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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 requiremen

OMB No 1545-0047 2008 Open to Public

	mai iteve	riais oci vi		The diganization may have to use a copy of this retain to satisfy state reporting requi	CITIETIES	Inspection					
<u> </u>	For the	2008 cale	endar y	ear, or tax year beginning $7/01/08$, and ending $6/30/09$							
В	Check ff ap	plicable	Please	C Name of organization	D Empl	loyer identification number					
П	Address ch	nange I	use IRS	Boys and Girls Club of Maui, Inc.	•	•					
一		, i	label or	Doing Business As	99.	-0272347					
닏	Name char	nge	print or type.		E Telephone number						
Ш	Initial return	n	See								
\Box	Termination	. !	Specific	100 Kanaloa Avenue		8-242-4363					
=	I CITTINIA II OI	" [!	Instruc-		G Gross rec	ceipts\$ 1,617,983					
X	Amended r	retum	tions.	Kahului HI 96732							
	Application	n pendina	F Name	and address of principal officer	H(a) Is this	s a group return for					
_					affilia	ites? Yes X No					
					H(b) Are a	Ill affiliates Yes No					
		-				attach a list (see instructions)					
_	Tay avar	mpt status	Y	501(c) (3) ◀ (insert no.) 4947(a)(1) or 527	11 140	attach a list (see histroctions)					
÷											
			$\overline{}$		H(C) Grou	p exemption number					
	Type of org			poration Trust Association Other L Year of formation		M State of legal domicile					
Р	art I		mmai								
	1 B			ne organization's mission or most significant activities:							
æ		To pr	rovi	le educational and recreational activities for youths ag	res 9						
ä	ļ	throu	ıgh :	.9 throughout the island of Maui.							
Ë	Ì					•					
Š	2 C	heck this	s box 1	if the organization discontinued its operations or disposed of more than 25% of its assets	9	•					
Ğ	L			members of the governing body (Part VI, line 1a)	3	12					
δ.			-	endent voting members of the governing body (Part VI, line 1b)	4	12					
Activities & Governance			•								
₽	I			employees (Part V, line 2a)	5_	46					
ĕ				rolunteers (estimate if necessary)	6	14					
	I	-		ated business revenue from Part VIII, line 12, column (C)	7a	- <u>-</u>					
	b N	let unrela	ted bu	siness taxable income from Form 990 T, line 34	7b	0					
				RECEIVED Prior Year		Current Year					
ē	8 C			I grants (Part VIII, line 1n)		1,477,029					
Reyenue	9 P	rogram s	service	,385	59,549						
é	10 in	nvestmen	it incon	ne (Part VIII, column (A), lines 3, 4, and 7d)MAY 3 1, 2011	,833	4,689					
4	∮ 11 O	ther reve	enue (P	art VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2	,018	76,716					
2	12 T	otal reve	nue—a	dd lines 8 through 11 (must equal Part VIII) column (A), line 12) 1,620	,751	1,617,983					
6:				r amounts paid (Part IX, column (A), lines 1-37							
2				r for members (Part IX, column (A), line 4)							
=	15 S			mpensation, employee benefits (Part IX, column (A), lines 5–10)	- 659	1,134,062					
Se.	16aP			raising fees (Part IX, column (A), line 11e)	, , , ,	2,231,002					
5	LT			00 701		73					
*	4.7		•		007	F00 471					
2	1/ 0	•			,087	599,471					
00	18 To	•		Add lines 13-17 (must equal Part IX, column (A), line 25)		1,733,533					
Net Assets of Contact Dense of IN	19 R	Revenue I	ess ex		,995	-115,550					
150				Beginning of		End of Year					
Sse	20 T			X, line 16) 4,535		4,416,763					
절절	21 T	otal liabil	ities (P	• • • • • • • • • • • • • • • • • • • •	,460	72,076					
		let assets	or fun	d balances Subtract line 21 from line 20 4,460	,237	4,344,687					
<u>P</u>	art II	Sig	natui	e Block							
		Unde	er penalt	es of perjury, I declare that I have examined this return, including accompanying schedules and statements, an	nd to the be	est of my knowledge					
		and t	belief, it	s true, correct, and complete Declaration of preparer (other than officer) is based on all information of which pr	•						
Sig	ın			(Mitable M Drunford	5	-16-11					
He			Signatui	e of officer							
116	16				Date						
		🕨 :									
			ype or	orint name and title		T 6					
n - '	: -1	Prepa	arer's	Date Check if		Preparer's identifying number (see instructions)					
Pai	-	signa	ature	Rober 5/13/11 self-employe	d 🕨 🗀	P00643383					
	eparer'			Kawahara & Company, CPAs, LLC	EIN	▶ 27-1496241					
Us	e Only	/ Firm'	's name f-employ	OAO 33 Ch Ch OO3		,					
			ess, and		Phone	808-244-5531					
Ma:	, the IDS	_ _L		turn with the preparer shown above? (see instructions)	no						
vidy	/ いとりへく	しょうしひろろ	เมเอาป	ioni with the preparet shown above? (SEE HISHUCHORS)		Yes No					

