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	E Grant Co.		nefly describe t	he organiz	ation's missic	on or most sign	nifican	activities	THE MISSIO	N OF T	HE CLUBS	S IS T	O ENABLE AND	
>	e e							H THEIR FUL					ESPONSIBLE AND	
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5	30	1		_	•			rations or dispos		1 25% of its	s net assets	. 3		
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	Activities &							(Part V, line 2a)				. 5	89	_
	ξ		otal number of			-	20.0					. 6		<u></u>
	Ă	1	otal unrelated b		•		ın (C),	line 12	<i></i> .			. 7a		<u> </u>
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ä	4	1	contributions an							· · ·		3,159	1,110,28	
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2	Asse Ball		otal liabilities (P	-	•		မြို့	NOV 0.5	2020 0			7,211	73,89	
	Net Assets or Fund Balances		let assets or fur			ne 21 from line	e 20		<u>]</u> <u>Œ</u>			6,289	523,68	
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Steamboat Springs CO 80477

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

For Paperwork Reduction Act Notice, see the separate instructions.



No

Form 990 (2019)

	rt III 4 Statement of Program Service Accomplishments	
•	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission.	
	THE MISSION OF THE CLUBS IS TO ENABLE AND INSPIRE THE YOUTH OF OUR AREA TO REACH THE	IR FUL
	POTENTIAL AS PRODUCTIVE, RESPONSIBLE AND CARING CITIZENS. THE CLUBS OFFERS CORE PRODUCTIVE	
	DESIGNED TO ENGAGE YOUTH WITH PEERS AND CARING ADULTS TO ENHANCE SELF-ESTEEM AND LIFT	
2	Did the organization undertake any significant program services during the year which were not listed on the	
-	prior Form 990 or 990-EZ?	es 🗓
3	If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	es 🗶 1
_	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a	(Code.) (Expenses \$ 1,009,037 including grants of \$) (Revenue \$	
-	THE BOYS & GIRLS CLUBS OF NORTHWEST COLORADO'S MISSION IS TO ENABLE AND INSPIRE THE	YOUNG
	OF NORTHWEST COLORADO TO REALIZE THEIR FULL POTENTIAL AS PROUCTIVE, RESPONSIBLE AND	
	CITIZENS. THE CLUBS ARE YOUTH DEVELOPMENT ORGANIZATION DEDICATED TO PROMOTING HEALTH	
	EDUCATION, VOCATIONAL AND CHARACTER DEVELOPMENT OF BOYS AND GIRLS. THE CLUBS' GOAL IS	
	YOUNG PEOPLE IMPROVE THEIR LIVES BY BUILDING SELF ESTEEM AND DEVELOPING VALUES AND SI	KILLS
	CRITICAL PERIODS OF GROWTH.	
		,
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$	
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4c		

Part IV ? **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 X 2 2 Is the organization required to complete Schedule B. Schedule of Contributors (see instructions)?........ Х Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 3 X Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 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 98-197 If "Yes," complete Schedule C, Part III 5 Х 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 6 Х 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." 8 8 Х q Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 9 Х Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V 10 Х 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D. Parts VI. VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," 11a b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more 11b Х c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more 11c Х d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets 11d Х e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Х Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f Х 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a Х 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 Х 13 13 Х 14a 14a X Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b Х 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 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 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 17 Х 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 Х 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 Х 20a Х b 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

Form 990 (2019) BOYS & GIRLS CLUB OF NORTHWEST COLO 75-3124416 Page 4 Checklist of Required Schedules (continued) Part IV Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on 22 Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III X Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated 23 Х Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than 24a \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b 24a through 24d and complete Schedule K If "No," go to line 25a..................... Х 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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 vear, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 25b Х Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 26 Х Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key 27 employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 Х Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part 28 IV instructions, for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 28a 28b x A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 32 X Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 33 х Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 34 x 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 X 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 Dativ Statements Regarding Other IRS Filings and Tax Compliance

<u> </u>	Check if Schedule O contains a response or note to any line in this Part V		<u></u>	<u></u>		
					Yes	N
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	:	2		
	Enter the number of Form W-2G included in line 1a Enter -0- if not applicable)		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and					

reportable gaming (gambling) winnings to prize winners?

. 1c X

Part V

Statements Regarding Other IRS Filings and Tax Compliance (continued) Yes No Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 89 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?.......... 2b x Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions). ₹. 4. Did the organization have unrelated business gross income of \$1,000 or more during the year?....... 3a 3a X If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule Q 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a If "Yes." enter the name of the foreign country h See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b Х C 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the 6a organization solicit any contributions that were not tax deductible as chantable contributions? 6a Х If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b 7 Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 7a x If "Yes," did the organization notify the donor of the value of the goods or services provided? b 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was c 7с X d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7е x 7f f x If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?..... g 7g Х h 7h X 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 9 Sponsoring organizations maintaining donor advised funds. а 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter: 10 а b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter. 11 b Gross income from other sources (Do not net amounts due or paid to other sources 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? . . . 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. 13 Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which 13b c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule Q 14b 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 Х If "Yes," see instructions and file Form 4720, Schedule N 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . . . 16 ¥ If "Yes," complete Form 4720, Schedule O

Partivili 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

	Charle of Cabadula C contains a second of a potential on the Bort VI	•		X
<u> </u>	Check if Schedule O contains a response or note to any line in this Part VI	<u>· · · · </u>	• • •	. 🕰
Sec	tion A. Governing Body and Management		<u>, </u>	
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or		12.14	~ · ·
	if the governing body delegated broad authority to an executive committee or similar	1	'	' t
	committee, explain on Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			.
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	[- -		
	any other officer, director, trustee, or key employee?	2		X
3	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?	3		_ X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	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?	6		X
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
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
•	the year by the following:	٠.		٠ :
а	The governing body?	8a	x	/
b	Each committee with authority to act on behalf of the governing body?	8b	x	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
3	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sac	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)	· · ·	L	
000	ALOH D. Folicies This Section B requests information about policies not required by the internal revenue code y		Yes	No
100	Did the organization have local chapters, branches, or affiliates?	10a	103	X
10a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	104		
Ь		10b		
44-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	11a	х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	I Ia	^	· .ş
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	42-		
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	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	<u> </u>	
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?			نــــا
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	}		'
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			_
	with a taxable entity during the year?	16a		<u> </u>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its		-	į
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	,	:	<u> </u>
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)			
-	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website Don request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
. •	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	The state of the s			

