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Form 990

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)

2009

2009

Department of the Treasury Internal Revenue Service

SCANNED NOV 0 4 2010

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

	For the	2009 calendar y	ear, e	or tax year beginning	, 2009, and endir	ng		
	Check if a			C			D Employer Identific	cation Number
	\Box	Pleas	se use label	BOYS AND GIRLS CLUBS OF E	AST TEXAS, INC		75-25414	08
	\vdash	orı	pnnt type.	504 W. 32ND			E Telephone numbe	er
	\vdash	ĭ S	iee	TYLER, TX 75702			903-593-	9211
	\mathbf{H}	ins	ecific truc-			ł		
	\vdash	nded return	ons.				G Gross receipts \$	1,724,858.
	\vdash	<u> </u>	Vame a	and address of principal officer		H(a) Is this a	group return for affilia	
				As C Above			affiliates included?	Yes No
	Tayle	xempt status X			7(a)(1) or 527	If 'No,'	attach a list (see instr	uctions)
÷	Webs		1 301	(6) (3) (11351(116))	/(a)(1) 01 02.	H(c) Group	exemption number	
K			Corpora	ation Trust Association Other▶	L Year of Forma		M State of leg	nal domicile
	ra (F		COIPUIA	Trust Association Office	L (car of cama-		100 0000	
THE	1 B	riefly describe th	ne ord	ganization's mission or most significant a	ctivities PROVIDE	RECREA	TIONAL, EDI	JCATIONAL AND
4.				ROGRAMS TO AT-RISK YOUTHS				799 <u>7</u>
Governance		Our mmiir	<u> </u>	WOUND TO UT 1/20/C 16/10/C	70 70 70 70 70		rer	
Ŧ	_					- -		
ove	2 C	heck this box >	$\lceil \rceil \rceil$	if the organization discontinued its opera	itions or disposed of mo	ore than 2	5% of its assets	_
ď				bers of the governing body (Part VI, line			3	7
Activities &	,	•		it voting members of the governing body	(Part VI, line 1b)		4	0
VIţie				yees (Part V, line 2a)			5	183
ŧ				eers (estimate if necessary)	(0)		6	0
٩		-		business revenue from Part VIII, column			7a 7b	0.
_	ÞΝ	let unrelated bus	siness	s taxable income from Form 990-T, line 3	4			
						P	rior Year	Current Year 646, 015.
ē	1		~	nts (Part VIII, line 1h)			751,300. 883,117.	1,023,063.
ē				ue (Part VIII, line 2g)		-	18,537.	26,550.
Revenue				art VIII, column (A), lines 3, 4, and 7d)	and 11a)		10,337.	20,330.
				III, column (A), lines 5, 6d, 8c, 9c, 10c, a nes 8 through 11 (must equal Part VIII, c		1	,652,954.	1,695,628.
				ounts paid (Part IX, column (A), lines 1-3			, 052, 554.	1,033,020.
	14 B	Ronofite noid to c	ar for	members (Part IX Polume (A), lines 12	~			
	15 S	clarios ether of	וטו וכו	nsation, employee benefits (Part IX, colu	mn (A) lines 5-10)	1	,301,680.	1,070,626.
ės					اب		, 301, 000.	1,010,020.
Expenses					3			
ᅑ	b⊺	otal fundraising	expe	nses (Part & collina (D), and B)	194,038.			
_	17 C	Other expenses ((Part	IX, column (A), lines 11a-11d, 11f-24f)-1	[5]		715,984.	689,139.
	18 T	otal expenses. A	Add I	nes 13-17 (must egual Part IX, dolumn (A) line 25)		2,017,664.	1,759,765.
	19 1	Revenue less exp	oense	s. Subtract line 18-from-line 12		_	-364,710.	-64,137.
Net Assets or Fund Balances							nning of Year	End of Year
10 10	20 T	otal assets (Par	t X, I	ne 16)		3	3,236,176.	3,029,194.
Z P	21 T	otal liabilities (P	Part X	, line 26)			267,745.	124,900.
pr. 1.	L <u> </u>		nd bal	ances. Subtract line 21 from line 20			2,968,431.	2,904,294.
ĮP.	iti U	Signature	Blo	ck	<u> </u>			
		Under penalties of p	perjury,	I declare that I have examined this return, including a Declaration of preparer (other than officer) is based of	ccompanying schedules and st	atements, and	I to the best of my kno	wledge and belief, it is
		inde, correct and co	Ž,,e,	Declaration of preparer (other diam officer) is based of	on an information of which prep	,are, nas any		3-10
Si		- F-5	<u>v . </u>	1 from				
He	re	Signature of off	ficer	ROOMS TREASU	RAZ	D:	ate	
		F.11.	<u>a</u>		<u> </u>			
		Type or print na	ame ar	d tite		·-·· · · ·	·	
_					Date	2	Check if Pro	eparer's identifying number instructions)
Pa		Preparer's		Grand A. Caker OF	11	l e	mployed -	10050187 5 /m
Pr		signature -	V	coach " Clini or	10.4	-(0	N,	/A
pa Us	rer's	Firm's name (or	Ack	er & Company				N
	ily	yours if self employed),		4 Grande Blvd.		E	IN ► N/A	\
-	··· y	address, and ZIP + 4	Tyl	er, TX 75703		F	Phone no ► (903	3) 592-4584
Ma	v the IR	S discuss this re	eturn	with the preparer shown above? (see in-	structions)			X Yes No