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

DAA

Pa	m 990 (2008) Boys and Girls Club of Maui, Inc. 99-0272347	Page .
	Part III Statement of Program Service Accomplishments (see instructions)	
	Briefly describe the organization's mission To provide educational and recreational activities for youths a through 19 throughout the island of Maui.	ages 9
	• • • •	••
2		
	the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	∐ Yes X No
3		
	services?	Yes X No
4	If "Yes," describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services by expenses	
•	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported.	
E	a (Code:)(Expenses \$ 1,291,699 including grants of \$) (Revenue \$ Educational and recreational activities for youths ages 9 through 19 at locations throughout the Island of Maui, including, Upcountry, Haiku, Central and Lahaina, Maui.	
		• • • • • • • • • • • • • • • • • • • •
46	h (Code)	
40	b (Code:) (Expenses \$ Including grants of \$) (Revenue \$	
		· · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·
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4c	c (Code.) (Expenses \$ including grants of \$) (Revenue \$	
4c	C (Code.) (Expenses \$ including grants of \$) (Revenue \$	
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4c	c (Code.) (Expenses \$ including grants of \$) (Revenue \$	
4c	C (Code.) (Expenses \$ including grants of \$) (Revenue \$	
	d Other program services. (Describe in Schedule O.)	
4d		

2	art IVal Checklist of Required Schedules			Page
			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_1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			l
	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			۱
_	Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)		1	
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5_	<u> </u>	
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to	ŀ		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			~
7	Schedule D, Part I	_6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	<u>'</u>		
U	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	<u> </u>	<u> </u>	 ^
•	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	х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return	<u> </u>		
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	x	Ì
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the U.S?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,		i	
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	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			
	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		<u>X</u>
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			7.
24-	Schedule J	23		X
24a	3, 1			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			v
.	24b–24d and complete Schedule K. If "No," go to question 25.	24a	-	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24b		
С	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	· · · · · · · · · · · · · · · · · · ·	270		-
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified	250		
~	person from a prior year? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or		-	

substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related

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

organization? If "Yes," complete Schedule R, Part V, line 2

Checklist of Required Schedules (continued) Yes 28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee: 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 (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, 28a Have a family member who had a direct or indirect business relationship with the organization? If "Yes." X complete Schedule L. Part IV 28b 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 X 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 Schedule N, Part II X 32 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. Parts II. III, IV, and V, line 1 X 34 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 Schedule R, Part V, line 2 X 35

Form **990** (2008)

36

X

36

37

_ F	art v Statements Regarding Other IRS Fillings and Tax Compilance						_	Г——
4.	Estar the number reported in Pay 2 of Form 1006. Applied Summers and Transmitted of				1	.3	Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	4.	1			ηlh	** `	
L	U.S. Information Returns. Enter -0- if not applicable	1a						
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	<u> </u>			w~	·' 'š	~ <
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	еропар	ie				X	
•	gaming (gambling) winnings to prize winners?	1	١.			<u>1c</u>	<u> </u>	
2a			۱,,					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	46					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu					2b	X	ļ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	•					75.	ŀ
	instructions)					ř	× 5.7	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year cover	ed by						ļ.,.
	this return?			•		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		•		1	3b		
4a			-		İ			
	over, a financial account in a foreign country (such as a bank account, securities account, or other fi	nancial						
	account)?			•		_ <u>4a</u> _		X
b	If "Yes," enter the name of the foreign country:					- 4	~*	* .
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Bank				* 3	¥ .	, a
	and Financial Accounts.							,
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?					5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa					5b		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	/						
	Regarding Prohibited Tax Shelter Transaction?					5c		
6a	Did the organization solicit any contributions that were not tax deductible?				}	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributi	ons or						
	gifts were not tax deductible?					6b		
7	Organizations that may receive deductible contributions under section 170(c).						\$1. X	Ài s
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more	than					<u> </u>	<u> </u>
	\$75?			•	}	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?					7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as						
	required to file Form 8282?	r · 1			-	7c		X
đ	If "Yes," indicate the number of Forms 8282 filed during the year	7d	L			34	^,	, (%a
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a	persona	al					8 \
	benefit contract?				}	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti				}	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?				}	7 <u>g</u>		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-	C as						
	required?			•		7h		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec					√×4	5 53	3
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sporting organization.	nsoring			ŀ	, ·		<u>`.</u>
•	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.				j.	-0.5	1/2 1	
а	Did the organization make any taxable distributions under section 4966?				-	9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	•				9b		<u> </u>
0	Section 501(c)(7) organizations. Enter:	1 44 1	1					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				>		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	L			•		
1	Section 501(c)(12) organizations. Enter:	1 1	1					
а	Gross income from members or shareholders	11a						
b	Gross income from other sources (Do not net amounts due or paid to other sources against							
	amounts due or received from them)	11b						
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1 1) 		Ļ	12a		
h	If "Yes." enter the amount of tax-exempt interest received or accrued during the year	1 12h					į	