ORGANIZATION (970)826-0411, PO BOX 1251, CRAIG, CO 81625

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Page 7

Part VIII 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

See instructions for the order in which to list the persons above

Check this box if neither the organization nor any rela	ted organizat	ion co	mper	nsate	ed a	ny cun	rent	officer, director, or	trustee	
					(C)					
(4)	/B)			Pos	sition			(D)	(E)	(5)
(A)	(B)					nan one		Reportable	(E) Reportable	(F) Estimated amount
Name and title	Average hours					s both ar /trustee)		compensation	compensation	of other
	per week					,		from the	from related	compensation
	(list any	9 5	3	g	2	g <u> </u>	고	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and
	hours for	or director	St Line	Officer	y en	nplo)	Former	(W-2/1099-WIGC)	(11 27 1000 111100)	related organizations
	related organizations	ndividual trust or director	nstitutional trus	İ	Key employee	6 8 1	آ			
	below	rustee	rus		è	npei				
	dotted line)	ñ	tee			Highest compensated employee				
						4				
(1) VICKY HANNA										
PAST PRESIDENT		х			_			0	0	0_
(2) CATHERINE BLEVINS										
MEMBER		Х						0	0	0
(3) BRYAN LUDGATE										
SECRETARY		Х		х				0	0	0
(4) LES KAPLAN						1				\
PRESIDENT		х		X				0	0	0
(5) LUKE TUCKER										
TREASURER		Х		х				0	0	0
(6) JIM BRONNER	L									
MEMBER		Х						0	0	0
(7) JIM DODD						1				
VICE-PRESIDENT	<u> </u>	x]	0	0	0
(8) LYNN_EARNEST_	ļ					ŀ	ı			
MEMBER		х						0	0	0
(9) KIM KREISSIG	ļ									
MEMBER		х						0	0_	0
(10)SUSAN_LARSON_										
MEMBER		х	\Box					0	0	0
(11) CHRIS NICHOLS	L									
MEMBER		x					_	0	0	0
(12)JAY OXLEY	L				ļ					
MEMBER		х			\Box			0	0	0
(13)JENNIFER BARKEY	L									
MEMBER		х						0	0	0
(14)EILEEN DIAMOND	L									
MEMBER	<u> </u>	х						0	0	0

		90 (2019) BOYS & GIRLS CLUB	OF NORT	HWES	T	COL	<u> </u>				75-3	12441	6	Р	age 8
Complete Scheduler Complet	Part	VII Section A. Officers, Directors, Trustee	s, Key Emp	loyee	s, ar	nd H	ligh	est Co	mp	ensated Employe	es (continued)				
(15)LINDA_LUND MEMBER X	,		Average hours per week	box	, unles er and	Pos eck m ss per d a di	sition nore the rson is rector	s both a		Reportable compensation from the organization	Reportable compensation from related organizations		com; fro	ted am of other pensati om the	ton
NEMBER			related organizations below	director	stitutional trustee	ficer	y employee	ghest compensated nployee	rmer	(**27 1033-111100)	(W-2 1033-MIGG)	- 1	_		
MEMBER X 0 0 0 0 0 0 0 0 0				х				·		0		0			0
NEMBER		·		х						0		0			0
MEMBER				x						0		0			0
MEMBER X 0 0 0 0 0 0 0 0 0				х						0		0			0
EXEC DIRECTOR (21) (22) (23) (24) (25) 1b Subtotal c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 X Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C)				х						0		0			0
(23) (24) (25)			40.00			х				0		0			0
(24) (25) 1b Subtotal	(21)														
(24) (25)	(22)		- -												
1b Subtotal c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 X Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C)	(23)														
1b Subtotal c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 0 0 0 0 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C)	(24)													-	
Total (add lines 1b and 1c)	(25)														
d Total (add lines 1b and 1c)			ion A						· *						
reportable compensation from the organization Yes No	d	Total (add lines 1b and 1c)	<u> </u>								·	0			0
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C)	2			isted a	bove	e) wr	no re	eceive	d mo	ore than \$100,000	of				0
employee on line 1a? If "Yes," complete Schedule J for such individual		- top-												Yes	No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	3			-				_				-	<u>-</u> -	1	ر ا
organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such Individual	4											· · -	3		Х
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	-											<u> </u>			
for services rendered to the organization? If "Yes," complete Schedule J for such person												· · _	4		<u>x</u> _
Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C)	5												-	-	, V
Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C)	Section		, complete	Scried	uie c	101	300	n pers	OH		· · · · · · · · ·		<u> </u>	1	
(A) (B) (C)			ted independ	lent co	ntrac	ctors	that	recer	ved i	more than \$100,00	10 of				
		compensation from the organization. Report comp	ensation for	the cal	enda	ar ye	ar e	ndıng	with	or within the organ	nization's tax ye	ar			
Name and business address Description of Services Compensation			•								05	Com		100	
		Name and business address	<u> </u>						-	Description of Service	65		репзи		
			_							 					
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶	2	·	_				ted a	above)	who)	1			· ·	- '

