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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 black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 2008 Open to Public Inspection

<u>A</u>	For the	e 2008 cal	endar y	ear, or tax year beginning $7/01/08$, and ending $6/30/09$							
В	Check if a	applicable	Please	C Name of organization	D	Emplo	yer identification number				
\Box	Address	change	use IRS label or	Boys & Girls Clubs of Central Iow	a						
\Box	Name ch	ange	print or	Doing Business As		42-	6075138				
肙		·	type.	Number and street (or P O box if mail is not delivered to street address) Room/suite	E	Teleph	one number				
님	Initial retu		See Specific	1350 E Washington Avenue		515	-262-5695				
닏	Terminati	ion	Instruc-	City or town, state or country, and ZIP + 4	G	Gross rece	pts \$ 2,841,122				
\sqcup	Amended	d return	tions.	Des Moines IA 50316							
	Application	on pending		e and address of principal officer	H	H(a) Is this a group return for					
_		·		isal Sayeed		affiliate (b) Are all					
				50 E Washington Avenue	"	include	anniates Yes No				
				s Moines IA 50316		If "No,"	attach a list (see instructions)				
1		empt status									
<u>J</u>	Websi	te: ► W		ogcci.org			exemption number				
		organization		poration Trust Association Other ► L Year of formation	on 196	53	M State of legal domicile IA				
	Part I		<u>ımma</u>								
	1			he organization's mission or most significant activities							
ű,		Yout	y yë.	velopment services.							
au											
e.u											
Activities & Governance	2			If the organization discontinued its operations or disposed of more than 25% of its as	sets	1 . 1	2.2				
<u>ಹ</u>	3		_	members of the governing body (Part VI, line 1a)		3	33				
ijes	4		•	endent voting members of the governing body (Part VI, line 1b)		4	33				
.≣	5			employees (Part V, line 2a)		5	96				
Ac				olunteers (estimate if necessary)		6	507				
		-		ated business revenue from Part VIII, line 12, column (C)		7a					
	b b	Net unrel	ated bu	siness taxable income from Form 990-T, line 34		7b	0				
	∯.	Castabut			ior Year 335,	669	<u>Сиггепt Year</u> 2,802,598				
ř	=1			d grants (Part VIII, line 1h) revenue (Part VIII, line 2g)		,034	37,191				
Ke.	‡ 10	Investme	nt incon	ne (Part VIII, column (A), lines & GEVED		, 468	1,436				
뙲	10	Other rev	onuo (E	Port VIII. column (A) Incorp. Fed. 90 90 100 and 110 (C)		7 7 0 0	-103				
		Total rev	enue (r	art VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e Column (A), lines 5, 6d, 8c, 9c, 10c, and 11e Column (A) lines 8 through 1 Column (A) lines 8 through 1 Column (A) lines 12)	344,	235	2,841,122				
<u>_</u>					7447	, 233	2,041,122				
				ar amounts paid (Part X, column (A), lines 4.3)			<u> </u>				
6	٧				054,	747	1,395,206				
Anses	162	Profession	nal fund	draising fees (Part IX, column (A), line 11e)	<u> </u>	, , - ,	1,333,200				
6) 10a			expenses (Part IX, column (D), line 25) 266, 013							
SE SE	וכ		_	(Part IX, column (A), lines 11a-11d, 11f-24f)	910,	563	_916,082				
	l l			· · · · · · · · · · · · · · · · · · ·	965,		2,311,288				
	19	-		penses Subtract line 18 from line 12	378,		529,834				
Net Assets or	Ses				ning of Yo		End of Year				
sets	20	Total ass	ets (Pai	t X, line 16) 3,	911,	558	4,595,531				
A P	21	Total liab	ilities (P	art X, line 26) .	575,	075	601,213				
Ž,	22		is or fur	d balances Subtract line 21 from line 20 3 ,	<u>336,</u>	483	3,994,318				
<u>_</u> F	Part II	Si	gnatu	re Block							
		Und	ler penal	ties of perjury, I declare that I have examined this return, including accompanying schedules and statement	s, and to	the best o	f my knowledge				
		and	bellet, it	is true, correct, and complete Declaration of preparer (other than officer) is based on all information of while	on prepare						
	gn					<u> </u>	30.10				
He	ere		-	re of officer		Date					
				isal Sayeed President							
			Type or	print name and title			1 0 2				
Pa	id		parer's		Check if self-		Preparer's identifying number (see instructions)				
	na epare	sigr	nature	1 / Example 3-26-10 6	employed		P00077406				
	epare se On		n's name	(or yours Larry Sample & Associates, P.C.		EIN	▶ 13-4228516				
US	e VIII	" If so	elf-emplo	yed), 1000 73rd St Ste 20		Phone	-				
		l add	lress, and	dZIP+4 Deg Moineg TA 50324	İ		515-223-9557				

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

DAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2008)

1,696,199 (Must equal Part IX, Line 25, column (B)

4e Total program service expenses > \$

Part IV Cl	necklist of	Required	Schedules
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	r		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
_	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		37
4	candidates for public office? If "Yes," complete Schedule C, Part I	_3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
•	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where 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,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VII, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
4.0	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	7.7
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	-	X
14a		14a		X
ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	445		v
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	14b		X
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	13		<u> </u>
. •	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total 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 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	- 1	X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			
	24b-24d and complete Schedule K If "No," go to question 25	24a		<u>X</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	_		
ч	to defease any tax-exempt bonds?	24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	24d		——
Lya	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25-		v
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified	25a	 	<u>X</u>
~	person from a prior year? If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	_00		<u></u>
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	l	Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or			
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
			000	