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

Sec	tion A. Governing Body and Management						
	•					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.	1					
1a	Enter the number of voting members of the governing body	1a	12				
b	Enter the number of voting members that are independent	1b	12		1]
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with			1		
	any other officer, director, trustee, or key employee?				2	X	
3	Did the organization delegate control over management duties customanly performed by or under the	dırect					
_	supervision of officers, directors or trustees, or key employees to a management company or other pe				3		x
4	Did the organization make any significant changes to its organizational documents since the prior Fon				4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets		was mea.	•	5		X
6	Does the organization have members or stockholders?	•		•	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more men	mhers			۰	_	
	of the governing body?				 7a		x
b	Are any decisions of the governing body subject to approval by members, stockholders, or other person	nns?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken di		•		``	, ,	
•	the year by the following:	41111g			w ñ	u ATT	
а	The governing body?				8a	X	لكند
b	Each committee with authority to act on behalf of the governing body?				8b	X	
9a	Does the organization have local chapters, branches, or affiliates?		•		9a		x
b	If "Yes," does the organization have written policies and procedures governing the activities of such ch	anter	2	•	Ja		
_	affiliates, and branches to ensure their operations are consistent with those of the organization?	артоп	,		9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organization	anizatı	ons		35		
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	J	01.0		10	х	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be re	ached	∖at	•			
••	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	a01100	a.		11		x
Sec	tion B. Policies			<u> </u>			
						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	d aive		•			
-	nse to conflicts?	- 3			12b	x	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es."	•				
	describe in Schedule O how this is done	•			12c	X	
13	Does the organization have a written whistleblower policy?				13	Х	
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	bv .		•			*
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and	-	ion:		~ , ;		
а	The organization's CEO, Executive Director, or top management official?				15a	X	
b	Other officers or key employees of the organization?		••		15b	X	
-	Describe the process in Schedule O. (see instructions)				,		- 1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	ent				. , ,	ar dra
	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	ate	•				- (
_	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safe						
	the organization's exempt status with respect to such arrangements?	900.0			16b		
Sec	tion C. Disclosure			•	100		
17	List the states with which a copy of this Form 990 is required to be filed None						
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)	 (3)s onlv)	•			•
	available for public inspection. Indicate how you make these available. Check all that apply.	-01(0)	(0)0 0.119)				
	Own website X Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, co	nflict	of interest				
15	policy, and financial statements available to the public	mact (or interest				
20		l roos-	de of the				
20	State the name, physical address, and telephone number of the person who possesses the books and organization Colin Hanlon 100 Kanaloa						
T	• • • • • • • • • • • • • • • • • • • •			000	24	ο A	262
	hului H	<u>. , , , , , , , , , , , , , , , , , , ,</u>	6732	808	<u>- 44</u>	<u> </u>	<u> </u>

Part VIII 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 compensated employees; and former such persons.

Check this box if the o	rganization did not comp	ensat	e an	y off	icer,	direc	ctor,	trustee, or key employee.		
Check this box if the organization did not compensate any officer, director, t (A) (B) (C) Name and Title Average Position (check all that apply)							(D)	(E)	(F)	
Name and Title	Average hours per week					hat a Highest employ	PPIy) Former	compensation from the	Reportable compensation from related organizations	Estimated amount of other compensation
		Individual trustee or director	Institutional trustee		ployee	t compensated ee		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
Chuck Allen		1		t						
Director	1	X					L.	0	0	0
Craig Bode	_									
Pres Elect	1	X	_		L	<u> </u>		0	0	0
Patrick Mats										
Secretary	1	X				$oxed{oxed}$		0	0	0
Mike Nobriga		ł								
Director	1	X	_	_		Ш		0	0	0
Pua Gomes					İ	1				-
Director	1	x						0	0	0
Dave Jorgens										
Director	1	X	<u> </u>	L				0	0	0
Don Couch		1		l						
Treasurer	11	X						0	0	0
Keone Ball										
President	1	X						0	0	0
Doug Levin										
Director	1	X						0	0	0
Kim Abrahams										
Director	1	X						0	0	0
Jeff Murray										
Director	1	X						o	0	0
Chris Minfor	'd									
V President_	1	X						0	0	0
Colin Hanlor										
CPO	40			X				88,800	0	0
								• • •		
								0	0	0
_	=	igspace							·	
.										
		igspace	<u> </u>			Щ				
<u> </u>										

Pa	rt VII Section A	A. Officers, Directors, Trus	stees	s, Ke	у Еі	nplo	yee	s, ar	nd Highest Compensated	Employees (continued)	
	(A)	(B)				C)			(D)	(E)	(F)
	Name and title	Average	⊢				hat a		Reportable	Reportable	Estimated
		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	彎	Former	compensation	compensation from related	amount of other
			E E	ŧ	ğ	[팔	oye est	ब्	the	organizations	compensation
			ᄝᄬ	nal		ğ	[#S		organization	(W-2/1099-MISC)	from the
			ste	trus		l a	pen		(W-2/1099-MISC)		organization and related
			l [®]	e			Highest compensated employee				organizations
			<u> </u>	<u> </u>	<u> </u>		ة ا	<u> </u>			
	· ·										
					,						
	•••										
	•										
<u>1b</u>	Total							<u> </u>	88,800	· · · · · · · · · · · · · · · · · ·	
2	_	viduals (including those in	1a) v	who i	rece	ived	more	e tha	an \$100,000 in reportable o	compensation from the	
	organization ▶ 0										
											Yes No
3		list any former officer, dire 12 If "Yes," complete Sched							yee, or highest compensat	ed	3 X
4									n and other compensation	from .	
•									s," complete Schedule J for		de la Companya de la
_	ındivıdual										4 X
5		d on line 1a receive or acci the organization? If "Yes,"							y unrelated organization for	r	5 X
Sec	tion B. Independent		COI	ibie	6 30	neu	ule J	101	such person ,	· · · · · · · · · · · · · · · · · · ·	5 X
1		for your five highest compe	ensa	ted II	ndep	end	ent c	ontr	actors that received more t	than \$100,000 of	
		(A) Name and business address							Descript	(B) tion of services	(C) Compensation
						_					
	·										
2	Total number of inde	·	ding	thos	se in	1) w	ho r	ecer	ved more than \$100,000 in		0
DAA											Form 990 (2008)