	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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 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	_	X
5	Section 501(c)(x4), 501(c)(x5), and 501(c)(x6) 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 similar funds or 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?//f '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		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments If 'Yes,' complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
•	Did the organization report an amount for land, buildings and equipment in Part X, line 103f 'Yes,' complete Schedule D, Part VI			
•	Did the organization report an amount for investments- other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII) !:	
•	Did the organization report an amount for investments- program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII			
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX			
	Did the organization report an amount for other liabilities in Part X, line 257lf 'Yes,' complete Schedule D, Part X			
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If/es,' complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	X	
12.	A Was the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional Yes No			
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	ļ	X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a	1	X
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	141	,	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	-	X
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	-	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I	17		X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a7f 'Yes,' complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X

Form 990 (2009) BOYS AND GIRLS CLUBS OF EAST TEXAS, INC 75-2541408 Page 4 Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1° If 'Yes,' complete Schedule I, Parts I and II 21 21 Х Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III 22 Х Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete 23 Х Schedule J 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25 24a X 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 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 Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a Х b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZAf 'Yes,' complete 25b Х Schedule L. Part I 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 Х Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual of Yes, complete Schedule L. Part III 27 Х Was the organization a party to a business transation with one of the following parties (see Schedule L. Part IV instructions for applicable filing thresholds, conditions, and exceptions): X a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a **b** A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Х Schedule L. Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV Х 28c Х 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 M30 X X Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 32 Χ Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3 and 301.7701-3? If 'Yes,' complete Schedule R, Part I Х 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 Х Is any related organization a controlled entity within the meaning of section 512(b)(13)7f 'Yes,' complete Schedule R, 35 Part V. line 2 35 X Section 501(c)(3) organizations.Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36 X

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37

38

X

X

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197

Note. All Form 990 filers are required to complete Schedule O

75-2541408 Page **5** Yes No

		1		163	110
1 a	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S Information Returns Enter -0- if not applicable	1a <u>0</u>			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1 b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendor (gambling) winnings to prize winners?	s and reportable gaming	1c		البي
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 183			
2b	If at least one is reported on line 2a, did the organization file all required federal employment		2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required toe-file this return				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year this return?	r covered by	3a		Х
b	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature financial account in a foreign country (such as a bank account, securities account, or other fi	or other authority over, a inancial account)?	4a		Х
b	If 'Yes,' enter the name of the foreign country: ►				
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Financial Accounts.	Foreign Bank and			
	Was the organization a party to a prohibited tax shelter transaction at any time during the ta		5 a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelf	er transaction?	5b	ļ	X
c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Er Tax Shelter Transaction?	itity Regarding Prohibited	5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible?	nd did the organization	6a		Х
b	If 'Yes,' did the organization include with every solicitation an express statement that such c deductible?	ontributions or gifts were not	6b		
7	Organizations that may receive deductible contributions under section 170(c).		Ì		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and provided to the payor?	partly for goods and services	7a		X
Ŀ	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	ı	7b	Ĺ	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for w Form 8282?	hich it was required to file	7с		Х
	If 'Yes,' indicate the number of Forms 8282 filed during the year	7d			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiuli benefit contract?		7 e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal ber		_ 7f	ļ	X
	For all contributions of qualified intellectual property, did the organization file Form 8899 as		7 g	1	<u> </u>
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a For		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supports supporting organization, or a donor advised fund maintained by a sponsoring organization, holdings at any time during the year?	ng organization@id the nave excess business	8		-
9	Sponsoring organizations maintaining donor advised funds.				
	Did the organization make any taxable distributions under section 4966?		9 a		
	Did the organization make any distribution to a donor, donor advisor, or related person?		9 b		
	Section 501(c)(7) organizations.Enter:				
	Initiation fees and capital contributions included on Part VIII, line 12	10a			i i
	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			į
	Section 501(c)(12) organizations.Enter				
	Gross income from other members or shareholders	11a			,
ı	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	116			
12	Section 4947(a)(1) nonexempt charitable trusts. Is the organization filing Form 990 in lieu of	Form 1041?	12a	1	
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12Ь			

BAA

Form 990 (2009)

Section A. Governing Body and Management

Yes No_

Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions.

ıa	Little the number of voting members of the governing body	14		- 1	1							
b	Enter the number of voting members that are independent	1b		.]								
2	Did any officer, director, trustee, or key employee have a family relationship or a business reofficer, director, trustee or key employee?	elationship with any other	2		X							
3	Did the organization delegate control over management duties customarily performed by or of officers, directors or trustees, or key employees to a management company or other pers	under the direct supervision on?	3		X							
4	Did the organization make any significant changes to its organizational documents		4		X							
	since the prior Form 990 was filed?											
5 Did the organization become aware during the year of a material diversion of the organization's assets?												
6	Does the organization have members or stockholders?		6		_X							
7 a	7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?											
b	b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?											
8	8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:											
а	a The governing body?											
b	Each committee with authority to act on behalf of the governing body?		8ь		Х							
9	9 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O											
Sec	tion B. Policies (This Section B requests information about policies not	required by the Internal										
<u>Reve</u>	nue Code)											
				Yes	No_							
10a	Does the organization have local chapters, branches, or affiliates?		10a		X							
	If 'Yes,' does the organization have written policies and procedures governing the activities and branches to ensure their operations are consistent with those of the organization?		10ь									
	Has the organization provided a copy of this Form 990 to all members of its governing body		11	X								
11 <i>A</i>	Describe in Schedule O the process, if any, used by the organization to review this Form 99	O. See Schedule O										
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 to conflicts?	s that could give rise	12b									
С	Does the organization regularly and consistently monitor and enforce compliance with the positive $Schedule\ O\ how\ this$ is done	olicy7f 'Yes,' describe in	12c									
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	ļ							
15	Did the process for determining compensation of the following persons include a review and persons, comparability data, and contemporaneous substantiation of the deliberation and determined to the contemporaneous substantiation of the deliberation and determined to the contemporaneous substantiation of the deliberation and determined to the contemporare to the con	dapproval by independent ecision?										
а	The organization's CEO, Executive Director, or top management official		15a	X								
b	Other officers of key employees of the organization		15b		X							
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)											
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar entity during the year?	r arrangement with a taxable	16a		Х							
b	If 'Yes,' has the organization adopted a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and taken steps to safeguar	n to evaluate its participation d the organization's exempt	16ь									
status with respect to such arrangements?												
Section C. Disclosures 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 Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available inspection. Indicate how you make these available. Check all that apply.												
	Own website											
	Describe in Schedule O whether (and if so, how) the organization makes its governing docu statements available to the public.	•	•		ancıal							
	State the name, physical address, and telephone number of the person who possesses the RHEA EVANS 504 W. 32ND TYLER TX 75702 903-593-9211	books and records of the org	anızat	ion:								
												