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity		1	
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		<u>X</u>
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		<u>X</u>
C	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		<u>X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u>X</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		<u>X</u> _
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		<u> X</u>
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	j	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		_X_
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		_X_
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		<u>X</u>
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		<u>X</u>

Form **990** (2008)

	otatements regarding other into runings and rax compliance						
4	E. A. H			F	┤ Ŷ	es	No
та	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		5			Ī	
_	U.S. Information Returns. Enter -0- if not applicable	1a	0			I	
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b				ŧ	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and report	able			. ,	хŤ	
2-	gaming (gambling) winnings to prize winners?	1		19	-	^ -∤	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		96	ŧ		I	
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	96		. ,	,	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			21	' -'	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see					I	
2-	Instructions)	_				I	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	1				ŧ	v
b				36	_	\dashv	<u>X</u>
b 4a	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other auth	ant.		31	'	\dashv	
40	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	•					
	account)?	181					Х
b	If "Yes," enter the name of the foreign country.			46	'	-	
U	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Ban	.L			l I	1	
	and Financial Accounts	IK.				1	
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			ء ا		ŧ	Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	2		5a 5t		+	X
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	f		31	<u>'</u>	\dashv	
·	Regarding Prohibited Tax Shelter Transaction?			50			
6a	Did the organization solicit any contributions that were not tax deductible?			68	\neg	\dashv	Х
	If "Yes," did the organization include with every solicitation an express statement that such contributions of	nr.		0	+	\dashv	
-	gifts were not tax deductible?	J1		61	. [
7	Organizations that may receive deductible contributions under section 170(c).			<u> </u>		_	
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more that	n				1	
	\$75?			78	Ì	Ī	Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			71		T	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					\neg	
	required to file Form 8282?			70	:	Ì	Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d]			\top	1	
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal control of the organization.	nal				- [
	benefit contract?			76	, [Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f			Х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			79	L		Х
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as						
	required?			71			Χ
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section						
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsor	ring				1	
	organization, have excess business holdings at any time during the year?			8		_	X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.					1	
а	Did the organization make any taxable distributions under section 4966?			98	<u> </u>		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?			91			X
10	Section 501(c)(7) organizations. Enter.					I	
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				1	
. b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				I	
11	Section 501(c)(12) organizations. Enter	1		Į		I	
a	Gross income from members or shareholders	11a		[1	
b	Gross income from other sources (Do not net amounts due or paid to other sources against					I	
120	amounts due or received from them)	11b	· · · · · · · · · · · · · · · · · · ·	<u></u>		ŧ	
12a h	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10	1		12	a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b					

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

<u> </u>	tion A. Governing Body and Wanagement	r		
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the			
	circumstances, processes, or changes in Schedule O See instructions.			
1a	Enter the number of voting members of the governing body 1a 33			
b	Enter the number of voting members that are independent 1b 33			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			7,
_	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			**
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6 ~-	Does the organization have members or stockholders?	6		<u> X</u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			v
	of the governing body?	7a		X
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	[
_	the year by the following	1 1	.,	
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	37
9a	Does the organization have local chapters, branches, or affiliates?	9a		<u>X</u>
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
40	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations	li		
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10		<u>X</u>
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at	i 1		
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		<u>X</u>
Sec	tion B. Policies			
40-	Describe accounts have a sufficient of the County of the C		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give		ν,	
	rise to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		,,	
40	describe in Schedule O how this is done	12c	Х	37
13	Does the organization have a written whistleblower policy?	13		X
14	Does 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		1	
_	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision.		٠, ا	
a	The organization's CEO, Executive Director, or top management official?	15a	Х	
Ь	Other officers or key employees of the organization?	15b		X
40-	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		1	37
h	with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	1 1		
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard		ł	
500	the organization's exempt status with respect to such arrangements?	16b		
17				
18				
10	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply Own website X Another's website X Upon request			
19				
13	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
-0				
De		E1E 266) =	60=
	es Moines IA 50316	515-262	<u> 2 - 5</u>	<u>575</u>

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors, institutional trustees, officers; key employees, highest <u>compensated employees</u>, and former such persons

Check this box if the org	ganization did not comper	sate	any c	office	r, dı	recto	r, tru	stee, or key employee		
(A)	(B)	_	4		C)	.	_6.3	(D)	(É)	(F)
Name and Title	Average hours per week	or director	٦	Officer	Ž	Highest compensated	Ţ	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Donald Brand	t				-			-		
Trustee		X						0	0	0
Frank Ross										
Trustee		X						0	0	0
Barry Griswe	11									
Trustee		X						0	0	0
BJ Baker										
Trustee		X						0	0	0
Darrell Ball										
Trustee		X						. 0	0	0
Deniz Franke						{				
Trustee		X						0	0	0
Michael Fraz	ier	1				H				
Trustee		X						0	0	0
Susan Glazer	-Burt									
Trustee		X						0	0	0
Dave Olson										
Trustee		X	<u> </u>			L		0	0	0
Sam Carrell										
ExecDirector	40	_		X		Ш		109,990	0	32,100
John Bouslog										
Board Member		-				ļ		0	0	0
Randy Brandt									_	_
Board Member			-			Н		0	0	0
Cecil Brewto	n	1								
Board Member		┼				 		0	0	0
Bart Brody										
Board Member		+				\square		0	0	0
Joe Conley Board Member								_		•
Greg Cushing	· · ·	+-	 			$\vdash\vdash$		0	0	0
Board Member		1						0	_	^
Sondra Eddin		+-	-		_	\vdash			0	0
Board Member	95	1						o		•
Poard Member			L	L		ш		0	0	0