76,716

0

1,617,983

140,954 Form 990 (2008)

0

d All other revenue

9c, 10c, and 11e

Total. Add lines 11a-11d

Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c,

Part X Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must e	complete column (A) but a			<u> </u>
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		<u> </u>	gonoral expenses	* , 1
•	organizations in the U.S. See Part IV, line 21				<i>3</i> ~~ ' - % -
2	Grants and other assistance to individuals in			} , <u>}</u>	, ,i, ,
_	the U.S. See Part IV, line 22			,	*
3	Grants and other assistance to governments,			,	**
	organizations, and individuals outside the				1 , 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	226,800	80,640	123,960	22,200
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	729,986	595,329	93,447	41,210
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	27,409	19,641	6,014	1,754
9	Other employee benefits	72,773	46,503	20,338	5,932
10	Payroll taxes	77,094	53,548	18,229	5,317
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting	11,267		11,267	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17			\$ \$	
f	Investment management fees		,		
g	Other				
12	Advertising and promotion		· · ·		
13	Office expenses				
14	Information technology				
15	Royalties	187,559	168,803	16,880	1,876
16 17	Occupancy Travel	40,685	36,483	4,202	1,0/0
18	Payments of travel or entertainment expenses	40,003	30,403	7,202	
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	8,362	6,161	2,201	
20	Interest	0,302	0,101	2/201	
21	Payments to affiliates			***	
22	Depreciation, depletion, and amortization	43,672	40,364	2,970	338
23	Insurance			-,-,-	220
-		× * * * * *	, ,	,	1
24	Other expenses. Itemize expenses not				
	covered above. (Expenses grouped together				*
	and labeled miscellaneous may not exceed				,
	5% of total expenses shown on line 25 below)				
а	Supplies	133,158	124,364	8,794	
b	Equipment Rent and Maint	34,488	33,660	828	
С	Construction Pass Through	31,988	31,526	462	
d	Insurance	28,634	23,919	4,715	
e	Telephone	27,117	10,836	13,955	2,326
f	All other expenses	52,541	19,922	29,851	2,768
25	Total functional expenses. Add lines 1 through 24f	1,733,533	1,291,699	358,113	83,721
26	Joint Costs. Check here ☐ If following SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation		ļ		
DAA					Form 990 (2008)