Page 9

Part VIII

Statement of Revenue

		Check if Schedule O contains a response or	note to any line in th	ıs Part VIII			
•				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	1a	Federated campaigns 1a	30,500	er i gradi Hilar	er ibles starte fill		4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
ر. د د	b	Membership dues			·		10 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
anta	c	Fundraising events	392,080	,			1 1
פֿ פֿ	d						
ifts ar A	l e	Government grants (contributions) 16	75,680	, , ,			,
ន ម	l f	All other contributions, gifts, grants,			2 2	the toron to contra	And some in the con-
ië is Si		and similar amounts not included above 11	612,023		1		, , , , , ,
ij đ	g	Noncash contributions included in				***	· · · · · · · · · · · · · · · · · · ·
Contributions Gifts, Grants and Other Simlar Amounts	"	!	\$ 74,175		,		'
Q #	l h			1,110,283			
			Business Code	0,000,000			
	2a	PROGRAM INCOME	611710	105,488	105,488		
je Je		MISC INCOME	611710	3,599	3,599		
Program Service Revenue	_ c						
E Š	d						
జ్ఞ	e		-				
5 S	f	All other program service revenue		<u> </u>			
	1	Total. Add lines 2a-2f		109,087			,
	3	Investment income (including dividends, interest other similar amounts)	, and ▶	2,045	2,045		
	4	Income from investment of tax-exempt bond pro					
	5	Royalties			ما تاك المناورين و مرد والكارون والمالية والكام والمناطقة الكام المناطقة الكام الكام المناطقة الكام ال	THE PERSON THE TANKS THE TOTAL PROPERTY.	,
		(i) Roal	(ii) Personal		1 H ₁ , 1	00 y 4 y	
	1	Gross rents 6a			•	,	
	1	Less rental expenses 6b			-		
		Rental income or (loss) [6c]			**************************************		
	d	Net rental income or (loss)	.				····
	7a	Gross amount from (i) Secunties	(II) Other	, ,	1 ,		
	L .	other than inventory Less: cost or other basis				* `	
哥		and sales expenses 7b				411961 19	
Revenue	С	Gain or (loss) 7c			,		· · · · · · · · · · · · · · · · · · ·
Ş.	d	Net gain or (loss)					
ē		Gross income from fundraising					
ᅙ	İ	events (not including \$ 392,080					
		of contributions reported on line					
			a 17,295				
	b		b 42,037				•
	1			(24,742)			(24,742)
	1	Gross income from gaming					
		activities, See Part IV, line 19 9	a		r		;
	Ь	F	ь				, ,
		N1.4			,		
		Gross sales of inventory, less					
	.04	returns and allowances)a				
	ь	Less cost of goods sold	~~~~		'	- 2 . (٠, ٠, ٠, ٠, ٠, ٠, ٠, ٠, ٠, ٠, ٠, ٠, ٠, ٠
	1	Net income or (loss) from sales of inventory .					`
		- Verring State St	Business Code	:1	· · · · · ·		٠ , (
द	11a						
<u> 5</u> 9	ь	A.L.					
ella ven	C						·······
Miscellanous Revenue		All other revenue		` .			
Σ	1	Total. Add lines 11a-11d				* ,* .)	.,
		Total revenue. See instructions		1,196,673	111,132	0	(24,742)

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

Statement of Functional Expenses

Check if Schedule O contains a response or note to any line in this Part IX (C) (D) (A) (B) Do not include amounts reported on lines 6b, 7b, Total expenses Program service Management and Fundraising 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations 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 Compensation of current officers, directors, trustees, and key employees 81,924 20,481 20,481 40,962 Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 655,812 581,712 40,892 33,208 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 7,235 4,462 1,544 1,229 9 50,105 42,328 3,215 4,562 10 73,505 59,980 6,101 7,424 Fees for services (nonemployees) 11 405 405 26,530 21,574 2,236 2,720 Professional fundraising services See Part IV, line 17 . e Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 8,233 8,233 12 756 13 7,483 6,106 621 274 14 3,300 2,693 333 15 16 Occupancy 97,459 90,215 3,831 3,413 17 6,410 6,410 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23,458 23,458 23 18,323 14,951 1,521 1,851 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 4,656 ANNUAL CAMPAIGN 4,656 99,740 PROGRAM EXPENSES 99,740 C DUES/FEES 19,107 18,425 682 OTHER EXPENSE 8,631 7,864 413 354 All other expenses Total functional expenses. Add lines 1 through 24e. 1,192,316 81,811 101,468 1,009,037 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here. - If following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