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. Report compensation for the calendar year ending with or within the organizations's tax year. 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 Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of 'key employees'

Check this box if the organization did not compensate any current officer, director, or trustee.

- 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.

(E) (A) (B) (c) (D) (F) Average Position (check all that apply) Name and Title Reportable compensation from Reportable compensation from Eshmated hours amount of other compensation per week Individual trustee or director Former Institutional ਮighest the organization (W-2/1099-MISC) related organizations (W-2/1099-MISC) nployee from the employee compensated organizations trustee PAUL GLIESER 0. Past President 0 Х 0 0 RANDY GROOMS 0 Treasurer Х 0 0 0. MISTY WAGES 0. Vice President 0 Х 0. 0 TROY THIBODEAUX President 0 X 0 0 0. BILL EVANS Vice President 0 X 0 0 0. JOHN DIXON Executive Direc 40 0 0 0. Х RON VICKERY CPO 40 X 0 0. 0.

Part VII Section A. Officers, Directors, Trus	tees, k	(еу	Em	plo	ye	es,	and	d Highest Con	npensated Er	nployees (cont)
(A)	(B)				c)			(D)	(E)	(F)
Name and Title	Average hours per week	악호		,				Reportable compensation from the organization	Reportable compensation fron related organization	Estimated amount of other compensation
		Individuat or director	titutio	Officer	y emi	Highest co	Former	(W-2/1099-MISC)	related organization (W-2/1099-MISC)	from the organization and related
		al trustee or	nstitutional trustee		employee	Highest compensa				organizations
		tee	ustee			ensate				
						ē				
1 b Total	1	<u> </u>	l	l	l	<u> </u>		0.		0. 0.
2 Total number of individuals (including but not limite	d to the	se li	stec	d ab	ove)) wh	o re			
from the organization 0										IV TNI-
3 Did the organization list anyformer officer, director on line 1a? If 'Yes,' complete Schedule J for such ii	or trust	ee, k	кеу	emp	loye	ee, o	or hig	ghest compensate	ed employee	Yes No
4 For any individual listed on line 1a, is the sum of rethe organization and related organizations greater to	portable	e coi	mpe 00?/	nsa f'Ye	tion	and comp	d oth	er compensation Schedule J for s	from uch	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
 Individual Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sci 	compens	satio	n fr	om :	any	unr	elate	ed organization fo	r services	4 X
Section B. Independent Contractors	nedule J	tor	suc	n pe	erso	n				5 X
Complete this table for your five highest compensal compensation from the organization	ted inde	pen	deni	t cor	ntra	ctor	s tha	at received more t	han \$100,000 of	
(A) Name and business addres	ss							(B Description	of Services	(C) Compensation
2 Total number of independent contractors (including \$100,000 in compensation from the organization)		lımı	ted	to t	nose	e lis	ted a	above) who receiv	ed more than	

1 21	t VIII Statement of Revenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
200	1a Federated campaigns 1a				
NA ST	b Membership dues 1b				
, S	c Fundraising events 1c				
A A	d Related organizations 1d				
SIS	e Government grants (contributions) 1 e				
PROGRAM SERVICE REVENUE CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1f 646,015.				
N O O	g Noncash contribus included in lns 1a-1f. \$ 29,230.				
용조	h Total. Add lines 1a-1f	646,015.			
MČE	Business Code		052 062		ļi
Ē	2a AFTER SCHOOL PROGRAM	853,863.	853,863.		
Ä.	b SPECIAL EVENTS REVENUE	165,081.	165,081.		
- M	c OTHER	4,119.	4,119.	-	
4 SE	d	-			
RA	e				
8	f All other program service revenue	1,023,063.			
-	g Total. Add lines 2a-21	1,023,003.		 -	
	3 Investment income (including dividends, interest and other similar amounts)	21,286.	21,286.		
	4 Income from investment of tax-exempt bond proceeds			*	
	5 Royalties			·.	
	(i) Real (ii) Personal				
	6a Gross Rents]			
	b Less rental expenses]			
	c Rental income or (loss).				
	d Net rental income or (loss)	•			
	7 a Gross amount from sales of (i) Secunties (ii) Other	_			
	assets other than inventory 34,494.				
	b Less cost or other basis				
	and sales expenses 29, 230.	-			'
	c Gain or (loss) 5,264.				
	d Net gain or (loss)	5,264.	5,264.		
NUE	8a Gross income from fundraising events (not including \$				
OTHER REVEN	of contributions reported on line 1c).				
R	See Part IV, line 18		:		
Ŧ	b Less direct expenses b				
_	c Net income or (loss) from fundraising events	•			
	9a Gross income from gaming activities. See Part IV, line 19				
	b Less direct expenses b			<u> </u>	
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances				
	b Less cost of goods sold b				
	c Net income or (loss) from sales of inventory	•			
	Miscellaneous Revenue Business Code	<u></u>			
	11a				
	b	<u> </u>	<u> </u>		<u> </u>
	c	ļ			
	d All other revenue				
	e Total. Add lines 11a-11d				ļ <u>-</u>
	12 Total revenue. See instructions	N 1 695 628	1.049.613.	l n	

Page 10

Part X 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).