<u> </u>	art)	Balance Sheet					<u> </u>				
							(A) Beginning of year			(B) of year	
	1	Cash—non-interest bearing			-		59,243	1		244,	
	2	Savings and temporary cash investments	••				260,000			145,	
	3	Pledges and grants receivable, net			•		287,380			218,	
	4	Accounts receivable, net	•		•			4		<u>,</u>	
	5	Receivables from current and former officers, directors,	trustee	es kev	•			Ť			
	ľ	employees, or other related parties Complete Part II of						5			
	6	Receivables from other disqualified persons (as defined			• •	•	Ç.	<u> </u>		(a. >	
	ľ	4958(f)(1)) and persons described in section 4958(c)(3)(%	
		Part II of Schedule L	<i>D)</i> . 00	inpicto			**************************************	6	·		
S	7	Notes and loans receivable, net	••			٠		7			
et	8	Inventories for sale or use	• •	•••		•		8			
Assets	9	Prepaid expenses and deferred charges	•		•		16,989			19.	780
4	10a		10a	l	400	,268	10,705	"		<u> </u>	700
	l	- · · · · · · · · · · · · · · · · · · ·	IVa	 	- 100	, 200		ж.	\$	2	
	ן י	Less: accumulated depreciation. Complete Part VI of Schedule D	10b		251	,494	147,884	400	<u> </u>	148,	774
	44	Investments—publicly traded securities	100	<u> </u>	231	, 1)1				140,	//3
	11	· · · · · · · · · · · · · · · · · · ·	• •	• •	• • •			11			
	13	Investments—other secunties. See Part IV, line 11 Investments—program-related. See Part IV, line 11			•	•		12			
		, -		•	•		<u>-</u>	13			
	14	Intangible assets Other assets See Bort IV line 11		• •	•		3,764,201	14		640,	904
	15	Other assets. See Part IV, line 11	11		•	• • •		15			
	16 17	Total assets. Add lines 1 through 15 (must equal line 34 Accounts payable and accrued expenses		• •	·.	•	4,535,697 75,460	16	7,	<u>416,</u>	
	ł	•		•	•		73,400		 	14,	076
	18	Grants payable						18			
	19 20	Deferred revenue	•	••				19			
S		Tax-exempt bond liabilities			••			20			
Liabilities	21	Escrow account liability. Complete Part IV of Schedule D	•	_			. 20.36.4.0.1	21	- " **	Z. x. 8.000	
	22	Payables to current and former officers, directors, trusted	-	<i>'</i>				J.			. 3
<u>a</u>	l	employees, highest compensated employees, and disqu	aimed							·	
_	,,	persons. Complete Part II of Schedule L	Dodio		•			22			
	23	Secured mortgages and notes payable to unrelated third	partie	5	•			23	-		
	24	Unsecured notes and loans payable						24			
	25 26	Other liabilities. Complete Part X of Schedule D Total liabilities. Add lines 17 through 25		-	•		75,460	25		72	076
<u></u>	20_				• •		73,400	26		14,	076
nces		Organizations that follow SFAS 117, check here	and								
an	27	complete lines 27 through 29, and lines 33 and 34.					682,734			567,	101
Balaı		Unrestricted net assets					3,777,503	27		777,	
P	28	Temporarily restricted net assets					3,111,303	28	3,	<i>/ / / ,</i>	303
Fund	29	Permanently restricted net assets	r	ካ				29			
Ē		Organizations that do not follow SFAS 117, check her	e 🖊							Serva	
o	20	and complete lines 30 through 34.								<u> </u>	
Net Assets	30	Capital stock or trust principal, or current funds		• •				30			
SS	31	Paid-in or capital surplus, or land, building, or equipment			-			31			
Ä	32	Retained earnings, endowment, accumulated income, or	other	tunds			4 460 227	32		2.4.4	<u> </u>
let	33	Total net assets or fund balances			•		4,460,237	33		344,	
	34	Total liabilities and net assets/fund balances			•		4,535,697	34	4,	416,	/63
P	art X	I Financial Statements and Reporting							-		
_				G-3 .						Yes	No
1		· · · · ·	ash	ᅟ	ccrual	\Box	ther		ļ		<u> </u> -
2a		ere the organization's financial statements compiled or rev		-		t accoun	itant?		28	-	X
b		ere the organization's financial statements audited by an ir							21	<u> </u>	├ —
C		Yes" to lines 2a or 2b, does the organization have a comm				-	•			1	
		e audit, review, or compilation of its financial statements a							20	: X	
3a		a result of a federal award, was the organization required	to und	lergo an	audit or a	udits as	set forth in				
		Single Audit Act and OMB Circular A-133?							38		<u> </u>
b	If "	Yes," did the organization undergo the required audit or a	udits?						3t	<u> </u>	<u></u>

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.

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

OMB No 1545-0047

Open to Public.

Department of the Treasury internal Revenue Service

Name of the organization

Boys and Girls Club of Maui, Inc.

Employer Identification number 99-0272347

_	4 -	w4	2 2 111 21	21 1 14 11	·					 -				
<u> </u> ₽	art I	Reas	ion for Public Charity	Status (All organizations	s must	comple	te this	part.)	(see i	nstruc	ctions)			
The	orga	nization is not	t a private foundation becaus	se it is: (Please check only one	organizat	ion.)								
1	Ш	A church, co	envention of churches, or ass	sociation of churches described	in sectio	n 170(b)(1)(A)(i).							
2	Ш	A school des	scribed in section 170(b)(1)(A)(ii). (Attach Schedule E.)										
3	Ш	A hospital or	a cooperative hospital servi	ce organization described in se	ction 170	(b)(1)(A)(iii). (Atta	ach Sch	edule F	l.)				
4		A medical re	search organization operate	d in conjunction with a hospital	described	ın sectio	n 170(b)(1)(A)(i	iii). Ente	er the h	ospital's nan	ıe,		
		city, and stat	te:											
5	П	An organizat	tion operated for the benefit	of a college or university owned	or operat	ted by a d	overnme	ental un	it descr	bed in		. ,		
	_		(b)(1)(A)(iv). (Complete Part			,								
6	\Box			overnmental unit described in s	ection 17	70(b)/1\(A	.VvI							
7	X			substantial part of its support fr				from the	aner	al public				
•	ص		section 170(b)(1)(A)(vi). (C		om a gov	Cilinicina	i di iit oi	ii Oiii tiit	yene.	ai public	•			
8	\Box			170(b)(1)(A)(vi). (Complete Part	- H A									
9	Н				-	. contribut	iono m							
3	An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its													
	support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses													
	support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)													
40							•							
10	Н			exclusively to test for public saf	-			•						
11	Ш			exclusively for the benefit of, to					•					
				ed organizations described in s						section	1			
		<u> </u>		he type of supporting organizati		•		_ `						
	\Box	a Type I b Type II c Type III-Functionally Integrated d Type III-Other												
е	Ш			ganization is not controlled direc	-				-					
				and other than one or more pul	blicly supp	ported org	janizatio	ns desc	ribed in	section	ו			
_			section 509(a)(2).			_	_							
f		_		ermination from the IRS that it is	a Type I	, Type II,	or Type	III supp	orting				_	
		_	check this box											
g		Since Augus	t 17, 2006, has the organiza	tion accepted any gift or contrib	ution fron	n any of th	ne							
		following per	rsons?											
		(i) A persor	n who directly or indirectly co	ontrols, either alone or together	with perso	ons descr	ıbed ın (н)				Yes	No	
		and (III)	below, the governing body o	f the supported organization?							11g(i	Д	<u> </u>	
		(ii) A family	member of a person describ	ped in (i) above?							11g(ı)		
		(iii) A 35% c	controlled entity of a person of	described in (i) or (ii) above?							11g(i	ii)		
h		Provide the	following information about t	he organizations the organization	on suppor	ts.								
(i)	Name	of supported	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Did v	rou notify	(vi)	ls the	(vii) Ar	mount of	_	
	orga	anization		(described on lines 1-9	1 ' '	sted in your	, , ,	nization in	organizat			port		
				above or IRC section	governing	document?		of your		zed in the				
				(see instructions))	Yes	No	Yes	oort? No	Yes	S? No				
		···			163	140	163	- "	163	140				
					 				 					