	<u> </u>	Check if Schedule O contains a response or note to any	/ line in	this Part X			<u> </u>
					(A)		(B)
			_		Beginning of year		End of year
	1	Cash - non-interest-bearing			258,906	1	245,843
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			49,150	3	132,053
	4	Accounts receivable, net			9,331	4	10,101
	5	Loans and other receivables from any current or former	officer,	director,			• _
		trustee, key employee, creator or founder, substantial co	ntribute	or, or 35%			
		controlled entity or family member of any of these perso	ns .			5	
	6	Loans and other receivables from other disqualified pers	ons (as	defined			
		under section 4958(f)(1)), and persons described in sec	tion 49	58(c)(3)(B)		6	
10	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			-	8	
As	9	Prepaid expenses and deferred charges		. <i>.</i>	6,843	9	120
	10a	Land, buildings, and equipment cost or other					
		basis Complete Part VI of Schedule D	10a	419,875			
	ь	Less. accumulated depreciation			172,993	10c	163,829
	11	Investments - publicly traded secunties			56,277	11	45,632
	12	Investments - other securities See Part IV, line 11 .		}	30,211	12	43,032
	13	Investments - program-related See Part IV, line 11 .		- t		13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equal line 3	553,500	16	597,578		
	17	Accounts payable and accrued expenses		37,211	17	73,893	
	18	Grants payable	37,211	18	/3,693		
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		F		20	
	21	Escrow or custodial account liability Complete Part IV o		F		21	
v,	22	Loans and other payables to any current or former office			,		
Liabilities		trustee, key employee, creator or founder, substantial coi		ľ	:		•
abil		controlled entity or family member of any of these person				22	-
ڌ	23	Secured mortgages and notes payable to unrelated thin		- F		22	
	24	Unsecured notes and loans payable to unrelated third p	•	F		24	
	25	Other liabilities (including federal income tax, payables to		F		24	
	23	parties, and other liabilities not included on lines 17-24)					
		of Schedule D	•			25	
	26	Total liabilities. Add lines 17 through 25			35.011	25 26	
	20	Organizations that follow FASB ASC 958, check here		<u>x</u>	37,211	26	73,893
		and complete lines 27, 28, 32, and 33.	•	₩.			•
ses	27						
<u>a</u>	28				516,289	27	523,685
Ba	20					28	
물		Organizations that do not follow FASB ASC 958, che	ск пет	₽ ▶ 📙			
Ē	20	and complete lines 29 through 33.					-
S o	29 20	Capital stock or trust principal, or current funds) -		29	***	
Net Assets or Fund Balances	30 24	Paid-in or capital surplus, or land, building, or equipment			30		
T A	31	Retained earnings, endowment, accumulated income, or	<u> </u>		31		
ž	32	Total net assets or fund balances		-	516,289	32	523,685
	33	Total liabilities and net assets/fund balances			553,500	33	597,578

Form	1990 (2019) BOYS & GIRLS CLUB OF NORTHWEST COLO 7	<u>5-31244</u>	16	F	age 12
Pa	rt 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,	196	,673
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,	192	,316
3	Revenue less expenses Subtract line 2 from line 1	3		4	,357
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		516	,289
5	Net unrealized gains (losses) on investments	5		3	,039
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 on Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	_32, column (B))	10		523	,685
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 🗵 Accrual 📗 Other				1
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		1		1
	reviewed on a separate basis, consolidated basis, or both				-
	Separate basis Consolidated basis Both consolidated and separate basis			l	
b	Were the organization's financial statements audited by an independent accountant?		. 2b	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				1
	▼ Separate basis □ Consolidated basis □ Both consolidated and separate basis □ Consolidated basis □ Consolid		J	١. ١	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		. 2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Single Audit Act and OMB Circular A-133?		. 3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>	. 3b		
EEA			Form	990	(2019)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2019

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Employer identification number Name of the organization 75-3124416 BOYS & GIRLS CLUB OF NORTHWEST COLO Reason for Public Charity Status (All organizations must complete this part) See instructions. The organization is not a private foundation because it is (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes 12 of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b 📙 Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations

(i) Name of supported organization	(II) EIN	(III) Type of organization (described on lines 1-10 above (see instructions))	1 ' '	organization ur governing nent?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total				<u> </u>		· · · · · · · · ·

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

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

<u> 26</u>	ction A. Public Support						
Cal	endar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not		ļ				
	include any "unusual grants.")	857,082	975,270	957,648	973,159	1,110,283	4,873,442
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						
4	Total. Add lines 1 through 3	857,082	975,270	957,648	973,159	1,110,283	4,873,442
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on		·				
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)		_			-	797,027
	Public support. Subtract line 5 from line 4					•	4,076,415
Sec	ction B. Total Support						
Cal	endar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	857,082	975,270	957,648	973,159	1,110,283	4,873,442
8	Gross income from interest, dividends,						1
	payments received on securities loans,						3
	rents, royalties and income from	1			ļ		
	similar sources	1,478	1,616	1,583	4,056	2,045	10,778
9	Net income from unrelated business						
	activities, whether or not the business		1				
	is regularly carried on						
10	Other income Do not include gain or						3
	loss from the sale of capital assets]				`
	(Explain in Part VI.)						
11	Total support. Add lines 7 through 10			,			4,884,220
12	Gross receipts from related activities, etc. (se	ee instructions)			[12	
13	First five years. If the Form 990 is for the or						
	organization, check this box and stop here	<u> </u>	<u></u>				<u></u> . ▶□
	ction C. Computation of Public Suppor	t Percentage					
	Public support percentage for 2019 (line 6, c					14	83.46 %
	Public support percentage from 2018 Schedu					15	83.99 %
16a	33 1/3% support test - 2019. If the organiza						
	box and stop here. The organization qualifie	s as a publicly	supported orga	anization			▶ 🕱
b	33 1/3% support test - 2018. If the organiza						
	this box and stop here. The organization qua	alifies as a publ	icly supported	organization .			▶ □
17a	10%-facts-and-circumstances test - 2019.	If the organizat	ion did not che	ck a box on lir	ne 13, 16a, or ¹	16b, and line 14	IS
	10% or more, and if the organization meets t	he "facts-and-c	ircumstances"	test, check this	s box and stop	here. Explain	in
	Part VI how the organization meets the "facts						
	organization						· · · · □
b	10%-facts-and-circumstances test - 2018.						ne
	15 is 10% or more, and if the organization me	eets the "facts-a	and-circumstar	nces" test, che	ck this box and	stop here.	
	Explain in Part VI how the organization meets						cly
	supported organization						▶ □
	Private foundation. If the organization did no						_
	instructions						▶ □

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.)