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1			<u> </u>		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the 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	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	933,194.	671,900.	139,979.	121,315.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	137,432.	98,951.	17,866.	20,615.
10	Payroll taxes				
11	Fees for services (non-employees).				
ā	a Management				
	L egal			6 550	
	Accounting	6,550.		6,550.	<u> </u>
	d Lobbying				· · · · · · · · · · · · · · · · · · ·
	e Prof fundraising svcs. See Part IV, In 17		····		
	Investment management fees	1 775	1,775.		
7	3 Other	1,775.	1,775.		
13	Advertising and promotion Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	6,648.		6,648.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	167,990.	142,792.	25,198.	
23	Insurance Other expenses. Itemize expenses not				
24	covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
:	PELTIER SCHOLARSHIP EXPENSE	158,178.	158,178.		
	UTITILIES	57,589.	48,951.	8,638.	
	AFTER SCHOOL PROGRAM	45,191.	45,191.		
	SEE PROGRAM	39,614 <u>.</u>	39,614.		
	GOLF_TOURNAMENT	27,732.		<u> </u>	27,732.
	f All other expenses.	177,872.	96,923.	56,573.	24,376.
	Total functional expenses Add lines 1 through 24f	1,759,765.	1,304,275.	261,452.	194,038.
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				
BAA				1,, .	Form 990 (2009)

BAA

Form 990 (2009)

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form 990 (2009)

3b

BAA

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

Name o	f the organization					Employer	identificat	ion number				
BOYS	S AND GIRLS CLUBS OF EAST TEXAS, INC					75-25	41408	}				
Part	Reason for Public Charity Status (All organizations	must o	comple	te this	part.	See i	nstruct	ions				
The o	rganization is not a private foundation because it is (For lines 1 throu	ugh 11,	check o	nly one	box)							
1	A church, convention of churches or association of churches desc	ribed in	section	170(b)(I)(A)(i).							
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.	.)										
3	A hospital or cooperative hospital service organization described		n 170(b)	X1)(A) (ii	ı).							
4	A medical research organization operated in conjunction with a ho	ospital c	lescribe	d ır secti	on 170	(b)(1)(A)	(iii) Ente	er the hospital's				
	name, city, and state:	·										
5	An organization operated for the benefit of a college or university 170(bX1)(AXiv). (Complete Part II.)		•	•	J	nmental	unit des	scribed isection				
6 7	A federal, state, or local government or governmental unit describ An organization that normally receives a substantial part of its sultain section 170(b)(1)(A)(vi). (Complete Part II.)					t or from	the gen	neral public described				
8	A community trust described in section 170(b)(1)(A)(vi). (Complete	Part II.	.)									
9	An organization that normally receives: (1) more than 33·1/3 % of from activities related to its exempt functions— subject to certain investment income and unrelated business taxable income (less subject 30, 1975. See section 509(a)(2). (Complete Part III.)	exception :	ons, and 511 tax)	l (2) no from bu	more thusiness	ian 33-1. es acqui	/3 % of i	its support from gross				
10	An organization organized and operated exclusively to test for pu		-									
11	An organization organized and operated exclusively for the benef more publicly supported organizations described in section 509(a describes the type of supporting organization and complete lines	a)(1) or	section :	509(a)(2	ctions o 2) Se s i	of, or car ection 5 (ry out th 09(a)(3).	ne purposes of one or Check the box that				
	a ☐ Type I b ☐ Type III c ☐ Type III — Functionally integrated d ☐ Type III— Other											
е	By checking this box, I certify that the organization is not controll than foundation managers and other than one or more publicly su 509(a)(2)	ed direc	tly or in	directly zations	by one describe	or more ed in sec	disquali ction 509	fied persons other P(a)(1) or section				
f	If the organization received a written determination from the IRS check this box	that is a	Type I,	Type II	or Typ	e III sup	porting (organization,				
g	Since August 17, 2006, has the organization accepted any gift or	r contrib	ution fro	om any	of the f	ollowing	persons	2				
								Yes No				
	(i) a person who directly or indirectly controls, either alone or t below, the governing body of the supported organization?	together	with pe	rsons d	escribe	d ın (ıı) a	and (III)	11g (i)				
	(ii) a family member of a person described in (i) above?							11g (iı)				
	(iii) a 35% controlled entity of a person described in (i) or (ii) at	bove?						11g (ıiı)				
h	Provide the following information about the supported organization	ns.										
	(I) Name of Supported Organization Organization (II) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)	organizat (i) listed	s the ion in col in your erning ment?	(v) Did y the organ col your su	ızatıon in (I) of	(vi) I organizati (i) organiz U S	on in col	(vii) Amount of Support				
		Yes	No	Yes	No	Yes	No					
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				4 4 70 1 129 141	Herrican Care 1	1000	<u> </u>					
Total												