					<u> </u>					-				
			<u> </u>		-				 					
					 				 				-	
							_							
			*	, , , , ,	^ /				7.7	<i>'</i>				
Tota	<u></u>			,	1				* -					

Sche	edule A (Form 990 or 990-EZ) 2008 Bo ğ	s and Gi	cls Club	of Maui,	Inc. 99	-0272347	Page 2	
	irt II Support Schedule for O					170(b)(1)(A)(vi)	
	`(Complete only if you ch	ecked the box	on line 5, 7, o	r 8 of Part I.)	,,,,,,,	(// // //	•	
Sec	tion A. Public Support	· -				<u> </u>		
Ca	lendar 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.")	1,126,591	1,677,301	1,515,397	1,439,482	1,515,409	7,274,180	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge	415,056	415,056	455,481	364,416	364,416	2,014,425	
4	Total. Add lines 1-3	1,541,647	2,092,357	1,970,878	1,803,898	1,879,825	9,288,605	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4	**************************************		A Branch State of the	A. E. xx ?		9,288,605	
	tion B. Total Support					- -		
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total	
7								
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 57 77 9,986 10,833 4,6						25,642	
9	Net income from unrelated business 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 IV)	57,445	61,414	66,075	59,418	54,760	299,112	
11	Total support. Add lines 7 through 10		7.	<i>~</i>	* 5 ° ° 5		9,613,359	
12	Gross receipts from related activities, etc	` '				12	330,670	
13	First five years. If the Form 990 is for the		, second, third, for	or fifth tax yea	ir as a section 501	(c)(3)		
Sac	organization, check this box and stop her tion C. Computation of Public St		200		<u> </u>		▶	
	•	• •		- (5)		Tail		
14 15	Public support percentage for 2008 (line 6 Public support percentage from 2007 Schi		•	ın (+)) .	•	14	96.6218 %	
16a	33 1/3 % support test—2008. If the organ	•	• •	13. and line 14 is 1	 33 1/3 % or more	15	96.0306 %	
IVA	and stop here. The organization qualifies			13, and line 14 15	55 1/5 % OF HIGHE,	Check this box	► X	
b	33 1/3 % support test—2007. If the organ		_	or 16a and line 1	5 is 33 1/2 % or ~	nore check this	- 21	
_	box and stop here. The organization quali				10 13 00 170 70 01 11	iore, crieck triis	▶ □	
17a	10%-facts-and-circumstances test—200	•	• • •	•	a. or 16b. and line	14 is 10% or	<i>,</i> –	
	more, and if the organization meets the "fa							
	organization meets the "facts-and-circums			=	•		▶ □	
b	10%-facts-and-circumstances test—200					•		
	more, and if the organization meets the "fa							
40	organization meets the "facts-and-circums	tances" test. The o	organizatıon qualıfi	es as a publicly su	pported organizati	on	₽H	
18	Private foundation. If the organization did	HOL CHECK a DOX O	11 line 13, 16a, 16t	o, 17a, or 17b, che	CK THIS DOX and SE	e instructions	<u> </u>	

Schedule A (Form 990 or 990-EZ) 2008

	edule A (Form 990 or 990-EZ) 2008 Boy					<u>-0272347</u>	Page 3
P	art III Support Schedule for O				(2)		
	(Complete only if you ch	ecked the box	on line 9 of P	art I.)			
	tion A. Public Support						
Ca	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						
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>š. v</u>	i sim	
	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) 200 !	(2) 2000	(6) 2000	(u) 2007	(6) 2000	(i) rotas
l0a							
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	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						
2	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
3	Total support. (Add lines 9, 10c, 11,		-				
	and 12.)			, .*	AS 2 /		
4	First five years. If the Form 990 is for the		, second, third, for	urth, or fifth tax yea	ir as a section 501	(c)(3)	
	organization, check this box and stop here		•		·. · · • · · · · · · · · · · · · · · · ·		<u> ▶ </u>
Sec	tion C. Computation of Public Su						
5	Public support percentage for 2008 (line 8		-	n (f))		. 15	%
6	Public support percentage from 2007 Sche				•	16	%
	tion D. Computation of Investme					···	
7	Investment income percentage for 2008 (In	, ,	•	, column (f))		17	%
8	Investment income percentage from 2007					18	%
9a	33 1/3 % support tests—2008. If the organ						_
	17 is not more than 33 1/3 %, check this b		-	•			. ▶ 📙
b	33 1/3 % support tests—2007. If the orga						. —
_	line 18 is not more than 33 1/3 %, check the					_	▶Џ
0	Private foundation. If the organization did	not check a box o	n line 14, 19a or 1	9b, check this box	and see instruction	ns	▶ ∐

