	tion A. Public Support	,		элэн, р лааса со	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-		
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	; T	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	, ,	1 - 1 - 1 - 1					
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513				·			
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5							
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
C	Add lines 7a and 7b							
8	Public support. (Subtract line 7c from line 6)						- 1	
Sec	tion B. Total Support			<u> </u>	1		1	.
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	<u> </u>	(f) Total
9	Amounts from line 6	(a) 2012	(6) 2010	(0) 2014	(4) 2010	(0, 20.1		(1) 1014
_					-			
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							_
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975				-			
С	Add lines 10a and 10b		<u> </u>					
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 assets (Explain in Part VI)							
13	Total support. (Add lines 9, 10c, 11,							
	and 12)			L		<u> </u>	1	
14	First five years. If the Form 990 is for the o	-	second, third, four	th, or fifth tax year	as a section 501(c)	(3)		. 🗆
<u> </u>	organization, check this box and stop here					.		
	tion C. Computation of Public Su	···					45	0/
15 40	Public support percentage for 2016 (line 8,	• •	•	(†))			15 16	<u>%</u> %
16 Soc	Public support percentage from 2015 Scher						10	
<u>3ec</u> 17	tion D. Computation of Investmen			nolumn (fl)	···		17	%_
17 18	Investment income percentage for 2016 (lin		•	Column (1))			18	<u> </u>
10 19a	Investment income percentage from 2015 S 33 1/3% support tests—2016. If the organ			14 and line 15 is m	nore than 33 1/3%	and line		70
, Ja	17 is not more than 33 1/3%, check this box							▶ □
b	33 1/3% support tests—2015. If the organ	•	-					
	line 18 is not more than 33 1/3%, check this							▶ 🗌
20	Private foundation. If the organization did							▶ [

Part IV Supporting Organizations

Schedule A (Form 990 or 990-EZ) 2016

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A. and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. All	Supporting	Organizations
----------------	------------	----------------------

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- 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)
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- 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
- 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
- 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
- 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
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- 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?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - 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)

	F	Yes	No
	} }		
	1		
	ļ		
	ļ.		
	2		
	3a		
	3b		
	3c		
	4a		
	4b		ł
	-		
ı			
	4c		
ı			
	_		
	5a		
	5b		
	5c		
	6		
	_		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
لب	10b		
A (F	orm 99	90 or 990	EZ) 2016

Sched	ule A (Form 990 or 990-EZ) 2016 BOYS & GIRLS CLUB OF INDIAN 59-36232	98		Page 5
Pa	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		
b	A family member of a person described in (a) above?	11b		<u></u>
c		11c		<u> </u>
Sect	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly 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	···	<u> </u>
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 Part	(
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	ļ (
	supervised, or controlled the supporting organization	2		
Secti	ion C. Type II Supporting Organizations			
			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			
	the supported organization(s)	1 1		<u> </u>
Secti	ion D. All Type III Supporting Organizations			
			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			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's	}		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		l
<u>Secti</u>	on E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
C	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instruction	is)		
2 A	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	ŧ :		
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	ļ		
	those supported organizations and explainhow these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	(
	that these activities constituted substantially all of its activities	2a		ļ
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	[
	reasons for the organization's position that its supported organization(s) would have engaged in these			1
	activities but for the organization's involvement	2b		 -
3	Parent of Supported Organizations Answer (a) and (b) below.	[1
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			1
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b	L	L

Schedule A (Form 990 or 990-EZ) 2016 BOYS & GIRLS CLUB OF IND		<u>59-362</u> 3	3298 Page (
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting	Organizatio	ns	
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust of	on Nov 20, 1970	(explain in Part VI) See	
instructions All other Type III non-functionally integrated supporting organization	s must complete	Sections A through E	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	· · · · · · · · · · · · · · · · · · ·	
e Discount claimed for blockage or other			
factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2	· · · · · · · · · · · · · · · · · · ·	
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	_ 6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount(add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5	-	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			1
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionally integr	rated Type III su	pporting organization (se	e
instructions\	- ·		

Schedule A (Form 990 or 990-EZ) 2016

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

Part VI

Schedule A (Form 990 or 990-EZ) 2016

BOYS & GIRLS CLUB OF INDIAN

59-3623298

Page 8

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)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Actach to Form 990.

