Form 990 (Rev January 2020)
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.

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

2019
Open to Public Inspection

| A F | or the | 2019 calendar year, or tax year beginning and | ending | | |
|--------------------------------|--------------------|--|---------------|------------------------------|--|
| | heck if | C Name of organization | _ | D Employer identific | cation number |
| | Addres | | | | |
| | Name change | Doing business as | | <u>93-05498</u> | 42 |
| |]Initial return | Number and street (or P 0, box if mail is not delivered to street address) | Room/suite | E Telephone number | • |
| | Final return/ | 1215 HILL SE | | (541) 92 | <u>6-6666 </u> |
| | termin ated | | | G Gross receipts \$ | 3,533,906. |
| | Ameno | | | H(a) is this a group re | turn |
| | Applic | I Finame and address of principal officer of Office AMDERSEM | 0 | for subordinates | ? Yes X No |
| | pendir | SAME AS C ABOVE | N'A | H(b) Are all subordinates in | cluded? Yes No |
| II | ах-өх | empt status X 501(c)(3) | or 527 | If "No," attach a | list (see instructions) |
| JV | Vebsit | e: ► WWW.ALBANYBGC.ORG | <u>U</u> | H(c) Group exemption | n number 🕨 |
| KF | orm of | organization: X Corporation | L Year | of formation: 1955 N | State of legal domicile: OR |
| Pa | ırt I | Summary | | | |
| a) | 1 | Briefly describe the organization's mission or most significant activities YOUT | H SERV | ICES | |
| Governance | | | | | |
| Ē | 2 | Check this box If the organization discontinued its operations or dispo | sed of more | than 25% of its net as | sets |
| ove | 3 | Number of voting members of the governing body (Part VI, line 1a) | | 3 | 38 |
| <u>ق</u> ھ | 4 | Number of independent voting members of the governing body (Part VI, line 1b) | | 4 | 38 |
| | 5 | Total number of individuals employed in calendar year 2019 (Part V, line 2a) | | 5 | 171 |
| ŧ | 6 | Total number of volunteers (estimate if necessary) | | 6 | 271 |
| Activities | 7 a | Total unrelated business revenue from Part VIII, column (0), line 12 | | 7a | 0. |
| • | b | Net unrelated business taxable income from Form 990-T, fine 39 | SC | 7b | 0. |
| , | | 왕 JUL 1 5 20 | | Prior Year | Current Year |
| a | 8 | Contributions and grants (Part VIII, line 1h) | | 1,367,067. | 2,251,805. |
| ğ | 9 | Program service revenue (Part VIII, line 2g) OGDEN, I | IT L | 556,850. | 526,734. |
| Revenue | 10 | Investment income (Part VIII, column (A), lines 3, 4, and 76) | <u> </u> | 10,164. | 15,331. |
| α | l | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 377,066. | 328,370. |
| | 12 | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | | 2,311,147. | 3,122,240. |
| | 13 | Grants and similar amounts paid (Part IX, column (A), lines 1-3) | | 0. | 0. |
| | 14 | Benefits paid to or for members (Part IX, column (A), line 4) | | 0. | 0. |
| S | 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | | 1,567,308. | <u>1,585,987.</u> |
| Expenses | 16a | Professional fundraising fees (Part IX, column (A), line 11e) | | 0. | 0. |
| å | b | Total fundraising expenses (Part IX, column (D), line 25) 181,7 | 65. | | |
| Ú | 17 | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | | 1,395,304. | 1,222,361. |
| | 18 | Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) | <u></u> | 2,962,612. | 2,808,348. |
| | 19 | Revenue less expenses. Subtract line 18 from line 12 | | <651,465. | <u>> 313,892.</u> |
| ces Ges | | | Be | ginning of Current Year | End of Year |
| sets | 20 | Total assets (Part X, line 16) | | 10,907,898. | 11,232,874. |
| t As | 21 | Total liabilities (Part X, line 26) | | 203,774. | <u>214,532.</u> |
| Net Assets or Fund Balances | 22 | Net assets or fund balances Subtract line 21 from line 20 | | 10,704,124. | 11,018,342. |
| | art II | Signature Block | | ··· | · · · · · · · · · · · · · · · · · · · |
| | • | ilties of perjury, I declare that I have examined this return, including accompanying schodulo | | | y knowledge and belief, it is |
| true | correc | ct, and complete. Declarat ion of preparer (other than officer) is based on all information of w | hich preparei | r has any knowledge. | |
| | | | | | <u>o</u> |
| Sig | n | Signature of officer | | Date' / | |
| Her | е | JOHN ANDERSEN, CHIEF EXECUTIVE OFFICE | R | | |
| | | Type or print name and title | | | |
| | | Print/Type preparer's name | 72 | Date Check | PTIN |
| Paid | l | DEBRA L. BLASQUEZ | acou | - O L LUZU | |
| | arer | | P.C. | Firm's EIN | <u>93-0612582 </u> |
| Use | Only | Firm's address 920 ELM STREET SW | | | |
| | _ | ALBANY, OR 97321-2037 | | Phone no (5 | 41)926-5543 |
| May | the II | RS discuss this return with the preparer shown above? (see instructions) | | | X Yes No |
| 9320 | 01 01-2 | 20-20 LHA For Paperwork Reduction Act Notice, see the separate instruction | ions. | | Form 990 (2019) |

| orm | 990 (2019) BOYS & GIRLS CLUB OF ALBANY | 93-0549842 | Page 2 |
|-----|--|--------------------------|---------------|
| Par | rt III Statement of Program Service Accomplishments | | |
| | Check if Schedule O contains a response or note to any line in this Part III | | X |
| 1 | Briefly describe the organization's mission. | | |
| | THE BOYS & GIRLS CLUB OF ALBANY'S MISSION IS TO PROVIDE | A FUN, SAFE | , |
| | SUPERVISED ENVIRONMENT FOR RECREATIONAL AND EDUCATIONAL | | |
| | WHERE ALL BOYS AND GIRLS, ESPECIALLY THOSE FROM DISADVAN | | |
| | CIRCUMSTANCES, CAN DEVELOP SELF-ESTEEM AND THE QUALITIES | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the | | |
| - | prior Form 990 or 990-EZ? | Ves | X No |
| | If "Yes," describe these new services on Schedule O. | 103 | 110 |
| _ | · | | X No |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program services? | Tes | NOالحا |
| _ | 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 | | |
| | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other | irs, the total expenses, | and |
| | revenue, if any, for each program service reported | <u> </u> | 604 |
| 4a | (Code) (Expenses \$ 2,050,113. including grants of \$) (Revenue) | | <u>634.</u>) |
| | SOCIAL RECREATION: ACTIVITIES THAT INCLUDE BOTH TEAM AND | | |
| | SPORTS, ARTS, CRAFTS AND OTHER PHYSICAL ACTIVITIES. THES | | |
| | STRUCTURED LEISURE TIME AND PROMOTE HEALTH AND WELL BEIN | NG. AFTERSCH | <u> 00L</u> |
| | AND DAYCAMP PROGRAMS ALSO PROVIDED. | | |
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| 4b | (Code) (Expenses \$ | ue ¢ | |
| 75 | (Code | 10 Ø | |
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| 4 - | Other average convene (Decembe on Cabedula C.) | | |
| 4d | Other program services (Describe on Schedule O) | | |
| | (Expenses \$ including grants of \$) (Revenue \$ | | |
| 4e | Total program service expenses ► 2,050,113. | | 000 (0010) |
| | | Form \$ | 990 (2019) |

Form 990 (2019) BOYS & GIRLS CLUB OF ALBANY

Part IV Checklist of Required Schedules

| | | _ | | |
|-----|---|----------|----------------|---------------|
| | 504/ VOV. 4047(VAV. 4047 () 4 | | Yes | No |
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? | | х | |
| _ | If "Yes," complete Schedule A | 2 | X | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | | Λ | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | 2 | | x |
| | public office? If "Yes," complete Schedule C, Part I | 3 | | ^ |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect | 4 | | Х |
| _ | during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or | _4_ | | ^ |
| 5 | | 5 | | X |
| ^ | similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III | <u> </u> | | |
| 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 "Yes," complete Schedule D, Part I | 6 | | Х |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | - 0 | | |
| 7 | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | х |
| | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete | | | -23 |
| 8 | | 8 | | x |
| _ | Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for | | | |
| 9 | | | | |
| | amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? | 9 | | х |
| 40 | If "Yes," complete Schedule D, Part IV | | | <u> </u> |
| 10 | Did the organization, directly or through a related organization, hold assets in donor-restricted endowments | 10 | | х |
| 4.4 | or in quasi endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X | -10 | | - 23 |
| 11 | | | | |
| _ | as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | | |
| а | Part VI | 11a | $ \mathbf{x} $ | |
| h | Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total | 110 | | <u> </u> |
| U | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | х |
| _ | Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total | 112 | | |
| C | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | х |
| А | 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 | -110 | | _ |
| u | Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | х |
| | 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 | - 1.0 | | |
| • | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | Х | |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | , ,, | | |
| | Schedule D, Parts XI and XII | 12a | Х | |
| h | 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 | 1 | х |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | X |
| | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | Х |
| | 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 | | X_ |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any | | | |
| | 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 assistance to | | | |
| | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 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 | 17 | | X |
| 18 | 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 | |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," | | | |
| | complete Schedule G, Part III | 19 | | Х |
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | X |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | <u> </u> | |
| 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 |

| · | | | Yes | No |
|-------|--|------|----------|----------|
| 22 | 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 | 22 | | Х |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current | | | |
| 20 | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | | | |
| | Schedule J | 23 | | Х |
| 24 a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the | | | |
| 244 | last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete | | | |
| | Schedule K. If "No," go to line 25a | 24a | | X |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | - | |
| c | Date the state of making a second design of the sec | | | |
| Ū | any tax-exempt bonds? | 24c | | |
| а | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit | | | |
| | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | Х |
| b | and the state of t | | | |
| _ | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete | | | |
| | Schedule L, Part I | 25b | | Х |
| 26 | 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% | | | ĺ |
| | controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II | 26 | | Х |
| 27 | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key 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 |
| 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) | | | |
| а | and the second s | | | ĺ |
| _ | "Yes," complete Schedule L, Part IV | 28a | | X |
| b | | 28b | | X |
| c | A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If | | | |
| | "Yes," complete Schedule L, Part IV | 28c | | _X_ |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | X | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | | | |
| | contributions? If "Yes," complete Schedule M | 30 | | <u> </u> |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | | | |
| | Schedule N, Part II | 32 | | _X_ |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | |
| | 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, Part II, III, or IV, and | | | |
| | Part V, line 1 | 34 | X | |
| 35 a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity | | | |
| | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 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 | <u> </u> |
| Ра | rt V Statements Regarding Other IRS Filings and Tax Compliance | | | |
| | Check if Schedule O contains a response or note to any line in this Part V | | T | ┸ |
| | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096 Enter -0 if not applicable 1a 9 | | | |
| b | | | | |
| С | | | v | |
| | (gambling) winnings to prize winners? | 1c | X QQO | (2019) |
| 93200 | 4 01-20-20 | -orm | シブリ | (2019) |

Form 990 (2019)

