DAA

t	11/2020 8 25 AM Pg 4 990-T (2019) Las Vegas Boys and Girls Club 94-2965164		Page 2
	rt III Total Unrelated Business Taxable income		1 age &
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see		
~-	_	32	13,620
33	Amounts paid for disallowed fringes	33	20,020
34	Chantable contributions (see instructions for limitation rules) See Stmt 3	34	1,362
35	Total unrelated business taxable income before pre-2018 NOLs and specific deductions. Subtract line		
00	34 from the sum of lines 32 and 33	35	12,258
36	Deductions for net operating loss ansing in tax years beginning before January 1, 2018 (see	1	
50	instructions)	36	
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37	12,258
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38	1,000
39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,	1	1,000
35	enter the smaller of zero or line 37	39	11,258
\\ Ra		1 1	11/250
40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0 21)	40	2,364
41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on	1	2/301
	the amount on line 39 from Tax rate schedule or Schedule D (Form 1041)	41	
42	Proxy tax. See instructions	42	
43	Alternative minimum tax (trusts only)	43	
44	Tax on Noncompliant Facility Income. See instructions	44	
45	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45	2,364
\	rt V Tax and Payments		
46a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	T	
b	Other credits (see instructions) 46b	┨ ▮ ┆	
c	General business credit Attach Form 3800 (see instructions) 46c		
d	Credit for prior year minimum tax (attach Form 8801 or 8827)		
e	Total credits. Add lines 46a through 46d	46e	
47	Subtract line 46e from line 45	47	2,364
48	Other taxes	48	2,301
49	Total tax. Add lines 47 and 48 (see instructions)	49	2,364
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k) line 3	50	2,301
50 51a	Payments A 2018 overpayment credited to 2019		
51a b	711 -		
C	2019 estimated tax payments Tax deposited with Form 8868 51c	4	
d	Foreign organizations Tax paid or withheld at source (see instructions) 51d	┨ ┦ ┦ ┦	
e	Backup withholding (see instructions) 51e	1	
•	Credit for small employer health insurance premiums (attach Form 8941) 51f	- 1	
	Other credits, adjustments, and payments. Form 2439	🚦	
9		1 1	
50	Total payments. Add lines 51a through 51g Other Total ▶ 51g 51g	52	2,360
52 53	Estimated tax penalty (see instructions). Check if Form 2220 is attached	53	2,300
53 54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54	4
5 4 55	Overpayment. If line 52 is less than the total of lines 49, 50, and 53, enter amount overpaid	55	
.56	Enter the amount of line 55 you want Credited to 2020 estimated tax Refunded	56	
	rt VI Statements Regarding Certain Activities and Other Information (see instructions)	1 30	
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "YES," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "YES," enter the name of the foreign country		Yes No
58	here During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign tr	ust?	X
59	If "YES," see instructions for other forms the organization may have to file Enter the amount of tax-exempt interest received or accrued during the tax year \$ Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and believed.	of itie	
Sig	In	ci, it is	May the IRS discuss this return with the preparer shown below
Her			(see instructions)?
	Signature of officer Date Title		- X Yes No
	Print/Type preparer's name Preparer's signature Date	Check	ıf PTIN
Paid	Jessica P Sayles Jessica P Sayles 4 05/11/20	self-em	ployed P01530213
	7.7	EIN D	88-0374623
Use		· =::-:	
U30	Firm's address Las Vegas, NV 89123-2839	e no	702-269-9992
			Form 990-T (2019)

	990-T (2019) Las Ve						94-2	965164		<u> </u>	Pa	age 3
<u>Sct</u>	nedule A - Cost of Goo	ds Sold. Enter	metho	od of invent	ory valuati	<u>on ▶</u>						
1	Inventory at beginning of ye	ar 1		6	Inventory	at end of y	ear		6			
2	Purchases	2		7	Cost of g	oods sold	. Subtra	ct				
3	Cost of labor	3			line 6 from	n line 5. En	ter here	and				
4a	Additional sec 263A costs				in Part I, li	ine 2			7			
	(attach schedule)	4a		8	Do the rul	es of section	on 263A	(with respect to			Yes	No
b		4b		į	property p	roduced or	r acquire	ed for resale) apply				
5	(attach schedule) Total. Add lines 1 through 4	 			to the orga		•	, , , ,				
Sch	nedule C - Rent Incom		roper	tv and Pers	onal Pro	perty Le	ased \	With Real Prope	rtv)	· · · · ·	
	ee instructions)	• (• • • • • • • • • • • • • • • • • •		.,		, ,			,	,		
	scription of property											
(1)	N/A											
	14/ 21											
(2)		<u> </u>										
(3)												
(4)		0.0								·		
		2 Rent receiv	ed or accri									
						directly connected with the income						
					in columns 2((a) an	d 2(b) (attach schedu	ie)				
	more than 50%)			50% Of It tile fell	is based on pro	in or income)					-	
(1)	·									-		
(2)												
(3)												
(4)												
Tota	<u> </u>		Total					(b) Total deduction	S.			
(c) T	otal income. Add totals of co	olumns 2(a) and 2(l). Enter	•				Enter here and on pa				
	and on page 1, Part I, line 6,							Part I, line 6, column	(B) ▶	<u> </u>		
<u>Sct</u>	nedule E – Unrelated D	ebt-Financed	<u>Incom</u>	e (see instru	ctions)							
				2.00	f			3 Deductions directly c	onne	cted with or allocable	to	
	1. Description of debt-fin	anced property			ss income from one le to debt-finance			debt-fina	nced	property		
					property		(a) Straight line depreciation			(b) Other deductions		
					_			(attach schedule)		(attach sche	dule)	
(1)	N/A											
(2)												
(3)												
(4)		•										
	4 Amount of average	5. Average adjusted			6. Column					8. Allocable dec	luctions	
	acquisition debt on or allocable to debt-financed	of or allocable to debt-financed prop			4 divided			ross income reportable		(column 6 x total c	of column	ns
	property (attach schedule)	(attach schedule	-		by column 5		(0	column 2 x column 6)		3(a) and 3(b))	
(1)						%			十	-		
(2)						%			\top			
					•	%			十	-		
(3) (4)						,, %			+			
(4)				•			Enter	here and on page 1,	\top	Enter here and o	าก กลด	e 1
								I, line 7, column (A).		Part I, line 7, co		
Tota	.lo					▶		. ,		,		•
	IIS Il dividende-received deduc	tione included in a	oluma e			- (+			