Part VII Section A	A. Officers, Directors, Trus	tees	, Ke	y Em	ploy	/ees	and	Highest Compensated E	mployees (continued)				
(A)	(B)				C)	nat ap		(D)	(E)		(F)		
Name and title	Average hours per week	per 역 및 및 및 및 및 및 Compensation compensation				am comp fro orga and	timated sount of other pensation om the anization if related anizations						
Renee Gibsor Board Member								0	0			0	
Krista Gorso	he		\vdash				_	0					
Board Member								o	0			0	
Robin Heinem	ann		<u> </u>										
Board Member								0	0			0	
Amy Johnson									_				
Board Member			H					0	0			0	
Gary Douglas									ر			0	
Vice Pres 0 0 0 Chris Kvhl													
Board Member	İ	İ	İ	İ				o	0	ĺ		0	
Dave Lillard													
Board Member			<u> </u>			<u> </u>		0	0			0	
Inez Morrow				ļ					_			_	
Board Member	ahar		 	 				0	0			0	
Barbara Mull Board Member	aney							o	0			0	
Jennifer Osw	ald								<u> </u>				
Board Member								0	0			0	
Joleen Roska	mp												
Board Member								0	0			0	
Stuart Ruddy	1											_	
Board Member Becky Thomas		_	 					0	0		(
Board Member	1		ĺ					0	0		C		
1b Total						1		109,990	Ţ.		32,	<u>_</u>	
	viduals (including those in 1	a) w	no re	ceive	ed m	ore t	han	\$100,000 in reportable com	pensation from the				
organization ▶ 1	<u> </u>												
3 Did the organization	hat any farmer officer during		4	_4	1					F	Yes	No	
	list any former officer, direct of the state						юуе	e, or nignest compensated		3	3 x	; 	
								and other compensation from					
the organization and individual	related organizations great	er th	an \$	150,0)00?	It "Y	es,"	complete Schedule J for su	ch	1	. [Х	
5 Did any person listed	d on line 1a receive or accru								•				
	the organization? If "Yes,"	com	olete	Sch	edul	e J fo	r su	ch person		5	<u>. </u>	_X	
Section B. Independent 1 Complete this table f		oc ato	d inc	dono	ndor	ıt cor	trac	tors that received more than	\$100,000 of				
compensation from t	the organization	isate	iu iiic	rehe	iluei	it COI	mac					_	
	(A) Name and business address							Descrip	(B) tion of services		(C) Compensat	uon	
-	·- ·										•		
										1			
							\vdash						
	 												
2 Total number of inde	pendent contractors (includ	line *	hose	ur 1	طرور \	0.500		d more than \$100,000					
compensation from t		miy t	iiose	: III - I	, wii	o rec	CIVE	a more uidii \$100,000 iii			0		
DAA								·····	<u> </u>	t F:	om 990	(2008)	

_Pa	rt V	III Staten	nent of Rev	<u>/enue</u>						
							(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
'S 'S	4-			14-		······································		revenue		512, 513, or 514
anta	ıa	Federated can		1a						
g g	D	Membership d		1b						
a, ts	С	Fundraising ev	ents	1c						‡
<u> </u>	d	Related organi	zations	1d						
ns,	е	Government grants	(contributions)	1e		11,540				
Program Service Revenue Contributions, gifts, grants	f	All other contribution and similar amounts		1f	2.7	91,058				
뎙	g	Noncash contribution	ns included in lines 1			,,,,,,,				
ᅙᄫ	9	Total. Add line		ια-ιι ψ	'	_	2,802,598			
	-"	Total. Add line	:5 1a-11				2,002,330			
Ž						Busn. Code	70.520		<u> </u>	<u> </u>
eve	2a		Camp Fees				19,639	19,639		
e R	b	Other I	ncome			ļ	10,980	10,980		
Σį	С	Members	hip Dues				6,572	6,572		
Sel	d									
a	е									
g	f	All other progra	am service rev	enue						
4	g	Total. Add line	s 2a–2f			•	37,191			
	3	Investment inc		divider	ds. interes	t. and				
		other similar ai		,		•	1,436	1,436		
	4		•	v-evem	nt hand nre	e sheer				
	4 Income from investment of tax-exempt bond proc 5 Royalties				pr bona pr	, , , , , , , , , , , , , , , , , , ,				
	3	Royalles	(ı) Real	1	/ ₁₁ \ E	ersonal				
	C-	Constant	(i) Real		(",, 1	CISCIIAI				
		Gross Rents			+					
	b	Less rental exps			 					
	С	Rental inc or (loss)			<u> </u>					
	d	Net rental inco	me or (loss)		,	<u> </u>				
	7a	Gross amount from sales of assets	(ı) Securit	ties	(11)	Other				
		other than inventory								
	ь	Less cost or other								
		basis & sales exps								
	С	Gain or (loss)								
	d	Net gain or (los	ss)			•	1	1		
		Gross income fro		ante.						
a	ou	(not including \$	in fundialising ev	remo						
Other Revenue		of contributions r	anadad an kaa 1	۵)	1					
ě			•	•						
٣	_	See Part IV, line		a						
the l		Less direct ex	•	b						
0		Net income or		_	events	<u> </u>			·	
	9a	Gross income fro		ies.						
		See Part IV, line	19	а						
	b	Less direct ex	penses	b						
	C	Net income or	(loss) from gar	ming ac	tivities	>	_			
	10a	Gross sales of	inventory, less	3				_		
		returns and allo	-	а						
	b	Less cost of g	oods sold	b						
		Net income or			$\overline{}$					
	Ť		ellaneous Reven		- Cittory	Busn. Code				
	11a						100	100		
		Loss on E	maowment				-103	-103		
	b					-				
	С						· · · · · · · · · · · · · · · · · · ·			
	d	All other reven				L				
j	е	Total. Add line				>	-103			
	12	Total Revenue	e. Add lines 1h	, 2g, 3,	4, 5, 6d, 7d	i, 8c,				
	_	9c, 10c, and 1	1e			•	2,841,122	38,524	0	0