Copen to Put

Inspection

2016 Open to Public

▶ Information about Schedule D (Form 990) and its instructions is atwww.irs.gov/form990. Name of the organization Employer identification number BOYS & GIRLS CLUB OF INDIAN RIVER COUNTY, INC. 59-3623298 Part 1 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 Preservation of a certified historic structure Protection of natural habitat Preservation of open space 2 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 2a a Total number of conservation easements 2b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 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)? 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 Part III 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 2 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 Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

146,994

222,372

6,800,989

Schedule D (Form 990) 2016

103,847

102,136

5,838,726

6,044,709

43,147

120,236

962,263

b Buildings

d Equipment

e Other

c Leasehold improvements

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c)

	Complete if the organization answered "Y	es" on Form 990, Part IV, line	11b See Form 990, Par	X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-yea	
(1) Financial of			Cost of end-of-year	T HIBIROT VAIGO
	eld equity interests			
(3) Other	and default interests			
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	n (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII	Investments—Program Related.		<u> </u>	
	Complete if the organization answered "Y	es" on Form 990, Part IV, line	11c See Form 990, Part	X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of Cost or end-of-yea	
(1)				
(2)				
(3)				
_(4)				
(5)			<u> </u>	
(6)				
(7)				
_(8)				
_(9)				
	(b) must equal Form 990, Part X, col (B) line 13)		<u> </u>	
Part IX	Other Assets. Complete if the organization answered "Y	es" on Form 990, Part IV, line	11d See Form 990, Par	
	(a) Desc			(b) Book value
(1)	LEASEHOLD INTEREST	<u> </u>		995,23
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	(b) must equal Form 990, Part X, col (B) line 15)			995,23
Part X	Other Liabilities.			333,23
	Complete if the organization answered "Y	es" on Form 990 Part IV. line	11e or 11f See Form 99	0. Part X.
1.	line 25 (a) Description of liability	(b) Book value	T	
	ncome taxes	(D) BOOK VAIGE	-	
	AL LEASE OBLIGATION	37,121	1	
	O FOUNDATION	13,925	4	
(4)			1	
(5)			1	
(6)			1	
(7)			1	
(8)			1	
(9)			f	
	(b) must equal Form 990, Part X, col (B) line 25) ▶	51,046	1	
	incertain tax positions. In Part XIII, provide the text of			Δ

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2016

59-3623298

Page 4

BOYS & GIRLS CLUB OF INDIAN

Schedule D (Form 990) 2016 BOYS & GIRLS CLUB OF INDIAN

59-3623298

Page 5

Part XIII Supplemental Information (continued)

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

OMB No 1545-0047 **2016**

2016

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ
► Information about Schedule G (Form 990 or 990-EZ) and its instructions is atww irs gov/form990

Open to Public Inspection

Name of the organization BOYS & GIRLS CLUB (RIVER COUNTY, INC.	OF INDIAN				Employer identifica	
Part I Fundraising Activities. Complete if the Form 990-EZ filers are not required to			were	ed "Yes" on Form 99		
1 Indicate whether the organization raised funds through an			s Ch	eck all that apply		
a Mail solicitations	e Solicitation	of non	-gove	rnment grants		
b Internet and email solicitations	f Solicitation	of gov	ernme	ent grants		
c Phone solicitations	g Special fund	draisin	g eve	nts		
d In-person solicitations						
2a Did the organization have a written or oral agreement with or key employees listed in Form 990, Part VII) or entity in b If "Yes," list the 10 highest paid individuals or entities (fundamental extensions).	connection with pro	ofessio	nal fu	indraising services?	aiser is to be	Yes No
compensated at least \$5,000 by the organization (i) Name and address of individual or entity (fundraiser)	(II) Activity	(III) Did raiser custo contri contribi	have dy or ol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes				
1						
2		-				
3		+				
4					· · · · · · · · · · · · · · · · · · ·	
5			i '			
6						
7						
8						
9						
10						
Total	<u> </u>	<u></u>				

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

7094 09/12/2017 3 41 PM Schedule G (Form 990 or 990-EZ) 2016 BOYS & GIRLS CLUB OF INDIAN 59-3623298 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000 (a) Event #1 (b) Event #2 (c) Other events (d) Total events ANGELS DINNER GOLF TOURNAMENT (add col (a) through col (c)) (total number) (event type) (event type) 145,719 19,742 551,805 1 Gross receipts 386,344 2 Less Contributions 3 Gross income (line 1 minus 19,742 386,344 145,719 551,805 line 2) 4 Cash prizes 5 Noncash prizes 6 Rent/facility costs Direct Expenses 7 Food and beverages 8 Entertainment 129,739 23,186 78,128 28,425 9 Other direct expenses 129,739 10 Direct expense summary Add lines 4 through 9 in column (d) 422,066 11 Net income summary Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming

5		(a) Billigo		bingo/progressiv	e bingo	(0) 0 11 10 1 9 11	_	col (a) through col (c))	
Revenu	1 Gross revenue								
	. 57000 10 101140		<u> </u>	-					
S	2 Cash prizes	· · · · · · · · · · · · · · · · · · ·							
Direct Expenses	3 Noncash prizes					<u> </u>			
rect E	4 Rent/facility costs						_		
D	5 Other direct expenses								
	Carler direct expenses	Yes	%	Yes	%	Yes	%		
	6 Volunteer labor	No _		No		No			
	7 Direct expense summary	Add lines 2 through 5 in	column (d)				•		
		8 Net gaming income summary: Subtract line 7 from line 1, column (d)							

 •		 	

Enter the state(s) in which the organization conducts gaming activities

Is the organization licensed to conduct gaming activities in each of these states?

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? b If "Yes," explain

	Yes		No
--	-----	--	----

b If "No," explain

30110	dulle G (Foam 990 or 990-EZ) 2016 BOYS & GIRLS CLUB OF INDIAN	59-36232	98 Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity		
	formed to administer charitable gaming?		Yes No No
13	Indicate the percentage of gaming activity conducted in	1	1
a	The organization's facility	13a	
b 14	An outside facility	135	%_
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	records		
	Name ►		
	Address ▶		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
L	revenue?		☐ Yes ☐ No
D	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ amount of gaming revenue retained by the third party ▶ \$	and the	
С	amount of gaming revenue retained by the third party \$ If "Yes," enter name and address of the third party		
•	The roof of the find dadress of the find party		
	Name ▶		
	Address ▶		
16	Gaming manager information		
	Name ►		
	Gaming manager compensation ▶ \$		
	Description of services provided ▶		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?		Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or		
	spent in the organization's own exempt activities during the tax year ▶ \$		
Pari		• • • • •	and
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any ac See instructions	iditional information	
	See instructions		

SCHEDULE M

Noncash Contributions

00

OMB No 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990

BOYS & GIRLS CLUB OF INDIAN

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

00. Inspection
Employer identification number

	RIVER COU	MTY,	INC.		59-362329	8			
_P;	art I Types of Property				-				
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amore	ınts			
1	Art — Works of art		-						
2	Art — Historical treasures						_		
3	Art — Fractional interests								
4	Books and publications				-				
5	Clothing and household								
	goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities — Publicly traded	X	1	111,595					
10	Securities — Closely held stock								
11	Securities — Partnership, LLC, or 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								
20	Drugs and medical supplies								
21 22	Taxidermy								
22 23	Historical artifacts								
23 24	Scientific specimens Archeological artifacts								
25	Other ► (· · · · · · · · · · · · · · · · · · ·				
26	Other ► (
27	Other ► (
28	Other ► (
29	Number of Forms 8283 received by the	ne organiza	tion during the tax year fo	or contributions for				-	
	which the organization completed For				29				
	-		•	•			Yes	No	
30a	During the year, did the organization i	receive by o	contribution any property	reported in Part I, lines 1 th	rough				
	28, that it must hold for at least three	years from	the date of the initial con	tribution, and which isn't red	juired				
	to be used for exempt purposes for th	e entire hol	lding period?			30a		X	
b	If "Yes," describe the arrangement in	Part II							
31	1 Does the organization have a gift acceptance policy that requires the review of any nonstandard								
	contributions?								
32a	Does the organization hire or use third	d parties or	related organizations to	solicit, process, or sell nonc	ash				
	contributions?					32a		X	
b	If "Yes," describe in Part II								
33	If the organization didn't report an am	ount in colu	ımn (c) for a type of prop	erty for which column (a) is	checked,	Ì			
	describe in Part II					<u>t</u>		<u> </u>	

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE O ...
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Name of the organization

BOYS & GIRLS CLUB OF INDIAN RIVER COUNTY, INC.