<u>Sec</u>	ction A. Public Support						
Cal	endar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities fumished 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				İ		
	organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
h	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						•
_	Add lines 7a and 7b						
	Public support. (Subtract line 7c from					,	
•	line 6.)	1 *		,	`		
Sec	ction B. Total Support	<u> </u>	·	L			L,,,
	endar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6	(u) 2010	(5) 2010	(6) 2017	(4) 2010	(6) 2013	(i) Total
_	Gross income from interest, dividends,						
ıva	payments received on secunties loans, rents,					•	
	royalties, and income from similar sources						
h	Unrelated business taxable income (less						
D	•						
	section 511 taxes) from businesses acquired after June 30, 1975						
_	Add lines 10a and 10b	<u></u>					
		ļ- 					
11	Net income from unrelated business	1					
	activities not included in line 10b, whether						
40	or not the business is regularly carried on						
12	Other income. Do not include gain or]
	loss from the sale of capital assets						İ
12	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
4.4	and 12.)			-1 645 66	U- 4	504/	- \(0\)
14	First five years. If the Form 990 is for the or	-			•	•	
<u></u>	organization, check this box and stop here			· · · · · · · ·	• • • • • • •	· · · · · · · · ·	· · · · · · · · · ·
	Public support percentage for 2010 (line 8)			ooluma (f))		45	
	Public support percentage for 2019 (line 8, c					15	<u>%</u>
	Public support percentage from 2018 Sched				· · · · · · · · · · · · · · · · · · ·	16	<u>%</u>
_	tion D. Computation of Investment In			no 10	(£)\	47	
	Investment income percentage for 2019 (line					17	<u>%</u>
	Investment income percentage from 2018 Sc					18	<u>%</u>
19a	33 1/3% support tests - 2019. If the organiz						_
	17 is not more than 33 1/3%, check this box						
þ	33 1/3% support tests - 2018. If the organiz						
••	line 18 is not more than 33 1/3%, check this						
20	Private foundation. If the organization did r	ot check a box	on line 14, 19	a, or 19b, chec	k this box and	see instructio	ns ▶ 📙

Part IV Supporting Organizations

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

Sect	ion A.	All Sup	porting	Organizations
------	--------	---------	---------	----------------------

1	Are all of the organization's supported organizations listed by name in the organization's governing
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by
	class or purpose, describe the designation. If historic and continuing relationship, explain.
2	Did the organization have any supported organization that does not have an IRS determination of status

under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).

3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.

b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.

c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.

4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below

b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.

c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.

5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (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)

b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?

c Substitutions only. Was the substitution the result of an event beyond the organization's control?

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.

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

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)

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.

b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.

c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
			1
	1	- "	
			,
	2		
	3a		
	3b		-
			·
	3с		
	4a		
	4b		,
	40		
		•	
	4c		
		_	
	5a		
	5b		,
	5c	-	;
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	8		!
	0-		
	9a		
	9b		-'
	9c		
			1
	10a		
	10b	- ***	-
A /Eo	aan	or 990-F	EZ) 2019

Pa	rt IV Supporting Organizations (continued)		· · · · · ·	
•			Yes	No
	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)		4	
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
Sec	tion B. Type I Supporting Organizations			
_	Did the directors, trustees, or membership of one or more supported organizations have the power to		Yes	No
1				
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion 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	_	
Sec	tion 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			<u> </u>
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2				
	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)			
3	By reason of the relationship described in (2), did the organization's supported organizations have a	2		
	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	, i	
Sec	tion E. Type III Functionally Integrated Supporting Organizations		L	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	nstruc	tions)).
	☐ The organization satisfied the Activities Test Complete line 2 below		•	
k	The state of the s			
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity	(see in	struci	tions)
2		'	Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		- "
ŀ	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
•	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		,
3	Parent of Supported Organizations. Answer (a) and (b) below.			
J				
Č	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a	-	
L	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
Ĺ	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
	or to supported organizations: it is too, accombe in rest writte follopidated by the organization in this regard.		1	

Type III Non-Functionally Integrated 509(a)(3) Supporting Or Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organization.	trust	on Nov. 20, 1970 (explain	
Section A - Adjusted Net Income	Zalio	(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		. ,	1
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
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	,	
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6	•	
7 Check here if the current year is the organization's first as a non-functionally instructions)	integ	rated Type III supporting o	rganization (see

Schedule (Form 990 or 990 E2) 2019 BOYS & GRILS CLUB OF NORTHWEST COLO 75-3124416 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)) Itable
Section D - Distributions 1 Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required) 6 Other distributions (describe in Part VI). See instructions 7 Total annual distributions. Add lines 1 through 6. 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions 9 Distributable amount for 2019 from Section C, line 6 10 Line 8 amount divided by line 9 amount Section E - Distribution Allocations (see instructions) 1 Distributable amount for 2019 from Section C, line 6 2 Underdistributions, if any, for years prior to 2019 (reasonable cause required - explain in Part VI). See instructions 3 Excess distributions carryover, if any, to 2019 a From 2014 b From 2015 c From 2016 c From 2016 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 that applied (see instructions) j Remander. Subtract lines 3g, 3h, and 3i from 3f) Itable
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e From 2018	
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g Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from 3f	
h Applied to 2019 distributable amount i Carryover from 2014 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from 3f	
i Carryover from 2014 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from 3f	
j Remainder. Subtract lines 3g, 3h, and 3i from 3f	
4 Distributions for 2019 from	
Section D, line 7: \$	
a Applied to underdistributions of prior years	
b Applied to 2019 distributable amount	
c Remainder. Subtract lines 4a and 4b from 4	
5 Remaining underdistributions for years prior to 2019, if	
any. Subtract lines 3g and 4a from line 2 For result	
greater than zero, explain in Part VI See instructions	
6 Remaining underdistributions for 2019. Subtract lines 3h	
and 4b from line 1. For result greater than zero, explain in	
Part VI. See instructions.	
7 Excess distributions carryover to 2020 Add lines 3	
and 4c	
8 Breakdown of line 7:	
- Fusing from 2045	
b Excess from 2016	
- Fire-on from 2047	
d Excess from 2018	

chedule A (Form	990 or 990-EZ) 2019 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; Part
Fait VI	
•	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.)
	ines 2, 6, and 6. Also complete this part for any additional information. (See instructions.)
-	

'SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2019

Open to Public Inspection

Name	of the organization		Em	ployer identification number
BOY	S & GIRLS CLUB_OF NORTHWEST COLO			75-3124416
Pa	t I Organizations Maintaining Donor Advised Fu	unds or Other Similar	Funds or Account	ts.
	Complete if the organization answered "Yes" on	Form 990, Part IV, lin	e 6	
		(a) Donor advis	ed funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	riting that the assets held	in donor advised	
•	funds are the organization's property, subject to the organizati			
6	Did the organization inform all grantees, donors, and donor ad			
-	only for charitable purposes and not for the benefit of the dono			
	conferring impermissible private benefit?			
Pa	t II Conservation Easements.	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
	Complete if the organization answered "Yes" o	n Form 990. Part IV. li	ne 7.	
1	Purpose(s) of conservation easements held by the organization			
•	Preservation of land for public use (e.g., recreation or edu		Preservation of a h	iistorically important land area
	Protection of natural habitat	[_	ertified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified	Loosenvation contribution	oun the form of a conse	ryation
-	easement on the last day of the tax year	CONSCIVATION CONTINUETO	THE TOTAL COLOR	
а				Held at the End of the Tax Year
b	Total acreage restricted by conservation easements			2b
	Number of conservation easements on a certified historic structure.			2c
ب 2				20
d	Number of conservation easements included in (c) acquired a			2d
2	<u> </u>			L
3	Number of conservation easements modified, transferred, rele	ased, extinguished, or ter	minated by the organiz	ation during the
4	tax year Number of states where presents subject to consequences	amont is located.		
4	Number of states where property subject to conservation ease		handling of	
5	Does the organization have a written policy regarding the period violations, and enforcement of the conservation easements it has been expected as a second conservation of the conservation easements.			
e	·			
6	Staff and volunteer hours devoted to monitoring, inspecting, ha	riuling of violations, and e	Thoromy conservation e	sasements during the year
7	Amount of expenses incurred in monitoring, inspecting, handlin	and and and and	nna conconvation coso	month during the year
7	- · · · -	ig of violations, and emon	sing conservation ease	inerits during the year
	Page and appropriate accompation and as the 2(d) show	a antinfictha requirements	of control 170/h\/4\/P\	V-V
8	Does each conservation easement reported on line 2(d) above	•	, ,, ,, ,	```
_	and section 170(h)(4)(B)(ii)?			-
9	In Part XIII, describe how the organization reports conservation			
	balance sheet, and include, if applicable, the text of the footnot	e to the organizations line	anciai statements that d	escribes the
Da	organization's accounting for conservation easements t III Organizations Maintaining Collections	of Art Historical T	reasures or Othe	or Similar Assats
Га	Complete if the organization answered "Yes" of			er Sillilai Assets.
				no chast wade
1a	If the organization elected, as permitted under FASB ASC 958			
	of art, historical treasures, or other similar assets held for publi			e of public
	service, provide, in Part XIII the text of the footnote to its finan-			alanak wasalian af
b	If the organization elected, as permitted under FASB ASC 958	•		
	art, historical treasures, or other similar assets held for public e	exhibition, education, or re	search in furtherance of	or 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 treas		- ·	rovide the
	following amounts required to be reported under FASB ASC 9	-		_
а	Revenue included on Form 990, Part VIII, line 1			
b	Assets included in Form 990, Part X			▶ \$

	ule D (Form 990) 2019 BOYS & GIRLS CI	LUB OF NORTHW	EST COL	10			75-31244	116	P	age z
Pa	rt III Organizations Maintaining	Collections of	Art, His	torical 1	<u> Freasures, c</u>	or Ot	her Similar Ass	sets (co	ontini	ued)
3	Using the organization's acquisition, accession	n, and other records,	check any	of the foll	owing that make	e signif	ficant use of its			
	collection items (check all that apply)									
a	Public exhibition		d	Loan	or exchange pr	ogram	s			
b	Scholarly research		е	Other	-					
С	Preservation for future generations									•
4	Provide a description of the organization's col	lections and explain	how they f	urther the	organization's e	xempt	purpose in Part			
	XIII		,		Ü	•	•			
5	During the year, did the organization solicit or	receive donations of	art histori	cal treasur	es or other sim	ular				
•	assets to be sold to raise funds rather than to							☐ Yes	. \sqcap	No
Pai	rt IV Escrow and Custodial Arra			garazanor	. o oniconorii .		· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u>' </u>	
	Complete if the organization a		on Form	990 Pa	art IV. line 9.	or re	ported an amoi	int on F	orm	
	990, Part X, line 21.				, ,				•	
1a	Is the organization an agent, trustee, custodiar	n or other intermedia	ry for contr	ibutions or	other assets n	ot .				
•••	-		-					. 🗌 Yes	. \sqcap	No
b	If "Yes," explain the arrangement in Part XIII a									
-		2,10 0011 plotts 1110 10111	9				Amo	unt		
С	Beginning balance					1c				
d						1d	 			
e						1e				
f	Ending balance					1f	 			
и 2а	Did the organization include an amount on For					· —		□ Von	$\overline{}$	No
									_	NO
b Da	If "Yes," explain the arrangement in Part XIII rt V Endowment Funds.	Check here if the exp	pianationn	as been pr	Ovided on Fait	<u> </u>	·····	· · · · ·		
LIA	Complete if the organization a	answered "Ves"	on Form	aan Pa	art IV line 10)				
	Complete if the organization is	(a) Current year	(b) Pri		(c) Two years ba	T	(d) Three years back	(e) Four	aara b	
1-	Beginning of year balance	(a) Current year	(0) Fi	oi year	(c) Two years us	JUK	(d) Three years back	(e) rour	years b	dck
1a					 		·	 		
b	Contributions		·	_	 			-		
C	Net investment earnings, gains, and									
	losses							<u> </u>		
d	Grants or scholarships		-							
е	Other expenditures for facilities and		}		Ì					
_	programs		-				 _			
ī	Administrative expenses		-							
g	End of year balance		<u> </u>					<u> </u>		
2	Provide the estimated percentage of the current	•	(line 1g, co	olumn (a))	held as					
а	Board designated or quasi-endowment	 %								
b	Permanent endowment ▶ %	6								
С	Term endowment • %									
	The percentages on lines 2a, 2b, and 2c shoul									
3a	Are there endowment funds not in the posses	sion of the organizat	ion that are	e held and	administered fo	r the		Г		
	organization by								Yes	No
	-							3a(i)		
	(11)							3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization	•						3b		
4	Describe in Part XIII the intended uses of the		vment fund	is						
Pai	t VI Land, Buildings, and Equip		_			_				_
	Complete if the organization a	answered "Yes"	on Form	990, Pa	art IV, line 11	la. Se	ee Form 990, Pa	art X, lır	<u>1e 10</u>	<u>). </u>
	Description of property	(a) Cost or other		l ''	r other basis		Accumulated	(d) Book	. value	
		(investme	ent)	(4	other)	de	preciation			
1a	Land									
b	Buildings									
C	Leasehold improvements				353,198		210,116	1	43,0	82
d	Equipment				29,177		16,930		12,2	247
е	Other	a.			37,500		29,000			500