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) but are not required to complete columns (B), (C), and (D).

	All other organizations must	(A)	re not required to comple (B)	(C)	(D)
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				<u> </u>
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in			<u> </u>	
	the U S See Part IV, line 22				
3	Grants and other assistance to governments,			1	
	organizations, and individuals outside the			1	
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	109,990	21,998	49,495	38,497
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	973,657	793,872	111,779	68,006
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	50,629	25,821	18,733	6,075
9	Other employee benefits	152,890	114,665	22,937	15,288
10	Payroll taxes	108,040	81,029	16,206	10,805
11	Fees for services (non-employees).				
а	Management				
b	Legal				
C	Accounting	8,610		8,610	
d	Lobbying	<u> </u>			
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	3,729		282	3,447
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	154,867	139,846	15,021	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	14,107	10,038	3,069	1,000
20	Interest	12,311		12,311	
21	Payments to affiliates	6,744		6,744	
22	Depreciation, depletion, and amortization	114,802	86,101	28,701	
23	Insurance	47,544	34,852	8,989	3,703
24	Other expenses Itemize expenses not			<u> </u>	
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed			1	
	5% of total expenses shown on line 25 below)				
а	Other Programs	378,999	279,999	754	98,246
b	Music Program	68,432	68,432		
c	Vehicle	24,944	18,944	6,000	
ď	Telephone	17,363	10,193	6,970	200
е	Other	17,186	1,597	15,589	
f	All other expenses	46,444	8,812	16,886	20,746
25	Total functional expenses. Add lines 1 through 24f	2,311,288	1,696,199	349,076	266,013
26	Joint Costs. Check here I I I I following				
	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs			1	
	from a combined educational campaign and				
	fundraising solicitation	<u> </u>			
DAA					Form 990 (2008)

	art A	C Balance Sheet						
				(A) Beginning of year		(B End of		
	_	Ocal manufacture hoosing		beginning of year	1	Liid Oi	year	
	1	Cash—non-interest bearing	ł	148,816	2		28,	001
	2	Savings and temporary cash investments	1	1,008,427				
	3	Pledges and grants receivable, net	-		3	1,8		
	4	Accounts receivable, net	.	27,463	4		21,	249
	5	Receivables from current and former officers, directors, tr	•					
		employees, or other related parties. Complete Part II of So		5	:			
	6	Receivables from other disqualified persons (as defined u						
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete		1			
		Part II of Schedule L			6			
ţ	7	Notes and loans receivable, net	-		7			
Assets	8	Inventories for sale or use			8			
Ÿ	9	Prepaid expenses and deferred charges	1		9			
	10a	Land, buildings, and equipment. cost basis	10a 3,173,225					
	b	Less accumulated depreciation Complete	1					
		Part VI of Schedule D	10b 521,873	2,726,852	10c	2,6	51,	<u> 352</u>
	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	Į.		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 34)		3,911,558	16	4,5	95,	531
	17	Accounts payable and accrued expenses		198,812	17	2	17,	043
	18	Grants payable			18		_	
	19	Deferred revenue			19			
	20	Tax-exempt bond liabilities		20				
es	21	Escrow account liability Complete Part IV of Schedule D			21			
Liabilities	22	Payables to current and former officers, directors, trustees	s, key					
ä		employees, highest compensated employees, and disqua						
Ë		persons Complete Part II of Schedule L			22			
	23	Secured mortgages and notes payable to unrelated third r	parties	376,263	23	3	84,	170
	24	Unsecured notes and loans payable	İ	· · · · · · · · · · · · · · · · · · ·	24			-
	25	Other liabilities. Complete Part X of Schedule D	Ì		25			
	26	Total liabilities. Add lines 17 through 25	Ì	575,075	26	6	01,	213
S		Organizations that follow SFAS 117, check here ▶	and					
nces		complete lines 27 through 29, and lines 33 and 34.	_					
<u>a</u> n	27	Unrestricted net assets		2,488,765	27	3,3	26.	903
Bal	28	Temporarily restricted net assets		847,718			67,	
ᅙ	29	Permanently restricted net assets	·		29		<u> </u>	
٦		Organizations that do not follow SFAS 117, check here	₃► ^[7]					
or Fund Bala		and complete lines 30 through 34.	- · ·					
	30	Capital stock or trust principal, or current funds		•	30			
e S	31	Paid-in or capital surplus, or land, building, or equipment f	und		31			
SS	32	Retained earnings, endowment, accumulated income, or or	ľ		32			
t A	33	Total net assets or fund balances	other lands	3,336,483	33	3,9	91	318
Net Assets	34	Total liabilities and net assets/fund balances		3,911,558		4,5		
	art)	· · · · · · · · · · · · · · · · · · ·		3,911,556	34	4,5	95,	231
	<u> </u>	Timancial Statements and Reporting					Yes	No
1	Δ.	counting method used to prepare the Form 990	ash X Accrual Ot	her			162	No
_						30	•	х
2a t		ere the organization's financial statements compiled or revie are the organization's financial statements audited by an ind				2a 2b	х	 ^ -
		•	•	oversight of		20	<u> </u>	\vdash
•		Yes" to lines 2a or 2b, does the organization have a commit e audit, review, or compilation of its financial statements and				20	x	
9.		•	·			2c		
36		a result of a federal award, was the organization required to Single Audit Act and OMB Circular A-133?	o undergo an addit or addits as set	ioral m		2-		
L		•	lite?			3a 3b		<u> </u>
	<i>I</i> II "	Yes," did the organization undergo the required audit or aud	ino'			3D	L	L