If "Yes," complete Form 4720, Schedule O

Form 990 (2019) BOYS & GIRLS CLUB OF ALBANY 93-0549842 Page
Part VI 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 on Schedule O See instructions. | | | | | | | | |
|-----|---|---------|----------|-------------|--|--|--|--|--|
| | Check if Schedule O contains a response or note to any line in this Part VI | | | X | | | | | |
| Sec | tion A. Governing Body and Management | | | | | | | | |
| | | | Yes | No | | | | | |
| 1a | Enter the number of voting members of the governing body at the end of the tax year 1a 39 | 3 | | | | | | | |
| | 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 on Schedule O | | | | | | | | |
| b | Enter the number of voting members included on line 1a, above, who are independent 1b 3 | 3 | | | | | | | |
| 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, 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 | 5 Did the organization become aware during the year of a significant diversion of the organization's assets? | | | | | | | | |
| 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 | | Х | | | | | |
| 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: | | | | | | | | |
| а | The governing body? | 8a | X | | | | | | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | Х | | | | | | |
| 9 | 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 on Schedule O | 9 | | Х | | | | | |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) | | | | | | | | |
| | | | Yes | No | | | | | |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | | X | | | | | |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, | | | | | | | | |
| | and branches to ensure their operations are consistent with the organization's exempt purposes? | | | | | | | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | X | | | | | | |
| þ | Describe in Schedule O the process, if any, used by the organization to review this Form 990 | | | | | | | | |
| 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 | X | | | | | | |
| 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 | X | | | | | | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent | 1 | | | | | | | |
| | persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | | | | | | |
| а | The organization's CEO, Executive Director, or top management official | 15a | X | | | | | | |
| b | Other officers or key employees of the organization | 15b | X | <u> </u> | | | | | |
| | 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 | ļ | <u> X</u> _ | | | | | |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation | | | | | | | | |
| | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's | | | | | | | | |
| | exempt status with respect to such arrangements? | 16b | | | | | | | |
| | tion C. Disclosure | | | | | | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed OR | 0) | A = - | I - I - ! | | | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)) | JS only | /) avail | apie | | | | | |
| | for public inspection. Indicate how you made these available. Check all that apply | | | | | | | | |
| | Own website Another's website X Upon 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, a | no fina | ncial | | | | | | |
| | 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 | | | | | | | | |
| | BOYS & GIRLS CLUB OF ALBANY - (541)926-6666 | | | | | | | | |
| | 1215 HILL STREET SE, ALBANY, OR 97322 | | | | | | | | |

Form 990 (2019) 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

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 in | or any related | orga | anıza | ation | COI | npe | nsat | ted any current officer, o | director, or trustee. | |
|---|-------------------|--------------------------------|-----------------------|---------|--------------|------------------------------|----------|---------------------------------|-----------------------|-----------------------------|
| (A) | (B) | (C) | | | | | | (D) | (E) | (F) |
| Name and title | Average | (do | not c | Pos | ition | than | one | Reportable | Reportable | Estimated |
| | hours per | box | , unle | ss pe | rson | ıs bot | h an | compensation | compensation | amount of |
| | week | Η. | ceran | d a d | recto | x/trus T | tee) | from | from related | other |
| | (list any | recto | | | | | | the | organizations | compensation |
| | hours for related | o d | a | | 1 | sated | | organization (W-2/1099-MISC) | (W-2/1099-MISC) | from the |
| | organizations | ruste | l trus | | _ g | nadr | | (44-2/1099-101130) | | organization and related |
| | below | dual t | llona | _ | 를 (| stcor | . | | | organizations |
| | line) | individual trustee or director | institutional trustee | Officer | Key employee | Highest compensated employee | Former | • | | - · 3 |
| (1) ANDREWS, STAN | 1.00 | | | | | | _ | | | |
| BOARD MEMBER | | X | | | | | | 0. | 0. | 0. |
| (2) BENEDICT, MITCH | 1.00 | | | | | | | | | |
| BOARD MEMBER | | X | | | | | | 0. | 0. | 0. |
| (3) BORDE, GALE | 1.00 | | | | | | | | | |
| BOARD MEMBER | | X | | | | | | 0. | 0. | 0. |
| (4) COWGILL, SCOTT | 1.00 | | | | | | | | | |
| TREASURER | | X | | X | | | | 0. | 0. | 0. |
| (5) CUTSFORTH, TOM | 1.00 | | | | | | | | | |
| BOARD MEMBER | | X | $oxed{oxed}$ | | | | | 0. | 0. | 0. |
| (6) DECKER, JIM | 1.00 | | | | | | | | | |
| BOARD MEMBER | | X | | | | | | 0. | 0. | 0. |
| (7) DRAPER, BILL | 1.00 | | | | | | | | | |
| BOARD MEMBER | | X | | | | | | 0. | 0. | 0. |
| (8) GROSSMAN, BARBARA | 1.00 | | | | | | | | | |
| BOARD MEMBER | | Х | | | | | | 0. | 0. | 0. |
| (9) HAMPL, ANDREA | 1.00 | | | | | | | | | |
| BOARD MEMBER | | Х | | | | | | 0. | 0. | 0. |
| (10) HARPOLE, CONNIE | 1.00 | | | | | | | | | |
| BOARD MEMBER | | X | | | | | | 0. | 0. | 0. |
| (11) HART, GLEN | 1.00 | | | | | | | | | |
| BOARD MEMBER | | X | | | | | | 0. | 0. | 0. |
| (12) HEADRICK, LORRI | 1.00 | | | | | | | | | |
| BOARD MEMBER | | Х | | | | | | 0. | 0. | 0. |
| (13) JORDAN, BRAD | 1.00 | | | | | | | | | _ |
| BOARD MEMBER | 4-00 | Х | | | | | | 0. | 0. | 0. |
| (14) KING, STEPHANIE | 1.00 | | | | | | | | | _ |
| VICE PRESIDENT | 1 00 | Х | | Х | | | | 0. | 0. | 0. |
| (15) KNOWLES, SEAN | 1.00 | | | | | | | | | |
| BOARD MEMBER | 1 00 | X | | | | | | 0. | 0. | 0. |
| (16) LILES, TRACY | 1.00 | ا ,, ا | | | | | | _ | | ^ |
| BOARD MEMBER | 1 00 | X | | | | | | 0. | 0. | 0. |
| (17) MACHUGH, BILL | 1.00 | ,, | | | | | | , | ا ۾ | ^ |
| BOARD MEMBER | | X | | | | | | 0. | 0. | 0. |

932007 01-20-20

| Part VII Section A. Officers, Directors, Trus | | ploy | /ees | | | ighe | st (| Compensated Employe | es (continued) | | | | |
|---|-------------------|--------------------------------|-----------------------|-------------|--------------|------------------------------|--------------|---------------------------|---|----------|--------------|-----------------|----------|
| (A) | (B) | (C) | | | | | | (D) | (E) | | | (F) | |
| Name and title | Average | (do | not c | Pos heck | | | one | Reportable | Reportable | e | E: | stimate | ed . |
| | hours per week | | , unle cer an | | | | | | compensation | | ar | nount | of |
| | (list any | H | Π | | Г | Ι | Τ | from the | from related organization | | | other opensa | +.00 |
| | hours for | Individual trustee or director | 1 | | | - | | organization | (W-2/1099-MI | | 1 | rom th | |
| | related | io a | stee | | | usate | | (W-2/1099-MISC) | (1, 2, 1000) | , | 1 | anızat | |
| | organizations | trust | 를 | | yee | E E | | ` | | | 1 ~ | , d relat | |
| | below | la la | Institutional trustee | 15 | Key employee | loyee | ₌ | | | | org | anızatı | ons |
| | line) | Ē | 重 | Officer | Key | Highest compensated employee | Former | | | | <u> </u> | | |
| (18) MCKAY, CARRIE | 1.00 | ١ | 1 | | | | | | | • | 1 | | _ |
| BOARD MEMBER | 1 00 | X | <u> </u> | | L. | _ | ╙ | 0. | | 0. | <u> </u> | | 0 |
| (19) MEEKER, ARTHUR | 1.00 | ١., | | | | | | | | • | 1 | | _ |
| BOARD MEMBER | 1 00 | X | ▙ | <u> </u> | <u> </u> | ┢ | ┼ | 0. | | 0. | ļ | | 0 |
| (20) MINNICK, TAMI | 1.00 | ١., | | | | | | | | ^ | ł | | ^ |
| BOARD MEMBER | 1 00 | X | ┡ | _ | <u> </u> | ┝ | ╄ | 0. | | 0. | ļ | | 0 |
| (21) PASCONE, JOHN | 1.00 | ١., | | | | | | | | • | 1 | | _ |
| BOARD MEMBER | 1 00 | X | ├ | <u> </u> | <u> </u> | ├ | ╄ | 0. | | 0. | <u> </u> | | 0 |
| (22) PERLENFEIN, BRIAN | 1.00 | 1 | | | | | | | | ^ | ł | | ^ |
| BOARD MEMBER | 1 00 | X | ┢ | _ | <u> </u> | - | - | 0. | | 0. | ├ | _ | 0 |
| (23) PERLENPEIN, STEVE | 1.00 | x | | | | | | 0. | | 0. | 1 | | 0 |
| BOARD MEMBER | 1.00 | ┢≏ | \vdash | <u> </u> | \vdash | ┼ | \vdash | <u> </u> | ļ | | ├ | | |
| (24) PRICE, AMY BOARD MEMBER | 1.00 | x | 1 | | | | | 0. | | 0. | | | 0 |
| (25) RAILEY, KIM | 1.00 | ┢ | \vdash | \vdash | ├ | ╁╌ | | | | | | | |
| VICE PRESIDENT | 1.00 | x | | х | | 1 | | 0. | | 0. | | | 0 |
| (26) REID, TIM | 1.00 | <u> </u> | ┢┈ | _ | \vdash | ┼─ | ╁ | 1 | | <u> </u> | 1 | | |
| PRESIDENT | 1.00 | x | | х | | | | 0. | | 0. | | | 0 |
| 1b Subtotal | L | | | | Ь | Ь. | _ | 0. | | 0. | | | 0 |
| c Total from continuation sheets to Part V | II Section A | | | | | | | 130,373. | | 0. | | | 0 |
| d Total (add lines 1b and 1c) | ii, ocodon A | | | | | | | 130,373. | | 0. | 1 | _ | 0 |
| 2 Total number of individuals (including but n | ot limited to th | nose | liste | ed al | bov | e) w | ho r | | ole | | | | |
| compensation from the organization | | | | | | • | | • | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | • |
| | | | | | | | | | | | | Yes | No |
| 3 Did the organization list any former officer, | director, trust | ee, l | key e | emp | loye | e, o | r hig | hest compensated emp | oloyee on | | | | |
| line 1a? If "Yes," complete Schedule J for s | uch individual | | | | | | | | | | 3 | | X |
| 4 For any individual listed on line 1a, is the su | um of reportab | le co | omp | ensa | atior | n and | d ot | her compensation from | the organization | | | | |
| and related organizations greater than \$15 | 0,000? If "Yes, | ° co | mple | ete S | Sche | edul | e J | for such individual | | | 4 | | X |
| 5 Did any person listed on line 1a receive or a | | | | | | | relat | ted organization or indiv | idual for services | 5 | | | |
| rendered to the organization? If "Yes," com | plete Schedul | e J f | or su | uch | pers | son | _ | | | | 5 | | X |
| Section B. Independent Contractors | | | | | | | | · | | | | | |
| 1 Complete this table for your five highest co | mpensated in | depe | ende | nt c | onti | racto | ors 1 | that received more than | \$100,000 of con | npens | sation | from | |
| the organization Report compensation for | the calendar y | ear | endı | ng v | vith | or w | rthir | n the organization's tax | year | | | | |
| (A) | | | ~~~ | _ | | | | (B) | | _ | | C) | |
| Name and business | address | N | ONE | <u> </u> | | | 4 | Description of s | services | | ompe | nsatio | <u> </u> |
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NO TO