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

Sche	dule A (Form 990 or 990-EZ) 200	9 BOYS AND	GIRLS CLUB	S OF EAST T	EXAS, INC	75-2541408	
Par	Support Schedule for	•		-	b)(1)(A)(iv) an	d 170(b)(1)(A)(vi)
Co.	(Complete only if you check	ed the box on line	5, 7, or 8 of Par	t I.)			
	tion A. Public Support						
begıı	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants')	1,141,200.	1,304,259.	1,631,808.	751,300.	646,015.	5,474,582.
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						0.
4	Total. Add lines 1-through 3	1,141,200.	1,304,259.	1,631,808.	751,300.	646,015.	5,474,582.
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)						0.
	Public support. Subtract line 5 from line 4		!				5,474,582.
Sec	tion B. Total Support	1		1	·		
Cale begı	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	1,141,200.	1,304,259.	1,631,808.	751,300.	646,015.	5,474,582.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	14,065.	37,407.	23,881.	18,537.	26,550.	120,440.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) See Part IV			-7,004.			-7,004.
11	Total support. Add lines 7 through 10						5,588,018.
12	Gross receipts from related acti	vities, etc. (see in	structions)			12	0.
13	First five years. If the Form 990 organization, check this box and		ation's first, seco	nd, third, fourth,	or fifth tax year a	s a section 501(c)	(3)
	tion C. Computation of Pu					· · · · · · · · · · · · · · · · · · ·	
14 15	Public support percentage for 2 Public support percentage from			ne 11, column (f).		14 15	98.0 % 98.5 %
16	33-1/3 support test— 2009. If the and stop here. The organization	e organization did i qualifies as a pul	not check the bo	ox on line 13, and organization.	the line 14 is 33	-1/3 % or more, cl	neck this box ► X
ŀ	33-1/3 support test – 2008. If the and stop here. The organization	e organization did i qualifies as a pul	not check a box blicly supported o	on line 13, or 16a organization	a, and line 15 is 3	3-1/3% or more, o	heck this box
17a	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'fact	meets the 'facts-	and-circumstance	es' test, check this	s box andst op her e	e.Explain in Part	IV how
	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-ar	neets the 'facts- nd-circumstances'	and-circumstance test. The organ	es' test, check this lization qualifies a	s box and stop her is a publicly suppo	e. Explain in Part orted organization	IV how the . □
_18	Private foundation. If the organ	ization did not che	eck a box on line,	13, 16a, 16b, 17a			
BAA	ı				S	chedule A (Form	990 or 990·EZ) 2009

Page 3

Schedule A (Form 990 or 990-EZ) 2009

BOYS AND GIRLS CLUBS OF EAST TEXAS, INC

Partill Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal yr beginning in) (a) 2005 (c) 2007 (d) 2008 (e) 2009 (f) Total **(b)** 2006 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.'). Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1. 2, 3 received from disqualified nersons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6) Section B. Total Support (c) 2007 (d) 2008 (e) 2009 (f) Total Calendar year(or fiscal yr beginning in) (a) 2005 **(b)** 2006 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 infine 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 13 Total support. (add ins 9, 10c, 11, and 12) 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 % 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 16 Public support percentage from 2008 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage % 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 18 Investment income percentage from 2008 Schedule A, Part III, line 17 18 % 19a 33-1/3 support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33-1/3 support tests - 2008. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box andstop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A	(Form	990 or	990-	EZ) 2	2009	BO	YS	AND	GI	RLS	CL	UBS	OF	EAS	T_'	TEXAS,	INC	75	-254	1408	3	Page 4
Schedule A	Supp Part	leme	ntal 17:	Info	rmat	ion. and	Co	mple	ete t	his i	part Pr	to p	rovi le ar	de th	ie e	explanat addition	ions r	equire	ed by	Part See in	II, line	: 10; ions.
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2009	Schedule	A, Part I	V - Supple	emental Inf	ormation	Page 5
Client 09201	ВО	S AND GIRL	S CLUBS OF	EAST TEXAS, I	NC	75-2541408
10/02/10						07 57AM
Part II, Line 10 - Oth	er Income					
Nature and Sour	ce	2009	2008	2007	2006	2005
	Total 💲	0.	\$ 0.	\$ 0	. \$ 0.	\$ 0.
						:
						•
 						
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions

OMB No 1545-0047

Open to Public Inspection

ROI	S AND GIRLS CLUBS OF EAST TEX	AS, INC		75-2541408	
Par	to Organizations Maintaining Dono the organization answered 'Yes' t	r Advised Funds or Other Similar Fun o Form 990, Part IV, line 6.	nds or Acco	ounts Complete	e ıf
		(a) Donor advised funds	(b) F	unds and other acco	ounts
1	Total number at end of year				
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year				<u></u>
5	Did the organization inform all donors and dor funds are the organization's property, subject		onor advised	Yes	No No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private bene	the benefit of the donor or donor advisor or for	ds may be any other	Yes	No
Par	tile Conservation Easements Compl	ete if the organization answered 'Yes'	to Form 99	30, Part IV, line	7.
1	Purpose(s) of conservation easements held by	y the organization (check all that apply).			
	Preservation of land for public use (e.g., r	recreation or pleasure) Preservation	of an historic	ally important land a	area
	Protection of natural habitat	Preservation	of certified hi	storic structure	
	Preservation of open space				
2	Complete lines 2a through 2d if the organizations to day of the tax year.	on held a qualified conservation contribution in		a conservation ease	ment on the
				Held at the End of	f the Year
a	Total number of conservation easements		2a		
ŀ	Total acreage restricted by conservation ease	ments	2b		
	Number of conservation easements on a certi		2c		
	Number of conservation easements included in		2d		
3	Number of conservation easements modified,	transferred, released, extinguished, or termina	ated by the or	ganization during th	ie tax
4	year ►Number of states where property subject to co	onservation easement is located►			
5	Does the organization have a written policy reand enforcement of the conservation easeme	egarding the periodic monitoring, inspection, hant it holds?	andling of viol	lations, Yes	No No
6	Staff and volunteer hours devoted to monitori during the year •	ng, inspecting, and enforcing conservation eas	sements _		
7	Amount of expenses incurred in monitoring, in during the year ►	nspecting, and enforcing conservation easeme	nts \$_		
8	Does each conservation easement reported o 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of s	ection	Yes	☐ No
9	In Part XIV, describe how the organization re include, if applicable, the text of the footnote conservation easements.	ports conservation easements in its revenue ar to the organization's financial statements that	nd expense st describes the	tatement, and balan organization's acco	nce sheet, and ounting for
Pa	till Organizations Maintaining Colle	ections of Art, Historical Treasures, o	r Other Sin	nilar Assets	
	Complete if the organization ans	swered 'Yes' to Form 990, Part IV, line	8.		
1 a	a If the organization elected, as permitted unde treasures, or other similar assets held for put the text of the footnote to its financial statem	olic exhibition, education, or research in further	ment and bala ance of publi	ince sheet works of c service, provide, ii	art, historical n Part XIV,
l	b If the organization elected, as permitted unde treasures, or other similar assets held for put amounts relating to these items	er SFAS 116, to report in its revenue statement olic exhibition, education, or research in further	t and balance rance of publi	c service, provide th	ne following
	(i) Revenues included in Form 990, Part VIII	, line 1		► \$	
	(ii) Assets included in Form 990, Part X			> \$	
2	If the organization received or held works of amounts required to be reported under SFAS	art, historical treasures, or other similar assets 116 relating to these items:	for financial	gain, provide the fol	llowing
i	a Revenues included in Form 990, Part VIII, lin	e 1		► \$	
1	b Assets included in Form 990, Part X			* \$	