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Boys & Girls Clubs of Central Iowa

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

The organization is not a private foundation because it is: (Please check only one organization)

Employer identification number 42-6075138

2	Н		cribed in section 170(b)(1)(
3	Ш			e organization described in sect									
4		A medical res	search organization operated	d in conjunction with a hospital de	escribed in	section '	170(b)(1)(A)(iii).	Enter th	ne hosp	ıtal's name,		
		city, and state	e										
5		An organizati	on operated for the benefit o	f a college or university owned o	r operated	by a gove	ernmenta	al unit de	scribed	ın			
	_	section 170((b)(1)(A)(iv). (Complete Part	II)									
6	Ш	A federal, sta	ite, or local government or go	overnmental unit described in se	ction 170(b)(1)(A)(v	/).						
7	X	An organizati	on that normally receives a s	substantial part of its support fror	n a govern	mental ur	nt or fror	n the ge	neral pu	blic			
		described in	section 170(b)(1)(A)(vi). (C	omplete Part II)									
8		A community	trust described in section 1	70(b)(1)(A)(vi). (Complete Part i	1)								
9	П	An organizati	on that normally receives (1) more than 33 1/3 % of its supp	ort from co	ntribution	s, memb	ership f	ees, and	gross			
	_	receipts from	activities related to its exem	pt functions—subject to certain e	exceptions	, and (2) r	no more	than 33	1/3 % o	fits			
		support from	gross investment income an	d unrelated business taxable inc	ome (less	section 5	11 tax) fr	om busi	nesses				
			-), 1975. See section 509(a)(2). (•		,						
10				exclusively to test for public safet			a)(4), (se	ee instru	ctions)				
11	П			exclusively for the benefit of, to pe									
		=	•	ed organizations described in sec				•		tion			
				ne type of supporting organization									
		a Type		c Type III-Function			d		e III–Otl	ner			
е				anization is not controlled directly	, ,		or more						
				and other than one or more publi				-		tion			
			section 509(a)(2)	·	•	•							
f		If the organiza	ation received a written deter	rmination from the IRS that it is a	Type I, Ty	pe II, or 1	ype III s	upportin	g				
		organization,	check this box						_				
g		Since August	t 17, 2006, has the organizat	ion accepted any gift or contribut	ion from a	ny of the							
_		following per	sons?										
		(i) A persor	n who directly or indirectly co	ntrols, either alone or together w	ith person:	s describe	ed in (ii)					Yes	No
		and (III) b	below, the governing body of	the supported organization?							11g(ı)		
		(ii) A family	member of a person describ	ed in (i) above?							11g(iı)		
		(iii) A 35% c	ontrolled entity of a person d	lescribed in (i) or (ii) above?							11g(III)		
h		Provide the f	following information about th	ne organizations the organization	supports								
(1)	Name	e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Did y	ou notify	(vi)	s the	(vii) Amo	ount of	
	org	anization		(described on lines 1-9	ın col (i) lı	sted in your	the organ	nization in	organizat	ion in col	supp		
				above or IRC section (see instructions))	governing	document?		of your	(i) organı				
				(see matractions))	Yes	No	Yes	No No	Yes	No			
					1	 							
		-			<u> </u>								
					 								
									····-				
					<u> </u>								
_					1								
Tota				<u> </u>	<u></u>	L		L					
or F	rivac	y Act and Pape	erwork Reduction Act Notice,	see the instructions for Form 990).				Sch	redule A	(Form 990 or 9	90-EZ	2008