Total number of independent contractors (including but not limited to those listed above) who received more than

| Form 990 BOYS & G | | | | | | | | | 93-054 | 9842 |
|---|---|--------------------------------|--|-----------|--------------|------------------------------|----------|--|--|---|
| Part VII Section A. Officers, Directors, Tr | ustees, Key E | mple | oyee | s, a | nd l | ligh | est | Compensated Employ | rees (continued) | |
| (A) Name and title | (B) Average hours | | | (C Pos | C) ition | ļ | | (D) Reportable compensation | (E) Reportable compensation | (F) Estimated amount of |
| | per week (list any hours for related organizations below line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | from the organization (W-2/1099-MISC) | from related organizations (W-2/1099-MISC) | other compensation from the organization and related organizations |
| (27) RICE, LISA BOARD MEMBER | 1.00 | x | | | | | | 0. | 0. | 0 |
| (28) RICHTER, CINDI | 1.00 | | | | | _ | | | | |
| BOARD MEMBER | | x | l | | | | | 0. | 0. | 0 |
| (29) RUBESH, SHAWN | 1.00 | T | t | _ | T | 一 | | | | |
| BOARD MEMBER | | \mathbf{x} | | ŀ | | | | 0. | 0. | 0 |
| (30) SCARIANO, CHRIS | 1.00 | ┢ | | | \vdash | \vdash | | | | |
| BOARD MEMBER | | x | | ŀ | ŀ | | ŀ | 0. | 0. | 0 |
| (31) SILBERNAGEL, PAM | 1.00 | Ħ | T | \vdash | | | | | | |
| SECRETARY | | \mathbf{x} | | x | | | | 0. | 0. | 0 |
| (32) STELLMACHER, BARB | 1.00 | t | † | <u> </u> | T | \vdash | - | | | |
| BOARD MEMBER | <u> </u> | X | | | | | | 0. | 0. | 0 |
| (33) STREET, PATTY | 1.00 | t | <u> </u> | | | | Ī | | | |
| BOARD MEMBER | | X | | | | | ŀ | 0. | 0. | 0 |
| (34) VOGT, GORDON | 1.00 | | | | | | | | | |
| BOARD MEMBER | | X | | • | | | | 0. | 0. | 0 |
| (35) WALLS, EVONNE | 1.00 | | | | | | | | | |
| BOARD MEMBER | | X | | | | | | 0. | 0. | 0 |
| (36) WARNER, SHAWNA | 1.00 | | | | | | | | | 1 |
| BOARD MEMBER | | X | | | | <u> </u> | | 0. | 0. | 0 |
| (37) WEAVER, ANDY | 1.00 |] | | | ŀ | | | | | |
| BOARD MEMBER | | X | | L., | | L., | | 0. | 0. | 0 |
| (38) WERNER, JEROME | 1.00 | 1 | ĺ | | | | | _ | _ | |
| BOARD MEMBER | | X | <u> </u> | <u> </u> | | | <u>L</u> | 0. | 0. | 0 |
| (39) ANDERSEN, JOHN | 40.00 | 1 | ĺ | l | | | | 400 000 | | • |
| CEO | . | _ | <u> </u> | X | | <u> </u> | _ | 130,373. | 0. | 0 |
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| | | | | | | | | | | |
| Total to Part VII, Section A, line 1c | | | | | | | | 130,373. | | |

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII Revenue excluded Related or exempt Unrelated Total revenue from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 37,897. 1 a Federated campaigns 1a 54,965. 1b **b** Membership dues 477,049. 1c c Fundraising events 215,515. d Related organizations 1d 256,224 e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1,210,155 1f 298,528. 1g \$ g Noncash contributions included in lines 1a-1f 2,251,805 h Total. Add lines 1a-1f **Business Code** 291,285. 291,285 713940 2 a SPORTS PROGRAMS Program Service Revenue ь ENRICHMENT PROGRAMS 713940 146,459. 146,459. 88,990. 713940 88,990. c DENTAL FACILITY All other program service revenue 526,734 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 15,331. 15,331 other similar amounts) Income from investment of tax-exempt bond proceeds Royalties 5 (i) Real (II) Personal 64,841. 6 a Gross rents 6a 800. b Less. rental expenses 64,041. c Rental income or (loss) 64,041. 64,041 d Net rental income or (loss) (i) Securities (II) Other 7 a Gross amount from sales of assets other than inventory 7a b Less cost or other basis Other Revenue and sales expenses 7b 7с c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not 477,049. of including \$ contributions reported on line 1c) See 8a 652,270 Part IV, line 18 вь 403,640 b Less direct expenses 248,630. 248,630 c Net income or (loss) from fundraising events 9 a Gross income from garning activities See Part IV, line 19 9a **b** Less direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 17,066. and allowances 7,226. b Less cost of goods sold 9.840. 9,840 Net income or (loss) from sales of inventory **Business Code** 5,859 11 a OTHER REVENUE 713940 5,859. d All other revenue 5,859. e Total. Add lines 11a-11d 0. 273,801. 122,240. 596,634 Total revenue See instructions

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising (B) Program service (C) Management and (A)
Total expenses Do not include amounts reported on lines 6b, 7b, 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 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign 3 organizations, foreign governments, and foreign individuals. See Part IV. lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 936,793 296,968 132,837. 1,366,598. 7 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 57,335. 112,685. 43,388 11,962. Other employee benefits 29,199. 10,158. 67,347 106,704. Payroll taxes 10 Fees for services (nonemployees). Management Legal 18,327 18,327. Accounting Lobbying d Professional fundraising services. See Part IV, line 17 f Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 4,533. 4,533. 12 Advertising and promotion Office expenses 13 10,408. 10,408 14 Information technology Royalties 15 197,746. 197.746 16 Occupancy 3.720 3,720. Travel 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 612 4,200 626 5,438 Conferences, conventions, and meetings 19 Interest 20 21 Payments to affiliates 341,988. 341,988 Depreciation, depletion, and amortization 22 37,431 37,431. 23 Insurance 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.) 236,590. 236,590. ENRICHMENT PROGRAMS 108,832. 108,832. SPORTS PROGRAMS 63,767 c MISCELLANEOUS 98,714. 34,947. 66,775. 66,775. d DENTAL PROGRAM 55,115. 21,649. 91,859. 15,095. e All other expenses 2,808,348. 2,050,113. 576,470. 181,765. Total functional expenses Add lines 1 through 24e 25 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)

| Par | tΧ | Balance Sheet | | | |
|------------------------------|-----|---|--------------------------|-----|------------------------------------|
| | | Check if Schedule O contains a response or note to any line in this Part X | | | |
| | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash - non-interest-bearing | 28,231. | 1 | 71,868 |
| | 2 | Savings and temporary cash investments | <u>2,278,297.</u> | 2 | 2,601,044 |
| | 3 | Pledges and grants receivable, net | 52,738 . | _3 | |
| | 4 | Accounts receivable, net | 46,004. | 4 | 53,065 |
| | 5 | Loans and other receivables from any current or former officer, director, | | | |
| | | trustee, key employee, creator or founder, substantial contributor, or 35% | | | |
| | | controlled entity or family member of any of these persons | | 5 | |
| | 6 | Loans and other receivables from other disqualified persons (as defined | | | |
| | | under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) | | 6 | |
| 3 | 7 | Notes and loans receivable, net | 3,905. | 7 | 3,905 |
| 2255 | 8 | Inventories for sale or use | 15,535. | 8 | <u> 15,535</u> |
| (| 9 | Prepaid expenses and deferred charges | | 9 | |
| | 10a | Land, buildings, and equipment cost or other | | ļ | |
| | | basis. Complete Part VI of Schedule D 10a 12,827,091. | | | |
| | b | Less. accumulated depreciation 10b 4,339,634. | 8,483,188. | 10c | 8,487,457 |
| | 11 | Investments - publicly traded securities | | 11 | |
| | 12 | Investments - other securities See Part IV, line 11 | | 12 | |
| | 13 | Investments · program-related. See Part IV, line 11 | | 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 33) | 10,907,898. | 16 | 11,232,874 |
| | 17 | Accounts payable and accrued expenses | 37,140. | 17 | 140,628 |
| | 18 | Grants payable | | 18 | |
| | 19 | Deferred revenue | 94,969. | 19 | 5,000 |
| | 20 | Tax-exempt bond liabilities | | 20 | |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| ß | 22 | Loans and other payables to any current or former officer, director, | | | |
| LIADIIIICS | | trustee, key employee, creator or founder, substantial contributor, or 35% | | | |
| Ē | | controlled entity or family member of any of these persons | | 22 | |
| • | 23 | Secured mortgages and notes payable to unrelated third parties | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third | | | |
| | | parties, and other liabilities not included on lines 17-24) Complete Part X | F1 665 | | 60.004 |
| | | of Schedule D | 71,665. | 25 | 68,904 |
| | 26 | Total liabilities. Add lines 17 through 25 | 203,774. | 26 | 214,532 |
| Ñ | | Organizations that follow FASB ASC 958, check here | | | |
| Net Assets of Fully balances | | and complete lines 27, 28, 32, and 33. | 0 (() 000 | | 0 000 057 |
| 5 | 27 | Net assets without donor restrictions | 8,662,898. | 27 | 9,809,957 |
| 3 | 28 | Net assets with donor restrictions | 2,041,226. | 28 | 1,208,385 |
| 5 | | Organizations that do not follow FASB ASC 958, check here | | | |
| 5 | | and complete lines 29 through 33. | | | |
| 2 | 29 | Capital stock or trust principal, or current funds | | 29 | |
| Š | 30 | Paid-in or capital surplus, or land, building, or equipment fund | | 30 | |
| ដ | 31 | Retained earnings, endowment, accumulated income, or other funds | 10 704 104 | 31 | 11 010 242 |
| Ž | 32 | Total net assets or fund balances | 10,704,124. | 32 | 11,018,342 |
| | _33 | Total liabilities and net assets/fund balances | 10,907,898. | 33 | 11,232,874 Form 990 (201 |

| Form | 990 (2019) · BOYS & GIRLS CLUB OF ALBANY | <u>93-</u> | 0549 | 842 | Pag | ge 12 |
|------|---|------------|------------|-------------|----------------------------|--------------|
| Pai | rt XI Reconciliation of Net Assets | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | | \Box |
| | | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | <u>,12:</u> | | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 2 | ,808 | <u>3,3</u> | 48. |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | | 31: | <u>3,8</u> | <u>92.</u> |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 10 | <u>,70</u> | $\frac{1}{4}, \frac{1}{1}$ | 24. |
| 5 | Net unrealized gains (losses) on investments | 5 | | | 3 | <u> 26.</u> |
| 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 | 11 | ,01 | 3,3 | <u>42.</u> |
| Pa | rt XII Financial Statements and Reporting | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | | |
| | | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990: Cash X Accrual Other | | | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule | 0 | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | | 2a | | X |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed | on a | | | | |
| | separate basis, consolidated basis, or both. | | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | | 2b | X | <u> </u> |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate | ə basıs, | | | | |
| | consolidated basis, or both | | | | | |
| | X Separate basis Consolidated basis Both consolidated and separate basis | | | | | |
| C | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the | ə audıt, | | | | |
| | review, or compilation of its financial statements and selection of an independent accountant? | | | 2c | _X_ | |
| | If the organization changed either its oversight process or selection process during the tax year, explain on Sch | edule (|) . | | | |
| За | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin | igle Aud | dit | | | |
| | Act and OMB Circular A-133? | | | 3a | | X |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi | red aud | dit | | | |
| | or audits, explain why on Schedule O and describe any steps taken to undergo such audits | | | 3b | | |

Form **990** (2019)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ.