Schedu Part	IV Supp	lemental Information	on. Complete this	part to provid	de the explanatio	99-0272347 required by Part II, lin	ne 10;
	 	_			other additional in	formation. (see instruc	ctions)
	•	ine 10 - Othe	er income D	•			
Pro	gram Sei	rvices		\$.	299,112		
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047 2008

Open to Public

Name of the organization Employer identification number Boys and Girls Club of Maui, Inc. 99-0272347 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if 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 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year 4 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? 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 a 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) d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 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 7 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 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III 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: Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Schedule		Girls Club				272347		Page 2			
Part I							ssets (cont	inued)			
	ing the organization's accession and other ms (check all that apply):	records, check any of	f the following th	at are a sign	ficant use of its	collection					
а ∏	Public exhibition	ها ∏ اه	oan or exchange	programs							
БH	Scholarly research		ther	programs							
ے د	Preservation for future generations	e [] 0			- -						
	ovide a description of the organization's cort XIV.	llections and explain h	now they further	he organızat	ion's exempt p	urpose in					
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No											
Part I	V Trust, Escrow and Custod	ial Arrangements	s. Complete i	f organiza	tion answer	ed "Yes" t	o Form 990				
4- 1-4	Part IV, line 9, or reported										
	the organization an agent, trustee, custoda	an or other intermedia	ry for contribution	ns or other a	ssets not		□ _{₩-} -	□			
	luded on Form 990, Part X?						Yes	∐ No			
D II	Yes," explain the arrangement in Part XIV	and complete the folio	wing table:				Amou	unt			
- D-	avanua halanaa					-	Ailot	<i>ant</i>			
	ginning balance			-	•	. <u>1c</u>					
	ditions during the year	•	• •	•		1d					
	stributions during the year			••		1e					
	ding balance I the organization include an amount on Fo	000 Bt V 1 0	40	•		. <u>1</u> f					
	•	•	17 .	•			∐ Yes	L∐ No			
Part \	Yes," explain the arrangement in Part XIV. Endowment Funds. Comp		n answered '	Voc" to E	orm 000 Bc	rt IV/ line	10				
rait	Tildowinient Funds. Comp	(a) Current year	(b) Pnor	-	Two years back	(d) Three yea		our years back			
40 Bo	supplied of year halance	(a) Current year	(6) Filor	real (C)	Two years back	(u) Three yea	S M	our years back			
	ginning of year balance		7 3					<u> </u>			
	ntributions		11 2	<u>`</u>	.001 48 18	i.ŝ.	<u>~</u>				
	restment earnings or losses					***		- '*			
	ants or scholarships		7. 3h	· · · · · · · · · · · · · · · · · · ·				<u>;</u>			
	ner expenditures for facilities					·	3 .	* . *			
	d programs			ć. ,	· `** > . }~	*					
	ministrative expenses		* 38.4	- North Control	*** * *	·	· ************************************				
•	d of year balance		<u> </u>			L					
	ovide the estimated percentage of the year	end balance neld as:									
	ard designated or quasi-endowment	%									
	rmanent endowment \(\sum%										
	m endowment ► %										
	e there endowment funds not in the posses	ssion of the organization	on that are neid a	ina aaministi	erea for the			V 1			
_	anization by:						[a./	Yes No			
	unrelated organizations						3a(i				
	related organizations		0-1-4-1- D0	•		•	3a(ii				
	Yes" to 3a(ii), are the related organizations	•		•			<u>3b</u>				
	scribe in Part XIV the intended uses of the			000 D	ant V lina 1						
Part \							1 (0.5)				
	Description of investment	(a) Cost or other bas (investment)	, , ,	ost or other is (other)	(C) De	preciation	(a) RX	ok value			
1a Lar	nd .										
b Bui	ıldıngs										
c Lea	asehold improvements										
d Equ	uipment .										
e Oth		<u> </u>		400,26	8	251,494	1 1	48,774			
Total. Ad	d lines 1a-1e (Column (d) should equal F	orm 990, Part X, colur	nn (B), line 10(c	.)		<u> </u>	. 1	48,774			

Schedule D (Form 990) 2008 Boys and Girls Club		<u>99-0272347</u>	Page 3
Part VII Investments—Other Securities. See Form 9			
(a) Description of security or category	(b) Book value	(c) Method of	
(including name of security)		Cost or end-of-yea	r 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 9		<u> </u>	<u> </u>
(a) Description of investment type	(b) Book value	(c) Method of	valuation
(a) Description of investment type	(b) book value	Cost or end-of-yea	
	-		
			
			· <u>· · · · · · · · · · · · · · · · · · </u>
			<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
Contribution Receivabl	<u>e-Facilities</u>		3,637,262
Other Receivable			2,542
Security Deposit			1,100
			
	·-		
	"		
Total. (Column (b) should equal Form 990, Part X, col. (B) line 15)			3,640,904
Part X Other Liabilities. See Form 990, Part X, line 2	25		3,040,304
(a) Description of liability	(b) Amount		
Federal income taxes	(b) ranount	- ·	
T COCIAI INCOME CAXCO	 	-	
		1	
		1	
		†	
		- -	
		1	
		†	
	 	†	
		†	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)		†	
In Part XIV, provide the text of the footnote to the organization's financial st	atements that reports the or	rganization's liability for	
		garneonon o nability 101	

uncertain tax positions under FIN 48.