Schedule A (Form 990 or 990-EZ) 2008 Boys & Girls Clubs of Central Iowa Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants") 796,237 3,020,631 1,787,894 2,367,703 2,839,789 10,812,254 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1-3 796,237 3,020,631 1,787,894 2,367,703 2,839,789 10,812,254 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 2,063,950 Public support. Subtract line 5 from line 4 8,748,304 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Amounts from line 4 796,237 3,020,631 1,787,894 2,367,703 2,839,789 10,812,254 Gross income from interest, dividends. payments received on securities loans, rents, royalties and income from similar 2,086 2,804 1,088 9,914 1,436 sources 17,328 Net income from unrelated business activities, whether or not the business is regularly carned on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 10,829,582 12 Gross receipts from related activities, etc. (see instructions) 12 105,996 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 14 80 7815 % 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 15 71 8911 33 1/3 % support test—2008. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box 16a and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support test—2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this

box and stop here. The organization qualifies as a publicly supported organization

10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

10%-facts-and-circumstances test—2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2008

18

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Sec	ction A. Public Support	JORGA WIO BOX	on mic o or a				
	llendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5	ļ					
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
Sec	tion B. Total Support	<u> </u>	.±	I	1	L	i
	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	(4)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(-,	(-)	(0, 2000	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975				,		
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)		1				.1
14	First five years. If the Form 990 is for the o		second, third, fourt	h, or fifth tax year a	s a section 501(c)(3)	
	organization, check this box and stop here						▶
	tion C. Computation of Public Su	···				·	
15	Public support percentage for 2008 (line 8,	**	•	(f))		15	%
16 Coo	Public support percentage from 2007 Scher					16	%
	tion D. Computation of Investme					r	
17	Investment income percentage for 2008 (lin		-	olumn (f))		17	%
18	Investment income percentage from 2007 S	· ·	•				%
19a	33 1/3 % support tests—2008. If the organ						, _
b	17 is not more than 33 1/3 %, check this bo 33 1/3 % support tests—2007. If the organ	nization did not che	eck a box on line 14	or line 19a, and lin	e 16 is more than 3	33 1/3%, and	▶ ∐
20	line 18 is not more than 33 1/3 %, check this Private foundation. If the organization did		-	•		anızatıon	> -

Schedule A (Form 990 or 990-EZ) 2008 Boys & Girls Clubs of Central Iowa 42-6075138

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that

OMB No 1545-0047

Open to Public answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12, Inspection Employer identification number Name of the organization Boys & Girls Clubs of Central Iowa 42-6075138 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts, Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section ┌ Yes 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,

provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

- (i) Revenues included in Form 990, Part VIII, line 1
- (ii) Assets included in Form 990, Part X
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items
- a Revenues included in Form 990, Part VIII, line 1
- b Assets included in Form 990, Part X

Ψ —	_	_	_			_
\$						
Ψ —	_	_		_	_	_

		rls Clubs of			<u>-607513</u>				age 2
Pa	rt III Organizations Maintaining	Collections of Art, F	listorical Trea	sures, or Oth	ner Similar	Assets (contin	ued)	
3	Using the organization's accession and other ritems (check all that apply)	ecords, check any of the fol	lowing that are a si	gnificant use of it	s collection				
а	Public exhibition	d 🔲 Loan o	r exchange prograi	ms					
b	Scholarly research	e Other							
С	Preservation for future generations	_		~					
4	Provide a description of the organization's colle Part XIV	ections and explain how the	y further the organi	zation's exempt p	ourpose in				
5	During the year, did the organization solicit or rassets to be sold to raise funds rather than to l	receive donations of art, histore maintained as part of the	orical treasures, or organization's coll	other similar ection?		П	Yes		No
Pa	rt IV Trust, Escrow and Custod				vered "Yes	" to Form	990.		
	Part IV, line 9, or reported a	_	•						
1a	Is the organization an agent, trustee, custodian					·			
	included on Form 990, Part X?						Yes		No
b	If "Yes," explain the arrangement in Part XIV a	nd complete the following ta	ble					L	
_	w voo, oxplain the arrangement in various a	na complete are reacting to	.0.0.		Г		Amour	ıt	—
С	Beginning balance					1c		-	—
	Additions during the year	•				1d			
u	Distributions during the year				<u> </u>				
-	• •				 	1e			—
f 2-	Ending balance	000 D- 4 V 1 040			L	1f			—
	Did the organization include an amount on For	m 990, Part X, line 21?					Yes	L 1	No
	If "Yes," explain the arrangement in Part XIV	ata if arranization an		- F 000	Deat IV Lie	- 10			
778	rt V Endowment Funds. Compl								
		(a) Current year	(b) Pnor year	(c) Two years b	ack (d) Thre	e years back	(e) Fou	r years t	ack
	Beginning of year balance						ļ		·····
	Contributions						ļ		
С	investment earnings or losses								
ď	Grants or scholarships								
ө	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance			<u> </u>					
2	Provide the estimated percentage of the year e	end balance held as							
а	• • • • • • • • • • • • • • • • • • • •	%							
b	Permanent endowment %								
С	Term endowment ▶ %								
3a	Are there endowment funds not in the possess	ion of the organization that	are held and admir	istered for the					
	organization by							Yes	No
	(i) unrelated organizations						3a(i)		
	(ii) related organizations						3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations I	isted as required on Schedu	ıle R?				3b		
4	Describe in Part XIV the intended uses of the o							· · · · · ·	
Pa	rt VI Investments—Land, Buildi			0. Part X. line	10.				
	Description of investment	(a) Cost or other basis	(b) Cost or o		c) Depreciation		(d) Book	value	
		(investment)	basis (othe					-	
1a	Land	3,360	<u> </u>					3,3	160
	Buildings	24,645						$\frac{3}{24}, \epsilon$	
	Leasehold improvements	2,861,898			521,	873		$\frac{24}{40}$	
	Equipment	283,322			741,	<u> </u>		83,3	
	Other	203,322	1					00,3	,
_	. Add lines 1a-1e (Column (d) should equal Fo	rm 990 Part X column (B)	line 10(c))			•	2 6	51,3	
	To to to to to to to to to to to to to to	555, r are A, commit (b),	10(0/)				2,0	J L , 3	20