Employer identification number 59-3623298

Form 990, Part III, Line 4a - First Accomplishment

KNOWLEDGE LEARNED AT SCHOOL); POWER HOUR (WHICH GIVES MEMBERS TIME TO START, IF NOT FINISH, THEIR HOMEWORK WHILE AT THE CLUBS); THE FAMILY OF SMART PROGRAMS (WHICH FOCUS ON REDUCING EXPERIMENTATION WITH DRUGS, ALCOHOL, TOBACCO, PREMATURE SEXUAL ACTIVITY AND GANG RESISTANCE); HEALTHY HABITS (WHICH PROMOTES GOOD NUTRITION, REGULAR PHYSICAL ACTIVITY AND OVERALL WELL-BEING); AND NETSMARTZ (WHICH TEACHES YOUTH HOW TO SAFELY USE THE INTERNET). DURING THE SCHOOL YEAR WE ARE OPEN FROM WHEN SCHOOL ADJOURNS TO 6:30 P.M. DURING THE SUMMER WE ARE OPEN FROM 7:30 A.M. TO 6:30 P.M.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

A DRAFT OF THE FORM 990 IS FIRST PROVIDED TO THE FINANCE COMMITTEE FOR

REVIEW, THEN TO THE FULL BOARD FOR REVIEW WITH ALL SCHEDULES BEFORE BEING

FILED WITH THE IRS. AFTER APPROVAL BY THE BOARD, FORM 990 IS FILED WITH

THE IRS.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

ALL BOARD MEMBERS ARE REQUIRED TO ANNUALLY REVIEW AND COMPLETE THE CONFLICT

OF INTEREST QUESTIONNAIRE TO DISCLOSE ANY PREVIOUSLY UNDISCLOSED CONFLICTS

OF INTEREST. ONCE IDENTIFIED, CONFLICTS OF INTERESTS ARE ADDRESSED AS SET

FORTH IN THE ORGANIZATION'S CONFLICT OF INTEREST POLICY.

Form 990, Part VI, Line 15a - Compensation Process for Top Official
THE BOARD OF DIRECTORS OF THE ORGANIZATION RELY UPON COMPARABILITY DATA TO

Name of the organization

BOYS & GIRLS CLUB OF INDIAN

Employer identification number

59-3623298

DETERMINE AND APPROVE THE COMPENSATION OF THE EXECUTIVE DIRECTOR. जभफ BOARD OF DIRECTORS UTILIZES RESOURCES SUCH AS SIMILARLY SITUATED EXEMPT ORGANIZATIONS IN THEIR AREA TO BENCHMARK PAY ALONG WITH MARKET INFORMATION FROM OTHER EXEMPT ORGANIZATIONS AND FOR-PROFIT ORGANIZATIONS TO ASSESS THE COMPETITIVENESS AND REASONABLENESS OF THE COMPENSATION. ONCE A DECISION HAS BEEN MADE BY THE BOARD OF DIRECTORS, IT IS THEN VOTED UPON FOR APPROVAL. RECUSAL OF THE INDIVIDUALS WHOSE COMPENSATION IS BEING DETERMINED IS MANDATORY. A SIMILAR PROCESS IS USED FOR DETERMINING THE COMPENSATION OF ALL KEY EMPLOYEES.

Form 990, Part VI, Line 15b - Compensation Process for Officers THE BOARD OF DIRECTORS OF THE ORGANIZATION RELY UPON COMPARABILITY DATA TO DETERMINE AND APPROVE THE COMPENSATION OF THE EXECUTIVE DIRECTOR. BOARD OF DIRECTORS UTILIZES RESOURCES SUCH AS SIMILARLY SITUATED EXEMPT ORGANIZATIONS IN THEIR AREA TO BENCHMARK PAY ALONG WITH MARKET INFORMATION FROM OTHER EXEMPT ORGANIZATIONS AND FOR-PROFIT ORGANIZATIONS TO ASSESS THE COMPETITIVENESS AND REASONABLENESS OF THE COMPENSATION. ONCE A DECISION HAS BEEN MADE BY THE BOARD OF DIRECTORS, IT IS THEN VOTED UPON FOR APPROVAL. RECUSAL OF THE INDIVIDUALS WHOSE COMPENSATION IS BEING DETERMINED A SIMILAR PROCESS IS USED FOR DETERMINING THE COMPENSATION IS MANDATORY. OF ALL KEY EMPLOYEES.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation THE ORGANIZATION'S FORM 990, ANNUAL REPORT AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE AND AVAILABLE UPON REQUEST IN THE ADMINISTRATION OFFICE. GOVERNING DOCUMENTS AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE FOR INSPECTION IN THE ADMINISTRATION OFFICE.

Page 1 of 2

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

Page 2
Employer identification number

Name of the organization

BOYS & GIRLS CLUB OF INDIAN

59-3623298

Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation

INTERFUND TRANSFER \$ -367,513