► 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

Employer identification number

| | | | | TOR OF ATRAN | | | | | 3-0549842 | | | | | | |
|------|-------------------------|---|------------------------------------|--|--------------------------------------|---------------------------------|-------------------|--|----------------------------|--|--|--|--|--|--|
| Pa | rt I | Reason for Public C | Charity Status (A | II organizations must co | mplete thi | s part.) Se | e instructions. | | | | | | | | |
| he | organ | ization is not a private found | ation because it is: (| For lines 1 through 12, c | heck only | one box) | | | | | | | | | |
| 1 | | A church, convention of chi | | = | | | YAYO / | 2 | | | | | | | |
| | Ħ | A school described in secti | | | | | 1 | 1/ | / | | | | | | |
| 2 | = | | | | | | ., [| 14 | | | | | | | |
| 3 | \vdash | A hospital or a cooperative | | | | | | <u>/ </u> | | | | | | | |
| 4 | Ш | A medical research organiza | ation operated in cor | ijunction with a hospital | described | in section | n 170(b)(1)(A)(| iii). Enter | the hospital's name, | | | | | | |
| | | city, and state. | | | | | | | | | | | | | |
| 5 | | An organization operated for | or the benefit of a col | lege or university owned | l or operat | ed by a go | overnmental ur | nt describ | ed in | | | | | | |
| | | section 170(b)(1)(A)(iv). (C | omplete Part II.) | | | | | | | | | | | | |
| 6 | | | | ental unit described in s | section 17 | O(b)(1)(A) | (v). | | | | | | | | |
| | $\overline{\mathbf{x}}$ | 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 | | | | | | | | | | | | | |
| • | | = | - | that part of ito support | om a gove | | | o go | | | | | | | |
| _ | | section 170(b)(1)(A)(vi). (Co | | 4MAM | | | | | | | | | | | |
| 8 | | A community trust describe | | | | | | | | | | | | | |
| 9 | ш | An agricultural research org | janization described | ın section 170(b)(1)(A)(i | x) operate | ed in conju | inction with a la | and-grant | college | | | | | | |
| | | or university or a non-land-g | rant college of agrici | ulture (see instructions) | Enter the | name, city | , and state of t | the college | e or | | | | | | |
| | | university | | | | | | | | | | | | | |
| 10 | | An organization that normal | lly receives [.] (1) more | than 33 1/3% of its sup | port from | contribution | ons, membersh | np fees, a | nd gross receipts from | | | | | | |
| | | activities related to its exem | npt functions - subjec | t to certain exceptions, | and (2) no | more tha | n 33 1/3% of it | s support | from gross investment | | | | | | |
| | | income and unrelated busin | | | | | | | | | | | | | |
| | | See section 509(a)(2). (Cor | | , | | • | , , | | | | | | | | |
| 11 | | An organization organized a | | vely to test for public sa | fety See s | section 50 | 19(a)(A) | | | | | | | | |
| | \Box | An organization organized a | • | • | • | | | n, out the | nurnoses of one or | | | | | | |
| 12 | _ | • | • | • | • | | | - | | | | | | | |
| | | more publicly supported org | • | | | , | | | neck the box in | | | | | | |
| | _ | lines 12a through 12d that o | • • | | | | | _ | | | | | | | |
| а | | | anization operated, s | upervised, or controlled | by its supp | ported org | janization(s), ty | pically by | giving | | | | | | |
| | | the supported organization | on(s) the power to re | gularly appoint or elect a | majority o | of the direc | ctors or trustee | s of the s | upporting | | | | | | |
| | | organization You must c | omplete Part IV, Se | ctions A and B. | | | | | | | | | | | |
| b | | Type II. A supporting orga | anization supervised | or controlled in connect | tion with it | s supporte | ed organization | n(s), by ha | ving | | | | | | |
| | | control or management of | f the supporting orga | anization vested in the s | ame perso | ns that co | ontrol or manac | e the sup | ported | | | | | | |
| | | organization(s). You mus | | | • | | | | • | | | | | | |
| c | | Type III functionally inte | | | ın connect | tion with a | and functionally | v integrate | ed with | | | | | | |
| ٠ | | -, | | - | | | | y intograte | ou with, | | | | | | |
| | . — | its supported organization | | • | | | | | 4 | | | | | | |
| d | | ☐ Type III non-functionally | - | | | | | - | | | | | | | |
| | | that is not functionally int | • | • , | • | | • | an attent | veness | | | | | | |
| | | requirement (see instructi | ions) You must con | plete Part IV, Sections | A and D, | and Part | V. | | | | | | | | |
| е | | Check this box if the orga | anization received a v | vritten determination fro | m the IRS | that it is a | ı Type I, Type I | I, Type III | | | | | | | |
| | | functionally integrated, or | Type III non-function | nally integrated supporti | ng organiz | zation. | | | | | | | | | |
| f | Ente | er the number of supported o | organizations | • | | | | | | | | | | | |
| . 9 | Prov | vide the following information | about the supporte | d organization(s) | | | | | | | | | | | |
| | (| i) Name of supported | (II) EIN | (III) Type of organization | (iv) is the orga- in your governi | nization listed no document? | (v) Amount of | monetary | (vi) Amount of other | | | | | | |
| | | organization | | (described on lines 1 10 above (see instructions)) | Yes | No | support (see ins | structions) | support (see instructions) | | | | | | |
| | | | | above (see matractions) | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | - | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | | | |
| Tot: | al | | | | | | | | | | | | | | |

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)

| Sec | tion A. Public Support | | | | | | | | | | |
|------|--|-----------------------|-------------------|------------------------|----------------------|---------------------|-------------------|--|--|--|--|
| Cale | ndar year (or fiscal year beginning in) | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total | | | | |
| | Gifts, grants, contributions, and | | | | | | | | | | |
| | membership fees received. (Do not | | | | | | | | | | |
| | include any "unusual grants.") | 1244999. | 4275689. | 1115211. | 1402736. | 2251805. | 10290440. | | | | |
| 2 | Tax revenues levied for the organ- | | | | | | | | | | |
| | ization'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 | 39,762. | | | | | 39,762. | | | | |
| 4 | Total. Add lines 1 through 3 | 1284761. | 4275689. | 1115211. | 1402736. | 2251805. | 10330202. | | | | |
| 5 | | | | | | | | | | | |
| _ | 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) | | | | | | | | | | |
| 6 | Public support. Subtract line 5 from line 4 | | ····· | | | | 10330202. | | | | |
| | ction B. Total Support | <u> </u> | | <u>L </u> | | | | | | | |
| | ndar year (or fiscal year beginning in) | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total | | | | |
| | Amounts from line 4 | 1284761. | 4275689. | 1115211. | 1402736. | | 10330202. | | | | |
| 8 | Gross income from interest, | | | | | | | | | | |
| • | dividends, payments received on | | | | , | | , | | | | |
| | securities loans, rents, royalties, | | | | | | | | | | |
| | and income from similar sources | 92,537. | 52,383. | 53,487. | 77,999. | 80,172. | 356,578. | | | | |
| 9 | Net income from unrelated business | 22700. | | | | | <u> </u> | | | | |
| Ū | activities, whether or not the | | | | | | , | | | | |
| | business is regularly carried on | | | | | | | | | | |
| 10 | Other income Do not include gain | | | | | | , | | | | |
| | or loss from the sale of capital | | | | | | | | | | |
| | assets (Explain in Part VI) | 13,201. | 15,889. | 11,235. | 13,530. | 5,859. | 59,714. | | | | |
| 11 | Total support. Add lines 7 through 10 | | | | | | 10746494. | | | | |
| 12 | | etc. (see instruction | ons) | | L | 12 1 | ,624,806. | | | | |
| | First five years, If the Form 990 is fo | • | • | d, fourth, or fifth ta | ax vear as a sectio | | , , | | | | |
| | organization, check this box and stop | • | , , , | , | , | | ▶□ | | | | |
| Se | ction C. Computation of Publ | ic Support Pe | rcentage | | | · · · · · | | | | | |
| | Public support percentage for 2019 (| | | column (f)) | | 14 | 96.13 % | | | | |
| 15 | Public support percentage from 2018 | 3 Schedule A, Part | II, line 14 | | | 15 | 95.27 % | | | | |
| | 33 1/3% support test - 2019. If the | | | n line 13, and line | 14 is 33 1/3% or n | nore, check this b | ox and | | | | |
| | stop here. The organization qualifies | | | | | | ▶X | | | | |
| Ł | 33 1/3% support test - 2018. If the | organization did no | t check a box on | line 13 or 16a, and | l line 15 is 33 1/3% | or more, check t | his box | | | | |
| | and stop here. The organization qua | | | | | | ▶ □ | | | | |
| 17a | 10% -facts-and-circumstances tes | t - 2019. If the org | anization did not | check a box on line | e 13, 16a, or 16b, a | and line 14 is 10% | or more, | | | | |
| | and if the organization meets the "fac | | | | | | | | | | |
| | meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. | | | | | | | | | | |
| ŧ | 10% -facts-and-circumstances tes | | | | | 17a, and line 15 is | 10% or | | | | |
| | more, and if the organization meets t | | | | | | | | | | |
| | organization meets the "facts-and-cir | | | | | | ightharpoons | | | | |
| _18 | Private foundation. If the organization | | | | | | ns 🕨 | | | | |
| | | | | | | | 0 or 990-EZ) 2019 | | | | |