Schedule D (Form 990) 2009 BOYS				75-2541	
Part III Organizations Maintai	ning Collection	ns of Art, Histo	rical Treasures, o	r Other Similar Asse	ets (continued)
3 Using the organization's acquisiti items (check all that apply):	on accession and o	other records, chec	k any of the following	that are a significant use	of its collection
a Public exhibition		d Loan o	r exchange programs		
b Scholarly research		e Other	·		
c Preservation for future gener	ations				
4 Provide a description of the organ Part XIV.	nization's collection	ns and explain how	they further the organ	nızatıon's exempt purpos	e in
5 During the year, did the organiza assets to be sold to raise funds r	tion solicit or recei ather than to be m	ve donations of art aintained as part o	, historical treasures, of the organization's co	or other similar ollection?	Yes No
Part W Escrow and Custodia 9, or reported an amo	Arrangements	Complete if o	rganization answe	ered 'Yes' to Form 9	30, Part IV, line
1a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian, or	other intermediary	for contributions or ot	her assets not	Yes No
b If 'Yes,' explain the arrangement	in Part XIV and co	mplete the follows	ng table:		
					Amount
c Beginning balance				1c	
d Additions during the year				1d	
e Distributions during the year				1 e	
f Ending balance				1f	
2a Did the organization include an a		0, Part X, line 21?		Į	Yes No
b If 'Yes,' explain the arrangement				00 D 10/1 10	
Parit V Endowment Funds Co					T 7.5
	(a) Current year	(b) Prior year	(c) Two years ba	ck (d) Three years back	(e) Four years back
1 a Beginning of year balance	ļ				
b Contributions					
c Net Investment earnings, gains, and losses					
d Grants or scholarships					
 Other expenditures for facilities and programs 					
f Administrative expenses					
g End of year balance					
2 Provide the estimated percentag	e of the year end t	alance held as:			
a Board designated or quasi-endov	wment ►	<u> </u>			
b Permanent endowment ►	8				
c Term endowment ►	8				
3a Are there endowment funds not	in the possession i	of the organization	that are held and adm	ninistered for the	
organization by:	Trato possosion	or are organization.			Yes No
(i) unrelated organizations					3a(i)
(ii) related organizations					3a(ii)
b If 'Yes' to 3a(II), are the related	organizations listed	d as required on So	chedule R?		3b
4 Describe in Part XIV the intende					
Parit Ⅶ Investments—Land, E				1 '	
Description of investmen	t (a) C	cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book Value
1 a Land			98,900.		98,900.
b Buildings			2,570,663.	422,625.	2,148,038.
c Leasehold improvements					
d Equipment			146,316.	54,294.	92,022.
e Other			223,904.	144,949.	78,955.
Total. Add lines 1a through 1e (Colum	n (d) must equal F	orm 990, Part X, c	olumn (B), line 10(c))	•	<u>2,417,915.</u>
BAA				Sche	dule D (Form 990) 2009

Part VII	Investments-Other Securities See	Form 990, Part X, line	e 12. N/A	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuate Cost or end-of-year mark	ion (et value
Financial	derivatives			
Closely-he	eld equity interests			
Other				
Total (Colu	mn (b) must equal Form 990 Part X, col (B) line 12.)		- Handle	
	I Investments-Program Related (See	Form 990, Part X, III	ne 13) N/A	
<u> </u>	(a) Description of investment type	(b) Book value	(c) Method of valuation	tion
		(0)	Cost or end-of-year mark	ket value
Total (Colui	mn (b) must equal Form 990, Part X, Col. (B) line 13)			
Part IX	Other Assets (See Form 990, Part X	, line 15) N/A		
	(a) D	escription		(b) Book value
	olumn (b) must equal Form 990, Part X, col (B),		>	
Part X	Other Liabilities (See Form 990, Par	t X, line 25)		
	(a) Description of Liability	(b) Amount		
Federal In	icome Taxes			
			-],	
				
Total (Colu	mn (b) must equal Form 990, Part X, col. (B) line 25)		-	
	Footpote In Part XIV provide the text of the fo	atnote to the ergonization	's financial statements that were stalled	- 1 1 1 1 1