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

163,829

Schedule D (Form 990) 2019 BOYS & GIRLS CLUB OF NORTHW	EST COLO	75-3124416	Page 3
Part VII Investments - Other Securities.		5 5 000 5	
Complete if the organization answered "Yes" on For	m 990, Part IV, line	11b See Form 990, Part X,	line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market v	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
<u>(F)</u>			
(G)	ļ 		
(H)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶			
Part VIII Investments - Program Related. Complete if the organization answered "Yes" on For	m 990, Part IV, line	11c. See Form 990, Part X,	line 13
(a) Description of investment	(b) Book value	(c) Method of valuation	1
(1)	 	Cost or end-of-year market v	raitre
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13) ▶		·	
Part IX Other Assets.			
Complete if the organization answered "Yes" on For	m 990, Part IV, line	11d See Form 990, Part X,	line 15
(a) Description		(b) Bo	ok value
(1)	<u> </u>		
(2)			
(3)		_	
(4)	· · · · · · · · · · · · · · · · · · ·		
(5)		-	
(6)			
(7)			_
(8)			
(9)	·		
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)			
Part X Other Liabilities. Complete if the organization answered "Yes" on For	m 000 Part IV lina	110 or 11f Soc Form 000 F	Dart V
	in 990, Fait IV, line	The of Thi. See Form 990, F	ait A,
line 25.			
1. (a) Description of liability (b) Book (1) Federal income taxes	/alue		
		•	
(2)		•	
(3)			•
(4) (5)			
(6)		•	•
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25).	-		
2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to	the organization's finance	ial statements that reports the	
organization's liability for uncertain tax positions under FASB ASC 740 Check here		•	
organizations liability for diffectant tax positions diffed 1 AOD AOO 140. Check there	in the text of the loothole	nas seen provided in Fart Aill	· · · · <u> </u>

Sched	ule D (Form 990) 2019 BOYS & GIRLS CLUB OF NORTHWEST COLO	75-3124	416 Page 4
	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue p		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1,	Total revenue, gains, and other support per audited financial statements	1	1,265,762
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	. . '	
a	Net unrealized gains (losses) on investments	<u>'</u>	
b	Donated services and use of facilities	<u>'- </u>	
C	Recoveries of prior year grants	-	
d	Other (Describe in Part XIII)		69,089
e	Subtract line 2e from line 1	3	1,196,673
3 4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	-	1,130,073
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII)	-	
c	Add lines 4a and 4b	- 4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		1,196,673
	rt XII Reconciliation of Expenses per Audited Financial Statements With Expense		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	-	
1	Total expenses and losses per audited financial statements	1	1,258,366
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	,	
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII)		
е	Add lines 2a through 2d	2e	66,050
3	Subtract line 2e from line 1	3	1,192,316
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	_	
b	Other (Describe in Part XIII)	_	
С	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,192,316
Pa	rt XIII Supplemental Information.		
	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4 art XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information	, Fait A, IIII	
		-	

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.

► Attach to Form 990 or Form 990-EZ.

2019

Department of the Treasury Internal Revenue Service

▶ Go to www irs.gov/Form990 for instructions and the latest information

Open to Public Inspection

OMB No 1545-0047

ame of the organization						Employer ide	ntification number	
OYS & GIRLS CLUB OF NORTHWEST COLO						75-3124416		
Part I Fundraising Activities.	Complete if t	_		wered "Yes" on	Form 99	0, Part IV	line 17	
Form 990-EZ filers are not				han Charle all that a				
1 Indicate whether the organization raise	a tunas through	_						
a Mail solicitations				f non-government gr				
b Internet and email solicitations				f government grants				
c Phone solicitations		g∟	Special fundi	raising events				
d In-person solicitations								
2a Did the organization have a written or								
or key employees listed in Form 990, F			-	-		_	es 📙 No	
b If "Yes," list the 10 highest paid individu	,	undraisers) p	ursuant to ag	reements under whi	ch the fund	Iraiser is to b	e	
compensated at least \$5,000 by the or	ganızatıon							
		 _		T E		 	T	
(i) Name and address of individual		(III) Did fundraiser have		(iv) Gross receipts		ount paid to	(vi) Amount paid to	
or entity (fundraiser)	(ii) Activity		or control of outions?	from activity	(or retained by) fundraiser listed in col (i)		(or retained by)	
		Contin	outions /			ol (i)	organization	
		Yes	No	<u> </u>				
1								
2								
<u> </u>]	
3								
				1				
4								
5			 					
				İ				
6								
]				
7								
8								
9								
			İ	}				
0								
~		İ						
		<u> </u>						
otal			•					
3 List all states in which the organization i				one or has been not	ified it is ev	empt fmm		
registration or licensing	3 registered of ite	JC/13CU 10 30/	icit continuati	ons of this been not	illed it is ex	empt nom		
registration incensing								
			.					
			· · ·			•		
								