| | rt III Support Schedule for C | - | | | | | / |
|---|---|--|--|---|---|---|-------------------------------|
| | (Complete only if you checked | the box on line 10 | of Part I or if the | organization failed | to qualify under F | art II. If the organi | zation fails to |
| | qualify under the tests listed b | elow, please comp | olete Part II.) | | | | |
| Sec | ction A. Public Support | | | | | | |
| Cale | ndar 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 | | | | 1 | / | 1 |
| | include any "unusual grants.") | | | | | | |
| 2 | Gross receipts from admissions, | | | | | | |
| | merchandise sold or services per- | | | | | | |
| | formed, or facilities furnished in | | • | | | | |
| | any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that | | | | | | |
| Ū | are not an unrelated trade or bus- | | | | | 1 | |
| | iness under section 513 | | | | | | |
| , | Tax revenues levied for the organ- | | | | | | |
| 4 | ization's benefit and either paid to | | | | | , | |
| | or expended on its behalf | | | | | | |
| _ | ' | | | | | | |
| 5 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to | | | | 1 | | |
| | the organization without charge | | | | | | |
| - | Total. Add lines 1 through 5 | | <u> </u> | | | | |
| 7 a | 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 | | | | ļ | | |
| | exceed the greater of \$5,000 or 1% of the | | ĺ | 1 | |] | |
| | amount on line 13 for the year | | | | | | <u> </u> |
| C | : Add lines 7a and 7b | | | | | | |
| | Public support. (Subtract line 7c from line 6) | | | 1 | | | 1 |
| | | | <u> </u> | | | | |
| <u>Sec</u> | ction B. Total Support | | | | | · · · · · · · · · · · · · · · · · · · | |
| | ction B. Total Support ndar year (or fiscal year beginning in) | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| Cale | · · · · · · · · · · · · · · · · · · · | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| Cale 9 | ndar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| Cale 9 | ndar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| Cale 9 | ndar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| Cale 9 10a | ndar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| Cale 9 10a | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| Cale 9 10a | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses. | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| Cale 9 10a | ndar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| Cale 9 10a | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses. | | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| Cale 9 10a | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, | | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| Cale 9 10a | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business in line 10b, | | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| Cale 9 10a | ndar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| Cale 9 10a | ndar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business's regularly carried on Other income Do not include gain or loss from the sale of capital | | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| Gale 9 10a b | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business's regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| Cale 9 10a b | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business's regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support (Add lings 9, 10c, 11, and 12) | | | | | | |
| Cale 9 10a b | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo | | | | | | |
| Cale 9 10a b 11 12 13 14 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business's regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here | r the organization's | s first, second, the | | | | |
| Cale 9 10a b 11 12 13 14 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here | r the organization's | s first, second, the | rd, fourth, or fifth t | | on 501(c)(3) organi | zation, |
| 11 12 13 14 See 15 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here etion C. Computation of Public Public support percentage for 2019 (| r the organization's | s first, second, the | rd, fourth, or fifth t | | on 501(c)(3) organi | zation, |
| 112 13 14 Sec 15 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here etion C. Computation of Public support percentage for 2019 (Public support percentage from 2018) | r the organization's lic Support Pe (line 8, column (f), c 8 Schedule A, Part | s first, second, the rcentage divided by line 13, III, line 15 | rd, fourth, or fifth t | | on 501(c)(3) organi | zation, |
| 11 12 13 14 See 15 16 See | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here. Ction C. Computation of Public support percentage for 2019 (Public support percentage from 2018) Ction D. Computation of Inve | r the organization's lic Support Pe line 8, column (f), of 8 Schedule A, Part stment Incom | s first, second, the rcentage divided by line 13, lll, line 15 | rd, fourth, or fifth t | | on 501(c)(3) organi | zation, % % |
| 11 12 13 14 See 17 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business's regularly carried on. Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here cition C. Computation of Public support percentage for 2019 (Public support percentage from 2018 cition D. Computation of Invelinessment income percentage for 2019 (Investment income percentage for 2019). | r the organization's lic Support Pe (line 8, column (f), c 8 Schedule A, Part stment Incom 019 (line 10c, column | s first, second, the rcentage divided by line 13, lill, line 15 e Percentage mn (f), divided by | rd, fourth, or fifth t | | 15 16 17 | zation, % % % |
| 11 12 13 14 See 17 18 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business's regularly carried on. Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here cition C. Computation of Public support percentage for 2019 (Public support percentage from 2018 cition D. Computation of Inve | r the organization's lic Support Pe (line 8, column (f), c 8 Schedule A, Part stment Incom 019 (line 10c, colur 2018 Schedule A, | s first, second, the rcentage divided by line 13, III, line 15 e Percentage mn (f), divided by Part III, line 17 | rd, fourth, or fifth t | ax year as a section | 15 16 17 18 | zation, % % % % |
| 11 12 13 14 See 17 18 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business's regularly carried on. Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public support percentage for 2019 (Public support percentage from 2018 ction D. Computation of Invelinessment income percentage from 33 1/3% support tests - 2019. If the | r the organization's lic Support Pe (line 8, column (f), c 3 Schedule A, Part stment Incom 019 (line 10c, colur 2018 Schedule A, e organization did r | s first, second, the recentage divided by line 13, lill, line 15 e Percentage mn (f), divided by Part III, line 17 not check the box | rd, fourth, or fifth t column (f)) line 13, column (f)) on line 14, and line | ax year as a section | 15 16 17 18 33 1/3%, and line | zation, % % % % |
| 11 12 13 14 Sec 15 16 Sec 17 18 19 a | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support (Add lines 9, 10c, 11, and 12). First five years. If the Form 990 is for check this box and stop here. Ction C. Computation of Public support percentage from 2018 (Computation of Inversement income percentage from 2018 (133) support tests - 2019. If the more than 33 1/3%, check this box and stop stop of than 33 1/3%, check this box and 33 1/3%, check this box and 33 1/3%, check this box and 33 1/3%, check this box and 33 1/3%, check this box and 33 1/3%, check this box and 33 1/3%, check this box and 33 1/3%, check this box and 34 1/3%, check this box and 35 1/3%, check this box and 36 1/3% check this box and 36 1/3% check this box and 37 1/3%, check this box and 37 1/3%, check this box and 37 1/3%, check this box and 37 1/3%, check this box and 37 1/3%. | r the organization's lic Support Pe line 8, column (f), c 8 Schedule A, Part stment Incom 2018 Schedule A, organization did r and stop here. The | s first, second, the rcentage divided by line 13, lll, line 15 e Percentage mn (f), divided by Part III, line 17 not check the box organization qua | rd, fourth, or fifth t column (f)) line 13, column (f)) on line 14, and line liftes as a publicly s | ax year as a section | 15 16 17 18 33 1/3%, and line | zation, |
| 11 12 13 14 Sec 15 16 Sec 17 18 19 a | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business's regularly carried on. Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public support percentage for 2019 (Public support percentage from 2018 ction D. Computation of Invelinessment income percentage from 33 1/3% support tests - 2019. If the | r the organization's lic Support Pe line 8, column (f), c 8 Schedule A, Part stment Incom 2018 Schedule A, organization did r and stop here. The | s first, second, the rcentage divided by line 13, lll, line 15 e Percentage mn (f), divided by Part III, line 17 not check the box organization qua | rd, fourth, or fifth t column (f)) line 13, column (f)) on line 14, and line liftes as a publicly s | ax year as a section | 15 16 17 18 33 1/3%, and line | zation, |
| 11 12 13 14 Sec 15 16 Sec 17 18 19 a | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support (Add lines 9, 10c, 11, and 12). First five years. If the Form 990 is for check this box and stop here. Ction C. Computation of Public support percentage from 2018 (Computation of Inversement income percentage from 2018 (133) support tests - 2019. If the more than 33 1/3%, check this box and stop stop of than 33 1/3%, check this box and 33 1/3%, check this box and 33 1/3%, check this box and 33 1/3%, check this box and 33 1/3%, check this box and 33 1/3%, check this box and 33 1/3%, check this box and 33 1/3%, check this box and 34 1/3%, check this box and 35 1/3%, check this box and 36 1/3% check this box and 36 1/3% check this box and 37 1/3%, check this box and 37 1/3%, check this box and 37 1/3%, check this box and 37 1/3%, check this box and 37 1/3%. | r the organization's lic Support Pe (Ine 8, column (f), column 8 Schedule A, Part stment Incom 109 (line 10c, column 2018 Schedule A, e organization did reserved in the periorganization did reserv | s first, second, the rcentage divided by line 13, III, line 15 e Percentage mn (f), divided by Part III, line 17 not check the box organization qua not check a box o | rd, fourth, or fifth t column (f)) Inne 13, column (f)) on line 14, and line lifies as a publicly s in line 14 or line 19; | e 15 is more than a supported organiza, and line 16 is more | 15 16 17 18 33 1/3%, and line ation ore than 33 1/3%, | zation, % % % % 17 is not and |

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 F. If you checked 12d of Part I, complete Sections A and D. and complete Part V.)

| | Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V) | | | |
|-----|--|-------------|--------------|--|
| Sec | tion A. All Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Are all of the organization's supported organizations listed by name in the organization's governing | | | |
| • | documents? If "No," describe in Part VI how the supported organizations are designated. If designated by | | ' | |
| | class or purpose, describe the designation. If historic and continuing relationship, explain | 1 | | |
| 2 | Did the organization have any supported organization that does not have an IRS determination of status | | | |
| 2 | under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported | | | |
| | organization was described in section 509(a)(1) or (2) | 2 | | İ |
| 2- | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer | | | |
| Sa | • | За | | |
| | (b) and (c) below | Ja | - | |
| D | 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 | مد | | |
| | organization made the determination | 3b | | |
| С | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) | | | |
| _ | purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use | 3c | - | |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? If | | | |
| | "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below | 4a | | ├─ |
| b | | | | |
| | supported organization? If "Yes," describe in Part VI how the organization had such control and discretion | | | |
| | despite being controlled or supervised by or in connection with its supported organizations | 4b | - | |
| С | Did the organization support any foreign supported organization that does not have an IRS determination | | | |
| | under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used | | | 1 |
| | to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) | | | |
| | purposes. | 4c | ļ | - |
| 5а | 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) | 5a | ļ | <u> </u> |
| b | Type I or Type II only. Was any added or substituted supported organization part of a class already | | | |
| | designated in the organization's organizing document? | 5b | | <u> </u> |
| С | Substitutions only. Was the substitution the result of an event beyond the organization's control? | 5c_ | | ↓ |
| 6 | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to | | | |
| | anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class | | | |
| | benefited by one or more of its supported organizations, or (iii) other supporting organizations that also | | | ŀ |
| | support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in | | | ļ |
| | Part VI. | 6 | | |
| 7 | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor | | | 1 |
| | (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) | 7 | | |
| 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) | 8 | | |
| 9a | Was the organization controlled directly or indirectly at any time during the tax year by one or more | | | |
| | disqualified persons as defined in section 4946 (other than foundation managers and organizations described | | | |
| | in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI. | 9a | | |
| 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. | 9b | | |
| С | 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. | 9c | <u>L</u> | <u>L</u> |
| 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 | 10a | { | 1 |
| h | Did the aggregation have any expect hadrings in the tay year? (I be Schedule C. Form 4720, to | | 1 | |

determine whether the organization had excess business holdings)