Schedule D (Form 990) 2009 BOYS AND GIRLS CLUBS OF EAST TEXAS, INC

75-2541408

Page 3

^{2.} FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Sche	dule D (Form 990) 2009 BOYS AND GIRLS CLUBS OF EAST TEXAS,	IN	C	75-2541	.408	Page 4
	Reconciliation of Change in Net Assets from Form 990 to F					
	Total revenue (Form 990, Part VIII,column (A), line 12)				1,69	5,628.
2	Total expenses (Form 990, Part IX, column (A), line 25)				1,75	9,765.
3	Excess or (deficit) for the year Subtract line 2 from line 1					4,137.
4	Net unrealized gains (losses) on investments					
5	Donated services and use of facilities					
6	Investment expenses					
7	Prior period adjustments					,==
8	Other (Describe in Part XIV)					
9	Total adjustments (net) Add lines 4 through 8					-
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3	and 9	9		-6	4,137.
	Reconciliation of Revenue per Audited Financial Statement			Return		
	Total revenue, gains, and other support per audited financial statements			1	1,69	5,628.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
	Net unrealized gains on investments.	2a				
	Donated services and use of facilities	2b				
	Recoveries of prior year grants	2c	-			
	Other (Describe in Part XIV)	2d				
	Add lines 2a through 2d			2e		
	Subtract line 2e from line 1			3	1.69	5,628.
4	Amounts included on Form 990, Part VIII, line 12, but not on line1:					-,
٠,	Investments expenses not included on Form 990, Part VIII, line 7b	4a				
	Other (Describe in Part XIV)	4b				
	Add lines 4a and 4b			4c		
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	1.69	5,628.
	Reconciliation of Expenses per Audited Financial Statements	With	Expenses per R		1,05	0,0201
1	Total expenses and losses per audited financial statements	••••	Expenses per n	1	1.75	9,765.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					7377001
	Donated services and use of facilities	2a	l			
	Prior year adjustments	2b				
	Other losses	2c				
		2d				
	Other (Describe in Part XIV)			2 e		
	e Add lines 2a through 2d Subtract line 2e from line 1			3	1 7	9,765.
ے 1			1			77, 100.
4	Amounts included on Form 990, Part IX, line 25, but not on line1:	4-				
	Investments expenses not included on Form 990, Part VIII, line 7b	4a 4b	 			
	Other (Describe in Part XIV)	40	<u> </u>	4c		
	: Add lines 4a and 4b			5	1 70	59,765.
	Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line 18.) Supplemental Information			131		,,,,,,,,,
						
lıne	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Pa 4, Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d a mation.	art III, and 4t	Also complete the	t IV, lines s part to pr	ovide any a	additional
					-	- -
						
				-		
				_ .		
BAA	TEEA3304L 02/02/10			Sched	tule D (Forn	n 990) 2009

Schedule D (Form 990) 2009 BOYS AND GIRLS CLUBS OF EAST Part XIV Supplemental Information (continued)	TEXAS,	INC	75-2541408	Page 5
Part XIV Supplemental Information (continued)				
				
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SCHEDULE M (Form 990)

Noncash Contributions

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

2000
2009
Ta Open To Public

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990.

BOIS AND GIRLS CLUBS OF EAST TEXAS, INC 75-2541408						
Par	竹製 Types of Property					
		(a)	(b)	(c)	(d)	
		Check if applicable	Number of Contributions	Revenues reported on Form 990, Part VIII, line 1g	Method of determining revenues	
1	Art-Works of art					
2	Art-Historical treasures					
3	Art-Fractional interests					
4	Books and publications					
5	Clothing and household goods					
6	Cars and other vehicles					
7	Boats and planes					
8	Intellectual property					
9	Securities-Publicly traded					
10	Securities-Closely held stock					
11	Securities-Partnership, LLC, or trust interests					
12	Securities-Miscellaneous					
13	Qualified conservation contribution– Historic structures					
14	Qualified conservation contribution-Other					
15	Real estate-Residential					
16	Real estate—Commercial					
17	Real estate-Other					
18	Collectibles					
19	Food inventory					
20	Drugs and medical supplies		···			
21	Taxidermy					
22	Historical artifacts					
23	Scientific specimens		<u> </u>			
24	Archeological artifacts					
25	Other ► (Supplies)		1	29,230.	FMV	
26	Other ► ()					
27	Other ► ()	ļ				
28	Other ► (_	<u> </u>			

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

b If 'Yes,' describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

- 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?
 - b If 'Yes,' describe in Part II.
- 33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
		12
30 a		Х
外 河	禁作の	
31		Х
32a		Х

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

Schedule M (Form 990) 2009

Schedule	M (Form 990) 2	2009 BOYS	AND GIRL	S CLUBS OF	EAST	TEXAS,	INC	75-2541408	Page 2
Pert II	Supplement and 33. Also	tal Informato complete	tion. Comp this part fo	lete this part r any additio	t to prov nal infor	ride the i	nformation	75-2541408 required by Part I, lines 30l	b, 32b,
					. 				
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SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

OMB No 1545-0047

2009

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
► Attach to Form 990.