				· · · · · · · · · · · · · · · · · · ·			 	
								
· · · · · · · · · · · · · · · · · · ·			 					
					-			
 								

Pa	art II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more							
		than \$15,000 of fundraising		d gross income on Form	1990-EZ, lines 1 and 6b	List events with		
-	-	gross receipts greater than	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events		
			COWBOY XMAS	BASH	(total number)	(add col (a) through col (c))		
<u>a</u>			(event type)	(event type)	(total number)			
Revenue	1	Gross receipts	66,815	313,621	28,939	409,375		
	2 Less Contributions		64,001	311,521	16,558	392,080		
		line 2)	2,814	2,100	12,381	17,295		
	4	Cash prizes						
	5	Noncash prizes						
nses	6	Rent/facility costs		1,000		1,000		
Direct Expenses	7	Food and beverages	6,900	10,860	2,145	19,905		
Direc	8	Entertainment	968	2,000		2,968		
	9	Other direct expenses	1,701	6,494	9,969	18,164		
	10 11	Direct expense summary Add lines Net income summary. Subtract line	• , ,			42,037		
Pa	rt II							
	1	\$15,000 on Form 990-EZ,	line 6a.	,	- · - · · · · · · · · · · · · · · · · ·			
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))		
æ	1	Gross revenue						
_								
ses	2	Cash prizes						
t Expenses	3	Noncash prizes						
Direct	4	Rent/facility costs		:				
	5	Other direct expenses						
	6	Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	* .		
	7 Direct expense summary Add lines 2 through 5 in column (d)							
_	F-4	andha atata/a\ un uubuub tha aasaasaa						
9 a	ls ti	er the state(s) in which the organization licensed to conduct g	• •			Yes No		
b	b If "No," explain							
10a b		re any of the organization's gaming li /es," explain		ed, or terminated during the	•	🗌 Yes 🗌 No		
	_							

SCHEDULE M (Form 990)

Noncash Contributions

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

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Employer identification number

BOYS	& GIRLS CLUB OF NORTHWEST COLO 75-3124416							
Par	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	1 .	(d) I of deter entribution		
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							
10	Secunties - Closely held stock							
11	Secunties - Partnership, LLC,			-				
	or trust interests							
12	Secunties - 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	х	1	37,5	00 COST TO	PURCH	ASE	
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► (AUCTION ITEMS)	х	100	36,6	75 AUCTION	VALUE		
26	Other ► ()							
27	Other ► ()							
28	Other ► (
29	Number of Forms 8283 received by the		during the tax year for contribut	ions for				
	which the organization completed Form	8283, Part IV	/, Donee Acknowledgement		. 29			
							Yes	No
30a	During the year, did the organization rece	eive by contri	bution any property reported in	Part I, lines 1 through				
	28, that it must hold for at least three yea	rs from the d	ate of the initial contribution, an	d which isn't required				!
	to be used for exempt purposes for the e	entire holding	period?			30a		х
b	If "Yes," describe the arrangement in Pai	rt II						
31	Does the organization have a gift accept		hat requires the review of any n	onstandard				
						31		х
32a	Does the organization hire or use third p							
-						32a		х
b	If "Yes," describe in Part II	•						,
33	If the organization didn't report an amour	nt in column i	(c) for a type of property for whi	ch column (a) is checked.				
	describe in Part II		, , , , , , , , , , , , , , , , , , ,	(-)		-		

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

Employer identification number

Open to Public --► Attach to Form 990 or 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information. Inspection

Department of the Treasury Internal Revenue Service Name of the organization

BOYS & GIRLS CLUB OF NORTHWEST COLO 75-3124416 01. Form 990 governing body review (Part VI, line 11) THE CLUB DELIVERS COPIES OF THE FORM 990 TO ALL BOARD MEMBERS FOR THEIR REVIEW. 02. Conflict of interest policy compliance (Part VI, line 12c) ANNUALLY, THE CLUBS' STAFF, VOLUNTEERS AND BOARD OF DIRECTORS DISCUSS THE CONFLICT OF INTEREST STATEMENT, AND ALL ARE ASKED IF FOR ANY REASON THEY CANNOT SIGN THE STATEMENT AT THE CONCLUSION OF DISCUSSION, THE STATEMENT IS SIGNED AND KEPT IN PERSONNEL FILES. 03. CEO, executive director, top management comp (Part VI, line 15a) ALL STAFF MEMBERS, INCLUDING THE EXECUTIVE DIRECTOR, RECEIVE AN ANNUAL REVIEW. MANAGEMENT OF THE ORGANIZATION AND THE BOARD REVIEW COMPENSATION POLICIES INTERNALLY AND EXTERNALLY. 04. Other officer or key employee compensation (Part VI, line 15b ALL STAFF MEMBERS, INCLUDING THE EXECUTIVE DIRECTOR, RECEIVA AN ANNUAL REVIEW. MANAGEMENT OF THE ORGANIZATION AND THE BOARD REVIEW COMPENSATION POLICIES INTERNALLY AND

05. Governing documents, etc, available to public (Part VI, line 19) ALL FINANCIALS, GOVERNING DOCUMENTS, CONFLICT OF INTEREST STATEMENTS, ARE OPEN AND AVAILABLE TO THE PUBLIC UPON REQUEST

EXTERNALLY.