Schedule F - Interest, Annu	ities. Rova	ties.	and Ren	ts Fro	m Controll	ed Or	ganiz	ations	(see instruc	tions)	
•				Exem	pt Controlled	d Orga	nizatio	ns	1		
1 Name of controlled organization	ıd	dentification number			Net unrelated income ass) (see instructions)		Total of specified payments made		5. Part of column 4 that included in the controlling organization's gross inco		Deductions directly connected with income in column 5
(1) N/A						_					-
(2)										-	<u> </u>
(3)											
(4)								·			
Nonexempt Controlled Organiza	tions										
7 Taxable Income	7. Tavable Iscamo		. Net unrelated income 9 oss) (see instructions)		payments made included		icluded in t	of column 9 that is in the controlling on's gross income		11. Deductions directly connected with income in column 10	
(1)							ļ				
(2)							<u> </u>				
(3)							4				
(4)							—				
Totals						•	E	nter here ar	ns 5 and 10 nd on page 1, , column (A)	Ent	dd columns 6 and 11 ter here and on page 1, art I, line 8, column (B)
Schedule G - Investment In	come of a	Secti	on 501(c)(7), (9), or (17) O	rgani	zatio	n (see i	nstructions)		
1 Description of income			2 Amount of Ir		3. De directly	ductions connecte schedule	ed		4. Set-asides		5 Total deductions and set-asides (col 3 plus col 4)
(1) N/A											
(2)		1						İ			
(3)	•	İ									
(4)		1									
Totals	>	Ent Pa	er here and o rt I, line 9, col	n paye 1, lumn (A).		****			, ,		nter here and on page 1, Part I, line 9, column (B)
Schedule I - Exploited Exer	npt Activity	Inco	me, Oth	er Tha	n Advertisi	ing In	come	(see ir	structions)		
Description of exploited activity	2 Gross unrelated business incor from trade of business	- 1	3. Expen directly connected productio unrelate business in	y I with in of ed	4 Net income (from unrelated or business (co 2 minus column If a gain, composite 5 through	trade lumn n 3) oute	from IS no	oss income activity tha of unrelated less income	t attnbu	enses table to mn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1) N/A											
(2)											
(3)		_ 1									
(4)									ŀ		
Totals	Enter here and page 1, Part line 10, col (A	۱,	Enter here a page 1, P line 10, col	arti,							Enter here and on page 1, Part II, line 25
Schedule J – Advertising In	come (see i	nstruc	ctions)		····						,1
Part I Income From P	eriodicals l	Repo	rted on a	Cons	olidated B	asis			-		
1 Name of penodical	2. Gross advertising income		3 Dire	ct	4. Advertising gain or (loss) 2 minus col 3 a gain, compicols 5 throug	ng (col i) If ute		Circulation		dership sts	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1) N/A										_	
(2)		1				1					
(3)						Ī					
(4)											
Totals (carry to Part II line (5))										_	

	(2010) — — · · · ·	<u> </u>					
Part II	Income From F	Periodicals Repo	orted on a Separa	te Basis (For	each periodical li	sted in Part II, fi	II in columns
_	2 through 7 on a	a line-by-line bas	is.)				
				4.44	1		- F

2 through 7 on	a line-by-line bas	IS <u>.)</u>				
1. Name of penodical	2 Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) if a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1) N/A						
(2)						
(3)			_			
(4)		1				
Totals from Part I			<u> </u>			L
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)]			Enter here and on page 1, Part II, line 26
Totals, Part II (lines 1-5)			<u> </u>			<u> </u>

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

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

Form **990-T** (2019)

8519 Las Vegas Boys and Girls Club

Federal Statements

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FYE: 12/31/2019

94-2965164

Statement 1 - Form 990-T, Part I, Line 5 - Income (Loss) from Partnerships or S-Corps

Name of Partnership or S-Corp		Gross Income	Direct Deductions (Part. only)		Net Income	
Rental income Sch K-1	\$_	14,870	\$	\$	14,870	
Total	\$_	14,870	\$	0 \$	14,870	

Statement 2 - Form 990-T, Part II, Line 28 - Other Deductions

Description		Amount
Accounting services	\$_	1,250
Total	\$_	1,250

Statement 3 - Form 990-T, Part III, Line 34 - Charitable Contributions

Description	 Amount
Current year Contributions Prior year Contributions	\$ 544,576 550,477
Total Contributions Available Less: Contributions Dissallowed	 1,095,053 1,093,691
Total Deduction Allowed	1,362