	dule D (Form 990) 2008 Boys and Girls Club of Maui, Inc. 99-027234	7	Page 4
	Total revenue (Form 990, Part VIII, column (A), line 12)	1 4 1	1 617 002
1		1 1	1,617,983
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,733,533 -115,550
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-115,550
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	_5	
6	Investment expenses	6	·- <u> </u>
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4-8	9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-115,550
.∦Rá	Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements	1	2,048,229
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities 2b 430,246		
С	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	430,246
3	Subtract line 2e from line 1	3	1,617,983
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	24	
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV) 4b		
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	1,617,983
· Pa	Reconciliation of Expenses per Audited Financial Statements With Expenses per F	Return	
1	Total expenses and losses per audited financial statements	1	2,163,779
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a 430,246		
b	Prior year adjustments 2b	4.1	
c	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV)	* 14	
e	Add lines 2a through 2d	2e	430,246
3	Subtract line 2e from line 1	3	1,733,533
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		177337333
a	Investment expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV) Add lines 4a and 4b	4.0	
_	•••	4c	1,733,533
5 	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	1,733,333
	rt XIV Supplemental Information	 -	
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b		
and 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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Page 5		2347	99-0272	9	nc.	I	ui,	Ma	of	lub	3 C	irle	l G	and	ys	Во	2008	990) 2	Form	e D (Schedu
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SCHEDULE O

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.

Name of the organization

Boys and Girls Club of Maui, Inc.

Employer identification number 99-0272347

Amended Return Explanation

Change to the original return due to post audit adjustments.

Form 990, Part VI, Line 2 - Related Party Information Among Officers

Don Couch

Levin & Hu, CPA

Director

Business

Form 990, Part VI, Line 10 - Organization's Process Used to Review Form 990 Copy of Form 990 is provided to the audit chair for review, then the Finance Committee for review and approval prior to filing of the return.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
Monitoring is done through review and discussion of the policy during the
board of directors meetings and an annual meeting is done to review
the handbook with the entire staff. Board members, directors, and all
employees are mandated to report any suspected violation of policy which
would be investigated in accordance with the policy.

Form 990, Part VI, Line 15a - Compensation Process for Top Official Compensation is determined in conjunction with the Job Classification and Compensation Management Program, an independent consultant, and the Salary Review Committee. The process was recommended as a part of the Standards of Organizational Effectiveness through the Boys & Girls Clubs of America.

Name of the organization

Boys and Girls Club of Maui, Inc.

Employer identification number 99-0272347

Form 990, Part VI, Line 15b - Compensation Process for Officers Compensation is determined in conjunction with the Job Classification and Compensation Management Program, an independent consultant, and the Board of Directors Salary Review Committee. The process was recommended as a part of the Standards of Organizational Effectiveness through the Boys & Girls Club of America.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Upon request to the office of the Chief Professional Officer or the Board of Directors.

Form 4562

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

Identifying number Boys and Girls Club of Maui, Inc. 99-0272347 Business or activity to which this form relates Indirect Depreciation **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 250,000 1 Maximum amount. See the instructions for a higher limit for certain businesses. 2 Total cost of section 179 property placed in service (see instructions) 2 3 800,000 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year. Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (b) Cost (business use only) (a) Description of property (c) Elected cost 6 Listed property. Enter the amount from line 29 7 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 10 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions. Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 15 Other depreciation (including ACRS) 43,672 MACRS Depreciation (Do not include listed property.) (See instructions. Part III Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2008 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery (a) Classification of property (business/investment use (e) Convention year placed in (f) Method (a) Depreciation deduction репоф only-see instructions) 19a 3-year property 5-year property 7-year property d 10-year property 15-year property 20-year property g 25-year property 25 yrs. S/L Residential rental 27.5 yrs. MM S/L property 27.5 yrs. ММ S/L ММ Nonresidential real 39 yrs S/L property S/L Section C—Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs. b 12-year S/I 40-year S/L 40 yrs MM Part IV Summary (See instructions.) Listed property. Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instr. 43,672 For assets shown above and placed in service during the current year, 23 enter the portion of the basis attributable to section 263A costs

813106 05/13/2011 3 38 PM	M	Special Ever				_	
- 000	I	2009					
Form 990	For calendar year 2008, or tax y	ear beginning	7/01/08	, and ending	6	/30/09	2008
Name ,						Employer Ide	ntification Number
Boys and G	irls Club of Maui,	Inc.				99-0272	2347
Gross receipts Less contributions Gross revenue Less direct expense Net income (loss)	(A) 76,646 0 76,646 0 76,646	(B) 70 0 70 0 70 70 70	(C)	Ot Ot Ot Ot Ot Ot Ot Ot Ot Ot Ot Ot Ot O	hers	0 0 0 0	Total 76,716 0 76,716 0 76,716
Description (A) (B) (C) Other	Golf Tournament Other County Fair Par Jaycees Carniva Hoolaulea Haiki Soda Commission	rking al					