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

| Sche | dule A (Form 990 or 990 EZ) 2019 BOYS & GIRLS CLUB OF AL | BANY | | 93-0549842 Page 6 |
|------|---|---------|----------------|--------------------------------|
| | t V Type III Non-Functionally Integrated 509(a)(3) Supportin | g Organ | izations | |
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifying | | | Part VI) See instructions. All |
| · | other Type III non-functionally integrated supporting organizations must co | | | · |
| Sect | ion 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 | | |
| Sect | ion B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Aggregate fair market value of all non-exempt-use assets (see | | | |
| | instructions for short tax year or assets held for part of year). | | | |
| a | Average monthly value of securities | 1a | | |
| b | Average monthly cash balances | 1b | | |
| с | Fair market value of other non-exempt-use assets | 1c | | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | | |
| е | 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 | <u></u> | |
| _8_ | Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| Sect | tion 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 | | |

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

Schedule A (Form 990 or 990-EZ) 2019

93-0549842 Page 7 Schedule A (Form 990 or 990-EZ) 2019 BOYS & GIRLS CLUB OF ALBANY Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **Current Year** 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 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2019 from Section C, line 6 9 Line 8 amount divided by line 9 amount 10 (ii) (iii) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Amount for 2019 Pre-2019 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 d From 2017 e From 2018 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2019 distributable amount Carryover from 2014 not applied (see instructions) 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 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 3j and 4c. 8 Breakdown of line 7 a Excess from 2015 b Excess from 2016

Schedule A (Form 990 or 990-EZ) 2019

c Excess from 2017d Excess from 2018e Excess from 2019

| Schedule A | (Form 990 or 990-EZ) 2019 BOYS & GIRLS CLUB OF ALBANY | 93-0549842 Page 8 |
|-------------|---|--|
| Part VI | Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a 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, Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1, Par Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional (See instructions.) | s 1 and 2; Part IV, Section C, t V, Section B, line 1e, Part V, |
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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.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

| | BOYS & GIRLS CLUB | | | 93-0549842 |
|-----|--|-------------------------|------------------------------|-----------------------------------|
| Par | t I Organizations Maintaining Donor Advise | d Funds or Oth | er Similar Funds or | Accounts. Complete if the |
| | organization answered "Yes" on Form 990, Part IV, lin | | | |
| | | (a) Donor ac | dvised 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 | writing that the asse | its held in donor advised fu | unds |
| | are the organization's property, subject to the organization's | exclusive legal cont | rol? | Yes No |
| 6 | Did the organization inform all grantees, donors, and donor a | idvisors in writing th | at grant funds can be used | only |
| | for charitable purposes and not for the benefit of the donor of | or donor advisor, or f | ior any other purpose conf | erring |
| | impermissible private benefit? | | | Yes No |
| Par | t II Conservation Easements. Complete if the org | ganization answered | l "Yes" on Form 990, Part I | IV, line 7 |
| 1 | Purpose(s) of conservation easements held by the organization | ion (check all that ar | oply). | |
| | Preservation of land for public use (for example, recrea | ition or education) | Preservation of a his | storically important land area |
| | Protection of natural habitat | | Preservation of a ce | ertified historic structure |
| | Preservation of open space | | | |
| 2 | Complete lines 2a through 2d if the organization held a qualif | fied conservation co | intribution in the form of a | conservation easement on the last |
| | day of the tax year | | | Held at the End of the Tax Year |
| а | Total number of conservation easements | | | 2a |
| b | Total acreage restricted by conservation easements | | | 2b |
| С | Number of conservation easements on a certified historic str | ructure included in (a | a) | 2c |
| d | Number of conservation easements included in (c) acquired | after 7/25/06, and n | ot on a historic structure | |
| | listed in the National Register | | | 2d |
| 3 | Number of conservation easements modified, transferred, re | leased, extinguished | d, or terminated by the org | anization during the tax |
| | year ▶ | | | |
| 4 | Number of states where property subject to conservation ea | sement is located 🕨 | · | |
| 5 | Does the organization have a written policy regarding the per | riodic monitoring, in | spection, handling of | |
| | violations, and enforcement of the conservation easements is | | | Yes No |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, | , handling of violation | ns, and enforcing conserva | ation easements during the year |
| | | | | |
| 7 | Amount of expenses incurred in monitoring, inspecting, hand | ling of violations, ar | nd enforcing conservation | easements during the year |
| | ▶ \$ | | | |
| 8 | Does each conservation easement reported on line 2(d) above | ve satisfy the require | ements of section 170(h)(4) | |
| | and section 170(h)(4)(B)(ii)? | | | └─ Yes └─ No |
| 9 | In Part XIII, describe how the organization reports conservation | | | |
| | balance sheet, and include, if applicable, the text of the footi | note to the organiza | tion's financial statements | that describes the |
| Da | organization's accounting for conservation easements t III Organizations Maintaining Collections o | f Art Historias | Tropouros or Otho | r Similar Assats |
| rai | | | | r Sillilar Assets. |
| | Complete if the organization answered "Yes" on Form | | | |
| 1a | If the organization elected, as permitted under FASB ASC 95 | • | | |
| | of art, historical treasures, or other similar assets held for pul | | | rance of public |
| | service, provide in Part XIII the text of the footnote to its fina | | | and also at warden at |
| Ь | If the organization elected, as permitted under FASB ASC 95 | • | | |
| | art, historical treasures, or other similar assets held for public | s exhibition, educati | on, or research in furtherar | ice 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 | | ular aparta for francis | |
| 2 | If the organization received or held works of art, historical tre | | | n, provide |
| | the following amounts required to be reported under FASB A | ADU BOR LEISTING TO 1 | .nese items. | * |
| a | Revenue included on Form 990, Part VIII, line 1 | | | \$ |
| D. | Assets included in Form 990. Part X | | | - → 30 |

| | | GIRLS CLUB | | | | | | <u>-054984</u> | |
|--------|---|--------------------------|------------|--------------------|----------------|----------------|----------------|------------------|--------------|
| Par | | | | | | | _ | | nued) |
| 3 | Using the organization's acquisition, accessi | on, and other record | ls, checl | k any of the | following that | t make sigi | nificant use i | of its | |
| | collection items (check all that apply). | | _ | | | | | | |
| а | Public exhibition | d | | | hange progra | ım | | | |
| b | Scholarly research | е | | Other | | | | | |
| С | Preservation for future generations | | | | | | | | |
| 4 | Provide a description of the organization's co | ollections and explai | n how th | ney further th | ne organizatio | on's exemp | ot purpose ir | n Part XIII | |
| 5 | During the year, did the organization solicit o | r receive donations | of art, hi | storical trea | sures, or othe | er sımılar a | ssets | | |
| | to be sold to raise funds rather than to be ma | | | | | | | Yes_ | No_ |
| Par | t IV Escrow and Custodial Arran | • | ete if the | organizatio | n answered " | 'Yes" on Fo | orm 990, Pa | rt IV, line 9, o | • |
| | reported an amount on Form 990, Par | | | | | | | | |
| 1a | Is the organization an agent, trustee, custod | ian or other intermed | diary for | contribution | s or other as | sets not in | cluded | | |
| | on Form 990, Part X? | | | | | | | Yes | L No |
| b | If "Yes," explain the arrangement in Part XIII | and complete the fo | llowing 1 | table [.] | | | | | |
| | | | | | | | | Amoun | <u>t</u> |
| | Beginning balance | | | | | | 1c | | |
| d | Additions during the year | | | | | | 1d | | |
| е | Distributions during the year | | | | | | 1e | | |
| f | Ending balance | | | | | | 1f | | т. |
| 2a | Did the organization include an amount on F | | | | | | <i>j</i> 7 | └── Yes | ∐ No |
| | If "Yes," explain the arrangement in Part XIII | | | | | | | | |
| Par | t V Endowment Funds. Complete | | | | 1 | | | hook (a) Fou | r voore book |
| | Danis and sand balance | (a) Current year | (8) P | rior year | (c) Two year | S Dack (a |) Three years | Dack (e) FOU | r years back |
| 1a | Beginning of year balance | | | | | | | | |
| D | Contributions | | | ··· | | | | | |
| C | Net investment earnings, gains, and losses | <u> </u> | i | | | | | | |
| a | Grants or scholarships | | | | | | | | |
| е | Other expenditures for facilities | | | | | | | ŀ | |
| | and programs Administrative expenses | | <u> </u> | | | | | | |
| f ~ | End of year balance | | | | | | | | |
| g 2 | Provide the estimated percentage of the cur | rent year end balanc | re /line 1 | a column (s | all hold as | <u> </u> | | l | |
| - | Board designated or quasi-endowment | Territ year erro barario | % | g, column (c | iji rielu as | | | | |
| a h | Permanent endowment | % | _^* | | | | | | |
| C | · · · · · · · · · · · · · · · · · · · | | | | | | | | |
| · | The percentages on lines 2a, 2b, and 2c sho | | | | | | | | |
| 32 | Are there endowment funds not in the posse | | ation the | at are held a | nd administe | red for the | organizatio | n | |
| - Ou | by | Joons I or this organia | | | | | | | Yes No |
| | (i) Unrelated organizations | | | | | | | 3a(ı) | 100 110 |
| | (ii) Related organizations | | | | | | | 3a(II) | |
| b | If "Yes" on line 3a(ii), are the related organiza | ations listed as requi | red on S | Schedule R? | | | | 3b | |
| 4 | Describe in Part XIII the intended uses of the | • | | | | | | | |
| Pai | t VI Land, Buildings, and Equipn | | | · <u>-</u> | | | • | | |
| | Complete if the organization answere | d "Yes" on Form 99 | 0, Part I | V, line 11a S | See Form 990 |), Part X, lir | ne 10 | | |
| | Description of property | (a) Cost or o | | 1 | or other | | umulated | (d) Boo | k value |
| | , , , , | basis (investi | | | (other) | depr | eciation | , , | |
| 1a | Land | | | 83 | 7,790. | | | 83 | 7,790. |
| | Buildings | | | | 1,143. | 3,98 | 82,736 | | 8,407. |
| | Leasehold improvements | | | | | | | | |
| | Equipment | | | 51 | 5,908. | 3 ! | 56,898 | . 15 | 9,010. |
| e | Other | | | | 2,250. | | | | 2,250. |
| Tota | . Add lines 1a through 1e (Column (d) must e | equal Form 990, Part | X, colur | nn (B), line 1 | 10c) | | > | 8,48 | 7,457. |

| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation Cost or en | d-of-year market value |
|---|--|--|---------------------------------------|
| 1) Financial derivatives | | | |
| 2) Closely held equity interests | | | |
| 3) Other | | | |
| (A) | | | |
| (B) | | | |
| (C) | | | · |
| (D) | | | |
| (E) | | | |
| (F) | · · · · · · · · · · · · · · · · · · · | | |
| (G) | | | |
| (H) | | | |
| Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.) | | | |
| Part VIII Investments - Program Related. | | | |
| Complete if the organization answered "Yes" of | on Form 990. Part IV. line | 11c See Form 990 Part X line 13 | |
| (a) Description of investment | (b) Book value | (c) Method of valuation Cost or en | d-of-year market value |
| | (-, | | |
| (1) | | | |
| | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets. | | | · · · · · · · · · · · · · · · · · · · |
| | on Form 000 Don't IV line | 11d Con Form 000 Port V line 15 | |
| Complete if the organization answered "Yes" (| Description | 110. See Form 990, Part X, IIIIe 15 | (b) Book value |
| | Description | | (b) Book value |
| (1) | - | | - |
| (2) | <u> </u> | | |
| (3) | | | |
| (4) | | | |
| (5) | <u> </u> | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line | 15.) | _ | <u></u> |
| Part X Other Liabilities. | | | |
| Complete if the organization answered "Yes" | on Form 990, Part IV, line | 11e or 11f See Form 990, Part X, line 2 | |
| 1. (a) Description of liability | <u>. </u> | | (b) Book value |
| (1) Federal income taxes | | | |
| (2) ACCRUED LIABILITIES | | | 68,904 |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| | | | |
| (7) | | | |
| (7) | | | |
| (7) (8) | | · · · · · · · · · · · · · · · · · · · | |
| (7) (8) (9) | 25) | • | 68.904 |
| (7) (8) | | to the organization's financial statements | 68,904 that reports the |