Open to Public

Name of the organization	Employer identification number
BOYS AND GIRLS CLUBS OF EAST TEXAS, INC	75-2541408
Form 990, Part VI, Line 11 - Form 990 Review Process	
No review was or will be conducted.	
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Schedule 0 (Form 990) 2009	Page 2
Name of the organization	Employer identification number
BOYS AND GIRLS CLUBS OF EAST TEXAS, INC	75-2541408
	
	
	

Form **8868** (Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545 1709

If you are	filing for an Automatic 3-Month f	xtension, complete only Part I and check this box	► X					
	If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).							
	Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.							
Part I A	Automatic 3-Month Extens	ion of Time. Only submit original (no copi	es needed).					
•	•	equesting an automatic 6-month extension - check t	, , ,					
All other corp income tax re		partnerships, REMICS, and trusts must use Form 70	04 to request an extension of time to file					
returns noted the additional Form 990-T. I	below (6 months for a corporatio	ectronically file Form 8868 if you want a 3-month auto n required to file Form 990-T). However, you cannot to on or (2) you file Forms 990-BL, 6069, or 8870, group completed and signed page 2 (Part II) of Form 8868 file for Charities & Nonprofits.	ile Form 8868 electronically if (1) you want returns, or a composite or consolidated					
	Name of Exempt Organization		Employer identification number					
Type or								
print	BOYS AND GIRLS CLUBS	OF EAST TEXAS, INC	75-2541408					
File by the due date for	Number, street, and room or suite number	If a P O box, see instructions						
filing your return See	504 W. 32ND							
instructions	City, town or post office, state, and ZIP co	de For a foreign address, see instructions						
	TYLER, TX 75702							
Check type of	f return to be filed (file a separate	application for each return):						
X Form 990		Form 990-T (corporation)	Form 4720					
Form 990	l-BL	Form 990-T (section 401(a) or 408(a) trust)	Form 5227					
Form 990	<u> </u>	Form 990-T (trust other than above)	Form 6069					
Form 990	-PF	Form 1041-A	Form 8870					
Telephone If the orga If this is for check this the exten	or a Group Return, enter the organs box $ ightharpoonup \Box$. If it is for part of the sion will cover	FAX No. ► or place of business in the United States, check this inization's four digit Group Exemption Number (GEN) ne group, check this box ► and attach a list with	If this is for the whole group, hithe names and EINs of all members					
-	-	s for a corporation required to file Form 990-T) exten						
	8/15 , 20 _10 _ , to file ension is for the organization's re	the exempt organization return for the organization return for	amed above.					
	calendar year 20 09 or							
▶ 🖺	tax year heginging	, 20, and ending, 20						
2 If this ta	ax year is for less than 12 months	, check reason: Initial return Final re	turn Change in accounting period					
	pplication is for Form 990-BL, 990 indable credits. See instructions	0-PF, 990-T, 4720, or 6069, enter the tentative tax, le	ss any 3a \$ 0.					
b If this a made. I	pplication is for Form 990-PF or sinclude any prior year overpayme	990-T, enter any refundable credits and estimated tax nt allowed as a credit	payments . 3b\$ 0.					
c Balance deposit See ins	e Due. Subtract line 3b from line 3 with FTD coupon or, if required, tructions	Ba. Include your payment with this form, or, if require by using EFTPS (Electronic Federal Tax Payment Sy	d, stem). 3c \$ 0.					
Caution. If yo payment insti		c fund withdrawal with this Form 8868, see Form 845	3-EO and Form 8879-EO for					
BAA For Pri	vacy Act and Paperwork Reduction	on Act Notice, see instructions.	Form 8868 (Rev. 4-2009)					

Form 8868	(Rev 4-2009)		Page 2
• If you a	re filing for an Additional (Not Automatic) 3-Month Extension, complete only F	Part II and check this box	► X
Note. Only	complete Part II if you have already been granted an automatic 3-month exten	ision on a previously filed Fo	orm 8868.
• If you a	re filing for an Automatic 3-Month Extension, complete only Part I (on page 1)	·	
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only	file the original (no co	opies needed).
	Name of Exempt Organization	Employer	identification number
Type or			
print	BOYS AND GIRLS CLUBS OF EAST TEXAS, INC	75-25	541408
Eda bu tha	Number, street, and room or suite number. If a P.O. box, see instructions	For IRS u	se only
File by the extended due date for	Acker & Company	L	n
filing the return See	1614 Grande Blvd.	[
instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions		
	Tyler, TX 75703		
	of return to be filed (File a separate application for each return).		
X Form 9	├	Form 1041-A	Form 6069
Form 9	90-BL Form 990-T (section 401(a) or 408(a) trust)	Form 4720	Form 8870
Form 9		Form 5227	
	not complete Part II if you were not already granted an automatic 3-month exte	ension on a previously filed	Form 8868.
	oks are in care of ► RHEA_EVANS		
	one No. ► 903-593-9211 FAX No. ►		
	rganization does not have an office or place of business in the United States, o		▶ [
If this is	s for a Group Return, enter the organization's four digit Group Exemption Num		. If this is for the
whole grou	p, check this box $ ightharpoonup$. If it is for part of the group, check this box $ ightharpoonup$	and attach a list with the na	ames and EINs of all
	he extension is for.		
	lest an additional 3-month extension of time until $11/15$, 20 1	-	
	alendar year 2009 , or other tax year beginning $\frac{1}{200000}$, 20	, and ending	, 20
	tax year is for less than 12 months, check reason		nge in accounting period
7 State	in detail why you need the extension WAITING FOR AUDIT TO	BE COMPLETED.	
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentate fundable credits. See instructions	tive tax, less any	8a \$
paym	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable crients made. Include any prior year overpayment allowed as a credit and any ai	edits and estimated tax mount paid previously	
	Form 8868		8b \$
c Balar with i	ice Due. Subtract line 8b from line 8a. Include your payment with this form, or FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment S	, if required, deposit System). See instrs	8c \$
	Signature and Verificatio		
Under penaltie correct, and c	is of perjury, declare that I have examined this form, including accompanying schedules and statement complete, and that I am authorized to prepare this form	nts, and to the best of my knowledge	•
Signature -	Junai Clik Title - Wit		Date > 60.15-10

FIFZ0502L 03/11/09

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Form 8868 (Rev 4-2009)