Schedule D (Form 990) 2008

Schedule D (Form 990) 2008 Boys & Girls Clubs of		42-6075138	Page 3
Part VII Investments—Other Securities. See Form 990	` 		
(a) Description of security or category	(b) Book value	(c) Method o	
(including name of security)		Cost or end-of-ye	ar market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
			
			
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12)			
Part VIII Investments—Program Related. See Form 99	D Part X line 13	I	
(a) Description of investment type	(b) Book value	(c) Method o	f valuation
(a) accompanies investment type	(b) book value	Cost or end-of-ye	
			ar manor varao
	 		
			
		-	···
			
	 -		
			···
	<u> </u>		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, line 15.			
(a) Description			(b) Book value
			_
	· ·		

Total. (Column (b) should equal Form 990, Part X, col. (B) line 15)		•	
Part X Other Liabilities. See Form 990, Part X, line 25),		
(a) Description of liability	(b) Amount		
Federal income taxes			

· · · · · · · · · · · · · · · · · · ·			
	 		
	-		
	 		
	 		
Total (Column (h) should a real form 600 D 1 V 1 (D) 1 (D)	ļ		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	L	<u> </u>	
In Part XIV, provide the text of the footnote to the organization's financial staten	nents that reports the organi	zation's liability for	
uncertain tax positions under FIN 48			

_	tule D (Form 990) 2008 Boys & Girls Clubs of Central Ic		3	Page 4
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	2,841,122
2	Total expenses (Form 990, Part IX, column (A), line 25)	ļ t	2	2,311,288
3	Excess or (deficit) for the year Subtract line 2 from line 1	<u> </u>	3	529,834
4	Net unrealized gains (losses) on investments	Ī	4	3237031
5	Donated services and use of facilities	ŀ	5	
		-	6	
6	Investment expenses	+	7	
7	Prior period adjustments	ŀ		
8	Other (Describe in Part XIV)	 	8	
9	Total adjustments (net) Add lines 4-8	<u>}</u>	9	E20 024
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	Mith Davinus non Date	10	529,834
	rt XII Reconciliation of Revenue per Audited Financial Statements \	with Revenue per Retu		0.060.100
1	Total revenue, gains, and other support per audited financial statements	<u> </u>	1	2,969,122
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		1	
	Net unrealized gains on investments		1	
b	Donated services and use of facilities 2t	128,000	- 1	
C	Recoveries of prior year grants	>	- 1	
d	Other (Describe in Part XIV)	1	1	
θ	Add lines 2a through 2d	Į.	2е	128,000
3	Subtract line 2e from line 1		3	2,841,122
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	ı	1	
b	Other (Describe in Part XIV)		- 1	
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)	·	5	2,841,122
	rt XIII Reconciliation of Expenses per Audited Financial Statements	With Expenses per Re	turn	
1	Total expenses and losses per audited financial statements	,	1	2,439,288
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	ſ		
а	Donated services and use of facilities 2a	128,000		
	Prior year adjustments 2t		- 1	
	Losses reported on Form 990, Part IX, line 25	 	- 1	
	Other (Describe in Part XIV)		- 1	
	Add lines 2a through 2d	-	2e	128,000
3	Subtract line 2e from line 1	<u> </u>	3	2,311,288
4	1	ı		2,311,200
-	Amounts included on Form 990, Part IX, line 25, but not on line 1:	.	- 1	
	Investment expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIV)	7	. 1	
_	Add lines 4a and 4b	-	4c	2 211 200
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)		5	2,311,288
	rt XIV Supplemental Information			·····
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a a	ind 4; Part IV, lines 1b		
ind 2	b, Part V, line 4, Part X; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b			
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Schedule D (F	orm 990) 20	08	Boys	3 &	Gi	rls	Cl	.ubs	S 0:	f (Cen	tra	.1 :	7OI	wa		42-	60	751	.38					Page	5
Schedule D (F	Supple	menta	al Info	rma	tion (contir	nued)																			_
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SCHEDULE J (Form 990)

Part I

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Boys & Girls Clubs of Central Iowa

Employer identification number 42-6075138

Pa	art I Questions Regarding Compensation			
			Yes	No
				_
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			ĺ
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
				l
	First-class or charter travel Housing allowance or residence for personal use			1
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			l
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b				ŀ
	provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		ļ
				ĺ
3	Indicate which, if any, of the following the organization uses to establish the compensation of the			ĺ
	organization's CEO/Executive Director. Check all that apply.			ŧ
	Compensation committee Written employment contract			ĺ
	Independent compensation consultant Compensation survey or study			Ė
	Form 990 of other organizations X Approval by the board or compensation committee			ĺ
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a			ĺ
a	Receive a severance payment or change of control payment?	4.	1	v
h	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4a		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4b 4c		X
Ĭ	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III	40		
	Tes to any or most to e, not the persons and provide the applicable amounts for each norm in a at in			ĺ
	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5–8.			É
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			ĺ
	compensation contingent on the revenues of			Ė
а	The organization?	5a	1	Х
b	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			Ė
	compensation contingent on the net earnings of.		1	Ė
а	The organization?	6a		_x_
þ	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III			ļ
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			Í
	payments not described in lines 5 and 6? If "Yes," describe in Part III	_ 7		<u>X</u>
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was			
	subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Х