Schedule D (Form 990) 2019

| Sche | dule D (Form, 990) 2019 BOYS & GIRLS CLUB OF ALBAN | | | 549842 | Page 4 |
|-------------|--|---------------------------------------|--------------|------------------|---|
| Par | t XI Reconciliation of Revenue per Audited Financial Stateme | ents With Revenue per P | leturn | • | |
| | 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 | 3,534 | <u>,232.</u> |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | 1 1 | | | |
| а | Net unrealized gains (losses) on investments | 2a 326. | | | |
| b | Donated services and use of facilities | 2b | | | |
| C | Recoveries of prior year grants | 2c | | | |
| d | Other (Describe in Part XIII.) | | ا ۵۰ ا | | 326. |
| e | Add lines 2a through 2d Subtract line 2e from line 1 | | 2e 3 | 3,533 | |
| 3 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | 3 | 3,333 | , |
| 4 a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | | |
| b | Other (Describe in Part XIII) | 4b <411,666. | | | |
| c | Add lines 4a and 4b | 75 1 2 2 2 7 5 5 | 4c | <411 | ,666. |
| 5 | Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) | | 5 | 3,122 | |
| | t XII Reconciliation of Expenses per Audited Financial Statem | nents With Expenses per | Retu | | |
| | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a | <u> </u> | | | |
| 1 | Total expenses and losses per audited financial statements | | 1 | 3,220 | ,014. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | | | | |
| а | Donated services and use of facilities | 2a | 1 | | |
| b | Prior year adjustments | 2b |] | | |
| С | Other losses | 2c |] | | |
| d | Other (Describe in Part XIII.) | 2d 411,666. | 4 | | |
| е | Add lines 2a through 2d | | 2e | | <u>,666.</u> |
| 3 | Subtract line 2e from line 1 | | 3 | 2,808 | <u>,348.</u> |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1 | 1 1 | | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | - | | |
| b | Other (Describe in Part XIII) | 4b | - | | ^ |
| | Add lines 4a and 4b | | 4c | 2 000 | 240 |
| 5 Do | Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) | | 5 | 2,808 | ,348. |
| | t XIII Supplemental Information. | t IV lines 1h and 2h Bart V line | 4 Port | V line 2: Bort | |
| | de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Par 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add | | 4, Fait | A, 11118 2, Fait | ^1, |
| IIII | zo and 4b, and Fart XII, lines zo and 4b. Also complete this part to provide any add | ditional information | | | |
| | | | | | |
| PAI | RT X, LINE 2: | | | | |
| | | | | | |
| BO | S & GIRLS CLUB OF ALBANY IS A NOT-FOR-PRO | FIT ORGANIZATION | THA | AT IS | |
| | | | | | |
| EXI | EMPT FROM INCOME TAXES UNDER SECTION 501(C | C)(3) OF THE INTE | ERNA | REVEN | UE |
| | | | | | |
| COI | DE, EFFECTIVE FEBRUARY 1, 1957. THEREFORE, | NO PROVISION FO | OR II | NCOME T | <u>AXES</u> |
| | | | | | |
| HA: | BEEN MADE. IN ADDITION, THE ORGANIZATION | QUALIFIES FOR T | HE (| CHARITA | BLE |
| ~~- | | (4) (2) 220 22 6 5 | | | |
| <u>COI</u> | TRIBUTION DEDUCTION UNDER SECTION 170(B) | 1)(A) AND HAS BE | EEN (| CLASSIF. | TED |
| 7 C | AN ODCANIZACION CHACT TO NOCE A DETUACE COL | משמונתו ואדראת מונת | · CmT/ | זאר | |
| AS | AN ORGANIZATION THAT IS NOT A PRIVATE FOU | INDATION UNDER SE | rCTT(| אזכ | |
| 509 | P(A)(2). | | | | |
| <u> 50.</u> | /(R) (2) • | | | | |
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| | | · · · · · · · · · · · · · · · · · · · | | | |
| THI | TAX-EXEMPT STATUS CAN BE REVOKED BY THE | INTERNAL REVENUE | SEI | RVICE A | SA |
| | | | | | |
| RE | SULT OF DIRECT VIOLATIONS OF LAWS AND REGU | JLATIONS GOVERNIN | 1G 5 | 01(C)(3 |) |
| | | | | | |
| OR | BANIZATIONS. THE ORGANIZATIONOS OPERATING | POLICY REQUIRES | | | |
| 93205 | 1 10-02-19 | | Sched | lule D (Form 9 | 990) 2019 |

PART XII, LINE 2D - OTHER ADJUSTMENTS:

CONSESSIONS PURCHASES 7,226.

DIRECT FUNDRAISING EXPENSE 403,640.

PARTY & BIRTHDAY EXPENSES 800.

TOTAL TO SCHEDULE D, PART XII, LINE 2D 411,666.

SCHEDULE G

Department of the Treasury

(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.

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

OMB No 1545-0047

Open to Public Inspection

Schedule G (Form 990 or 990-EZ) 2019

| Internal Revenue Service | ▶ Go | to www.irs.gov/Form990 for | instruction | s and | the latest informat | | | Inspection |
|--------------------------|-----------------------|--|-------------------|--------------------|-----------------------|---------|-----------------------------|---------------------|
| Name of the organizatio | n | | | | | | Employer ide | ntification number |
| | BOYS & | GIRLS CLUB OF A | LBANY | | | | 93-0549 | 842 |
| | | Complete if the organization a | nswered "Y | es" o | n Form 990, Part IV, | line 1 | 7 Form 990-EZ | filers are not |
| | complete this part | | | | | | | |
| | • | sed funds through any of the fo | _ | | | | | |
| a Mail solicita | | | | - | overnment grants | | | |
| | l email solicitations | | | - | nment grants | | | |
| c Phone solic | | g L Sp | ecial fundra | using | events | | | |
| d In-person so | | | | | | | | |
| = | | or oral agreement with any indiv | | | | | | |
| | | art VII) or entity in connection v | | | | | └── Yes | |
| | | viduals or entities (fundraisers) | pursuant to | agree | ments under which | tne tu | noralser is to b | oe . |
| compensated at I | east \$5,000 by the | organization | | | | | | |
| | | | (iii) fund | Did | l | (v) | Amount paid | (vi) Amount paid |
| (i) Name and addres | | (II) Activity | have c | ustody | (iv) Gross receipts | to (o | r retained by) undraiser | to (or retained by) |
| or entity (fun | draiser) | | or cor contrib | trol of utions? | from activity | | ed in col. (i) | organization |
| | | | Yes | No | | | | |
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| Total | | | | • | | | | |
| | nich the organization | on is registered or licensed to so | olicit contrib | ution | s or has been notifie | d it is | exempt from re | egistration |
| or licensing | <u></u> | | | | | | | |
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2019 BOYS & GIRLS CLUB OF ALBANY 93-0549842 Page 2 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 BOARD CELEBRATION (add col. (a) through OF TREES AUCTION col (c)) (total number) (event type) (event type) Gross receipts 707,875. 240,371. 172,508. 1,120,754. Less Contributions 240,371. 172,508. Gross income (line 1 minus line 2) 707.875. 1,120,754. Cash prizes Noncash prizes Expenses Rent/facility costs Food and beverages Entertainment Other direct expenses 288,133. 43,092 72.415 403,640 403,640 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary Subtract line 10 from line 3, column (d) Part III 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 Revenue (c) Other gaming (a) Bingo bingo/progressive bingo col. (a) through col (c)) Gross revenue 2 Cash prizes **Direct Expenses** Noncash prizes Rent/facility costs Other direct expenses % Yes Yes Yes Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities: a is the organization licensed to conduct gaming activities in each of these states? b If "No," explain 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ___ Yes b If "Yes," explain. _

| Sch | nedule G (Form, 990 or 990-EZ) 2019 BOYS & GIRLS CLUB OF ALBANY | 93-0549 | 842 | 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 |
| 13 | Indicate the percentage of gaming activity conducted in: | | | |
| ē | The organization's facility | 13a | | % |
| ŧ | An outside facility | 13b | | % |
| 14 | Enter the name and address of the person who prepares the organization's gaming/special events books and record | s. | | |
| | Name | | | |
| | Address ▶ | <u></u> | | |
| 15 | a Does the organization have a contract with a third party from whom the organization receives gaming revenue? | | Yes | ☐ No |
| ŧ | o If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amou | ınt | | |
| | of gaming revenue retained by the third party > \$ | | | |
| • | c If "Yes," enter name and address of the third party. | | | |
| | Name | | | |
| | Address ▶ | | | |
| 16 | Gaming manager information | | | |
| | Name | | | |
| | Gaming manager compensation > \$ | | | |
| | | | | |
| | Description of services provided | | | |
| | | | | |
| | | | | |
| | Director/officer Employee Independent contractor | | | |
| 17 | Mandatory distributions | | | |
| | a Is the organization required under state law to make charitable distributions from the gaming proceeds to | | | |
| | retain the state gaming license? | | Yes | ☐ No |
| ı | Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent ii | n the | | |
| | organization's own exempt activities during the tax year ▶ \$ | | | |
| Pa | Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); | and Part III, III | ายร 9, | 9b, 10b, |
| | 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions | | | |
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| Schedule G | (Form, 990 or 990-EZ) BOYS & GIRLS CLUB OF ALBANY | 93-0549842 Page 4 |
|-------------|---|-------------------|
| Part IV | Supplemental Information (continued) | |
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SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

OMB No 1545-0047

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

Attach to Form 990.