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

Schedule J (Form 990) 2008

42-6075138 Schedule J (Form 990) 2008 Boys & Girls Clubs of Central Iowa

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed Part II

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)—(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

	(B) Brea	akdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	(i) Base compensation	(ii)	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compens.tton	benefits	(B)(ı)-(D)	reported in pnor Form 990 or Form 990-EZ
Steve Hauschilt (0)		0 0	0	0 0	0	0	0 0	0 0
Kim Butler (0)		0 1		0	0			0
Fred Strickland (0)		0 0	00	0 0	0 0	0		0 0
		0	0	0	0		0	0
(0)								
(1)								
(n) (0)								
(ii) (i)								
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							Schedul	Schedule J (Form 990) 2008

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Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part Supplemental Information for any additional information Part III

SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Inspection

Name of the Organization

& Girls Clubs of Central

Employer Identification number 42-6075138

Part (Continu Employ		Pirec	tors	i, II	rus	ees	s, Ke	ey Employees, and H	IIgnest Compensate	.
(A) Name and Title	(B) Average hours per week				C) k all t	hat ap	ply)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
		individual trustee or director	Institutional trustee	\\ \text{\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\ti}\$\$}\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exititit{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\}\$\te	Key employee	Highest compensated employee	ner	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
Kevin Tiffany Board Member						-		0	0	0
Tony Wilson		 -			\vdash	Ì	-			
Board Member		<u> </u>		<u> </u>	<u> </u>	<u> </u>	<u> </u>	0	0	(
Feisal Sayeed									_	
President	 		 	┡	┼-			0	0	(
Brian Deimerl Treasurer	Y								o	(
Art Kossack		+	-	╁	+-	\vdash		0		
Board Member		Ì	Ì					О	o	
Suzanne Reyno	lds Arnold		<u> </u>		\vdash		-			
Secretary					<u> </u>			0	0	(
Jodi Corcoran			ĺ							
Vice Pres			┡	<u> </u>	ļ	<u> </u>	<u> </u>	0	0	(
Andre Allen										
<u>Board Member</u> John Amato			-		-	 		0	0	(
Board Member					ĺ			o	0	(
Curtis Van Ve	ldhuizen		<u> </u>	╁─	 			Ŭ		
Board Member								0	0	(
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Past Pres		<u> </u>	<u> </u>				X	0	0	
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SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. OMB No 1545-0047
2008
Open to Public Inspection

Name of the organization

Boys & Girls Clubs of Central Iowa

Employer identification number 42-6075138

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
Written conflict of interest policy required to be signed annually by all
directors, trustees, and key employees.

Form 990, Part VI, Line 15a - Compensation Process for Top Official Documented process recommended by National Boys and Girls Clubs of America is followed.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Organization documents are available through the Iowa Secretary of State Website.

Conflict of Interest policy, 990 Form and Financial Statements are provided as paper copies upon request.

Forms 990 / 990-PF	Mortgages and Oth	er Notes Payable		2008
	For calendar year 2008, or tax year beginning	7/01/08 , and ending		
Name		-	Employer Ide	ntification Number

L	For calendar year 2008,	or tax year beginning	7/01/08 , and ending	6/30/09	
Name				Employer Identific	cation Number
Boys & Girls	Clubs of Cent	ral Iowa	· ·	42-607513	38
Form 990, Pa:	rt X, Line 23	- Additional	Information		<u></u>
	Name of lender		Relationship to	disqualified person	
(1) Bankers Tri			, restaurant to	alaquamica porceri	
	ust Line of Cre	edit			
	s Moines Comm I				-
(4)					
(5)					
(6)					
(7)					
(8)			- 		
(9)					
(10)		·····	<u> </u>	······································	·····
Onginal amount		Matunty			Interest
borrowed	Date of loan	date	Repayment terms		rate
(1) 176, 0 (2) 30, 0		4/19/13	Monthly payment	5f \$1,290	6.500
		4/30/09	Line of Credit Paid back as plea	dana maad	5.000
(3) 201, 0 (4)	8/31/07		Paid back as pied	iges recu	8.000
(5)					
(6)				V - V	
(7)					
(8)					
(9)					
(10)				···	
				,	
	ecunty provided by borrower			e of loan	
	nd Improvements		Equipment and Imp	rovements	
(2) Building ar (3) Pledges Red	nd Improvements	5	Line of Credit		
(4)	reivable	····	Initial payment for	or the Levi	tt Cent
(5)					
(6)					
(7)		.			
(8)					
(9)					
(10)	······································				······································
			Dala and the st		
Conside	eration furnished by lender		Balance due at beginning of year		e due at of year
(1)			145,263		39,170
(2)			30,000	2	245,000
(3)			201,000		
(4)					
<u>(5)</u> (6)					
(7)					
(8)				 	
(9)					
(10)					
Totals	· · · · · · · · · · · · · · · · · · ·	-	376,263	3	84,170