Open to Public

Employer identification number

93-0549842

Name of the organization

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

BOYS & GIRLS CLUB OF ALBANY

Inspection

| Par | t I Types of Property | | | | | | | | |
|-----|---|-------------------------------|--------------------------------------|---|--------------|---|----------|--------|---------|
| | | (a) Check if applicable | (b) Number of contributions or | (c) Noncash contri amounts report Form 990, Part VII | ed on | (d) Method of de noncash contribu | | _ | s |
| _ | Art - Works of art | | Items continuated | romi 990, Part VII | i, iiile ig | | | | |
| 1 | Art - Historical treasures | | ··· ····- | | | | | | |
| 2 | | | | | | | | | |
| 3 | Art - Fractional interests | <u>-</u> | | ., | | ÷ | | | |
| 4 | Books and publications Clothing and household goods | | | | | | | | |
| 5 | · · | | | | | - | | | |
| 6 | Cars and other vehicles | | | | | ···································· | | | |
| 7 | Boats and planes | | | · - | | | | | |
| 8 | Intellectual property | | | | | | | | |
| 9 | Securities · Publicly traded | | | | | | | | |
| 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 | Taxidermy | | | | | | | | |
| 22 | Historical artifacts | | | | | | | | |
| 23 | Scientific specimens | | | | | | | | |
| 24 | Archeological artifacts | | | 0.50 | 226 | | | · · · | |
| 25 | Other (<u>AUCTION DONAT</u>) | X | 882 | | <u>,006.</u> | | | | |
| 26 | Other (MISCELLANEOUS) | X | <u> </u> | | <u>,255.</u> | | | | |
| 27 | Other (PROGRAM SUPPL) | X | <u> </u> | | <u>,095.</u> | | | | |
| 28 | Other ► (DENTAL SUPPLI) | X | | · | ,172. | | | | |
| 29 | Number of Forms 8283 received by the organ | | - | | | | | | |
| | for which the organization completed Form 82 | 83, Part IV, | Donee Acknowled | gement [| 29 | | | 1- | |
| | | | | | | | | Yes | No |
| 30a | During the year, did the organization receive b | • | • | | | = | | | |
| | must hold for at least three years from the dat | e of the initi | al contribution, and | d which isn't require | ed to be u | sed for | | | |
| | exempt purposes for the entire holding period | ? | | | | | 30a | | X |
| b | If "Yes," describe the arrangement in Part II | | | | | | | | |
| 31 | Does the organization have a gift acceptance | policy that r | equires the review | of any nonstandar | d contribu | itions? | 31 | Х | |
| 32a | Does the organization hire or use third parties | or related o | rganizations to sol | ıcıt, process, or sel | l noncash | | | | _ |
| | contributions? | | | | | | 32a | | X |
| b | If "Yes," describe in Part II | | | | | | | | |
| 33 | If the organization didn't report an amount in o | column (c) fo | or a type of proper | ty for which column | ı (a) ıs che | cked, | | | |
| | describe in Part II | | | | | · - · · · · · · · · · · · · · · · · · · | L | | <u></u> |
| LHA | For Paperwork Reduction Act Notice, see | the Instruc | tions for Form 99 | 90. | | Schedule N | ار (Forr | n 990) | 2019 |

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

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

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

| BOYS & GIRLS CLUB OF ALBANY | 93-0549842 |
|---|---------------------------------------|
| FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION M | ISSION: |
| CARING, RESPONSIBLE CITIZENS. | |
| | |
| FORM 990, PART VI, SECTION A, LINE 2: | · · · · · · · · · · · · · · · · · · · |
| THE BOARD OF DIRECTORS HAS SOME MEMBERS WHO ARE RELATED T | O EACH OTHER ON |
| THE BOARD OF DIRECTORS. | |
| FORM 990, PART VI, SECTION B, LINE 11B: | |
| THE TAX RETURN IS PRESENTED TO THE BOARD AT A BOARD MEETI | NG AND REVIEWED. |
| | |
| FORM 990, PART VI, SECTION B, LINE 12C: | |
| THE CONFLICT OF INTEREST FORMS ARE FILLED OUT ANNUALLY BY | ALL STAFF AND |
| BOARD MEMBERS. | |
| | |
| FORM 990, PART VI, SECTION B, LINE 15: | |
| THE EXECUTIVE COMMITTEE ANNUALLY SETS GOALS FOR THE CEO P | OSITION. THESE ARE |
| DEVELOPED FROM THE ANNUAL BOARD RETREAT. IN THE 4TH QUAR | TER OF OUR FISCAL |
| YEAR, THE EXECUTIVE COMMITTEE MAKES A RECOMMENDATION BASE | D UPON THE REVIEW |
| OF THESE GOALS. THE RECOMMENDATION GOES TO THE ENTIRE BO | ARD ALONG WITH ALL |
| SALARY RECOMMENDATIONS. | · · · · · · · · · · · · · · · · · · · |
| IN UTILIZING BOYS AND GIRLS CLUB OF ALBANY'S SALARY ADMIN | ISTRATION PLAN IS |
| DEVELOPED SPECIFICALLY FOR THE ORGANIZATION. WITHIN THES | E DEVELOPED |
| RANGES, STAFF SALARIES ARE RECOMMENDED. EACH YEAR, STAFF | MEMBERS' ANNUAL |
| GOALS ARE ESTABLISHED IN COOPERATION WITH THE PERSONNEL C | OMMITTEE AND |
| EXECUTIVE DIRECTOR. BASED UPON THEIR PERFORMANCE AGAINST | |
| GOALS, SALARY RECOMMENDATIONS ARE ESTABLISHED. ONCE DECI | |

| Schedule O (Form.990 or 990-EZ) (2019) | Page 2 |
|---|---|
| Name of the organization BOYS & GIRLS CLUB OF ALBANY | Employer identification number 93-0549842 |
| SALARIES ARE PRESENTED TO THE ENTIRE BOARD OF DIRECTORS. | |
| FORM 990, PART VI, SECTION C, LINE 19: | |
| UPON REQUEST BY AN INTERESTED PARTY. | |
| FORM 990, PART XII, LINE 2C | |
| THE ORGANIZATION DID NOT CHANGE ITS OVERSIGHT PROCESS SIN | ICE THE PRIOR |
| YEAR. | |
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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

2019

OMB No 1545-0047

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

Open to Public Inspection

(g) Section 512(b)(13) controlled Employer identification number entity? Direct controlling Yes 93-0549842 Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year entity Direct controlling entity End-of-year assets NONE <u>e</u> status (if section Public charity 501(c)(3)) 501(c)(3) Total income Exempt Code section 509(A)(3) ਉ Legal domicile (state or Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 Legal domicile (state or foreign country) foreign country) REGON RAISING FUNDS FOR BOYS AND Primary activity SIRLS CLUB OF ALBANY BOYS & GIRLS CLUB OF ALBANY Primary activity 9 23-7147034, 1215 HILL STREET SE, ALBANY, OR ALBANY BOYS AND GIRLS CLUB FOUNDATION Name, address, and EIN (if applicable) Name, address, and EIN of related organization of disregarded entity Name of the organization Part Part II

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Schedule R (Form 990) 2019

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

93-0549842

Page 2

Schedule R (Form 990) 2019 BOYS & GIRLS CLUB OF ALBANY

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year Part III

General or Percentage managing ownership B Code V-UB1 General or Pramount in box managing or 20 of Schedule Pariner? K-1 (Form 1065) Yes No managing (9 $\boldsymbol{\epsilon}$ **Disproportionate** Yes No allocations? Ξ Share of end-of-year assets **6** Share of total income ε Predominant income (related, unrelated, excluded from tax under sections 512-514) Direct controlling entity ਉ (c)
Legal
domicile
(state or
foreign
country) Primary activity Name, address, and EIN of related organization

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations freated as a corporation or frust during the tax year. Part IV

| | (E) | 512(b)(13) controlled entity? | Yes No | | | | _ | | | | | |
|--|-----|--|-----------|--|--|---|---|---|--|--|--|--|
| | | | Yes | | | | | | | | | |
| | Ξ | Percentage ownership | | | | | | _ | | | | |
| | | Share of end-of-year | dssets | | | | | | | | | |
| | | Share of total income | | | | | | | | | | |
| | (e) | Type of entity (C corp, S corp, | or trust) | | | | | | | | | |
| | (p) | olling. | | | | | | | | | | |
| | (၁) | Legal domicile (state or | country) | | | · | | | | | | |
| ring the tax year. | (Q) | Primary activity | | | | | | | | | | |
| organizations treated as a corporation or trust during the tax year. | (a) | Name, address, and EiN of related organization | | | | | | | | | | |

Schedule R (Form 990) 2019

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Page 3

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Yes

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Schedule R (Form 990) 2019 BOYS & GIRLS CLUB OF ALBANY

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

| sted in Parts II, III, or IV of this schedule. | ization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? |
|--|---|
| of this sch | of the follov |
| II, III, or IV | ae in any c |
| d in Parts II, III, oi | tion enga |
| irty is liste | e organiza |
| If any ent | ar, did the |
| lete line 1 | the tax ve |
| te: Comp | Dunna |
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| | Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity |
|---|---|
| | r (iv) rent froi |
| | royalties, o |
| , | annuities, (iii) |
| , | interest, (ii) |
| , | Receipt of (i) |
| | |

- Gift, grant, or capital contribution to related organization(s)
- Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- Dividends from related organization(s)
- Sale of assets to related organization(s)
- Purchase of assets from related organization(s)
- Exchange of assets with related organization(s)
- Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)

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- Performance of services or membership or fundraising solicitations for related organization(s)
- m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o Sharing of paid employees with related organization(s)
- p Reimbursement paid to related organization(s) for expenses
- g Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- S Other transfer of cash or property from related organization(s)

| i | |
|---|--|
| e above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds | |
| above is | |
| iny of the | |
| answer to a | |
| If the | |
| 2 | |
| | |

| (a) Name of related organization | (b) Transaction type (a·s) | (c) Amount involved | (d) Method of determining amount involved |
|---|----------------------------------|------------------------|---|
| (1) ALBANY BOYS AND GIRLS CLUB FOUNDATION | U | 215,515. | 215,515.FAIR MARKET VALUE |
| (2) | | | |
| 9 | | | |
| (4) | | | |
| (5) | | | |
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Schedule R (Form 990) 2019

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37 Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

| 8. <u>c</u> | | I | ı | I | 1 | ı | ا <u>م</u> |
|--|--|---|---|---------|---|----|----------------------------|
| (th) (i) (j) (k) Dispropor- Disp | | | | | | | Schedule R (Form 990) 2019 |
| reral or Pe naging or s No | | | | | | | |
| Gen Gen Yes | | | | | | | mle R |
| (i) e V-UBI t in box edule K edule K n 1065) | | | | | | | Sched |
| Code amount of Sch (Forr | | | | | | | |
| Spropor- tionate ocations? | | | | | | | |
| | | | | | | | |
| (g) Share of end-of-year assets | | | | | | | |
| Share of total income | | | | | | | |
| (e) Are all Are all Solicio(3) Ougs y Ves No | | | | | | | |
| ome ed, under (14) | | | | | | | |
| Predominant income particular (related, unrelated, excluded from tax under sections 512-514) | | | | | | | |
| redomii (related sluded fu | | | | | | | |
| gn exc | | | | <u></u> | | | |
| (c) Legal domicile (state or foreign country) | | | | | | | |
| Legal (state cou | | | | | | | |
| | | | | | | | |
| activity | | | | | | | |
| (b) Primary activity | | | | | ' | | |
| _ <u>~</u> | | | | | | 10 | |
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| z | | | | | | | |
| (a) (b) (c) Name, address, and EiN Primary activity Legal do: of entity (state or f count | | | | | | | |
| (a) address of entir | | | | | | | |
| lame, 8 | | | | | | | |
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| Schedule R (For | rm 990) 2019 | BOYS & GIRLS | CLUB OF A | LBANY | 93-0549842 Page 5 |
|-----------------|------------------------------------|---------------------------------------|---------------------------------------|---------------------|---------------------------------|
| Part VII Su | rm 990) 2019 upplemental Inforn | nation | | | |
| Pro | ovide additional informat | ion for responses to que | estions on Schedule F | R See instructions. | |
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