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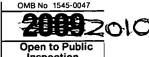


CHANGE OF ACCOUNTING PERIOD

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)



mer		of the Treasur nue Service	The organization may have to use a copy of this return to satisfy state	te reporting requirements	. Inspection							
_			endar year, or tax year beginning JAN 1, 2010 and ending									
B	Check if applicable	Please	C Name of organization	D Employer identifi	cation number							
_		use IRS	DADED GIME GLUD HOD DOVG HOUDDAMION INC	<u>, </u>								
느	Addre: chang Name	e print or	RAPID CITY CLUB FOR BOYS FOUNDATION, INC		015710							
느	chang	e '''	Doing Business As		015710							
F	ireturn	Connitio	Number and street (or P.O. box if mail is not delivered to street address) Room/su									
느	Termir ated Amend	Instruc-	BOX 907	(605	<u>) 343-3500</u> 213,160.							
느	return		City or town, state or country, and ZIP + 4	G Gross receipts \$								
	tion pendir	·	RAPID CITY, SD 57709	H(a) Is this a group re								
		FNan	ne and address of principal officer:SARA GENTRY	for affiliates?	Yes X No							
			E AS C ABOVE	H(b) Are all affiliates inc								
	Tax-ex	empt statu	us: X 501(c) (3) ◀ (insert no.)		list. (see instructions)							
			W.THECLUBFORBOYS.COM/SUPPORTTHECLUB/FOUR									
				ear of formation: 2002	A State of legal domicile: SD							
P	art I	Summ	ary mus of the	EOD BOYC FOI	NDATION IS							
9	1	Briefly de	scribe the organization's mission or most significant activities: THE CLUB	OIA GIUG AUT	MANACE AN							
ğ			-PROFIT ORGANIZATION WHOSE MISSION IS TO									
er	2		s box In the organization discontinued its operations or disposed of m	1	ssets.							
õ	3		f voting members of the governing body (Part VI, line 1a)	3	8							
ಷ	4		f independent voting members of the governing body (Part VI, line 1b)	4	1							
ties	5		ber of employees (Part V, line 2a)	5	1 0							
Ξ	6		ber of volunteers (estimate if necessary)	6	0.							
Ac	A NON-PROFIT ORGANIZATION WHOSE MISSION IS TO ENHANCE AND M Check this box If the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of employees (Part V, line 2a) Total number of volunteers (estimate if necessary) Total gross unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 C T Total Total Total State Income from Form 990-T, line 34 C T Total Total State Income from Form 990-T, line 34 C T Total Total State Income from Form 990-T, line 34 C T Total Total State Income from Form 990-T, line 34 C T Total Total State Income from Form 990-T, line 34 C T Total State											
	b	Net unrela	0.									
	1_			Prior Year 188,237.	Current Year 144,855.							
re	i i		ons and grants (Part VIII, line 1h)	100,237.	144,033.							
Revenue	1	•	service revenue (Part VIII, line 2g) JAN 1 8 2011	$\frac{1}{2}$ -12,178.	19,133.							
æ	10	Investme	nt income (Part VIII, column (A), lines 3, 4, and 7th)	Z 12,170.								
	111	Other rev	enue (Part VIII, column (A), lines 3, 4, and 7b)	176,059.	163,988.							
		101411010	nue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)									
			d applier amounts paid (Part IV, column (A), lines 1.3)	70.000.	79.000.							
			d similar amounts paid (Part IX, column (A), lines 1-3)	70,000.	79,000.							
	l	Benefits p	oald to or for members (Part IX, column (A), line 4)									
ses	l	Benefits p Salaries, o	oald to or for members (Part IX, column (A), line 4) other compensation, employee benefits (Part IX, column (A), lines 5-10)	78,006.	79,000.							
benses	l	Benefits p Salaries, o Professio	baid to or for members (Part IX, column (A), line 4) other compensation, employee benefits (Part IX, column (A), lines 5-10) nal fundraising fees (Part IX, column (A), line 11e)									
Expenses	15 16a b	Benefits p Salaries, o Professio Total fund	baid to or for members (Part IX, column (A), line 4) other compensation, employee benefits (Part IX, column (A), lines 5-10) nal fundraising fees (Part IX, column (A), line 11e) Iraising expenses (Part IX, column (D), line 25)	78,006. 33,788.	32,470.							
Expenses	15 16a b 17	Benefits p Salaries, o Professio Total fund Other exp	paid to or for members (Part IX, column (A), line 4) other compensation, employee benefits (Part IX, column (A), lines 5-10) nal fundraising fees (Part IX, column (A), line 11e) Iraising expenses (Part IX, column (D), line 25) enses (Part IX, column (A), lines 11a-11d, 11f-24f)	78,006. 33,788. 49,915.	32,470.							
Expenses	15 16a b 17 18	Benefits p Salaries, o Professio Total fund Other exp Total expe	baid to or for members (Part IX, column (A), line 4) other compensation, employee benefits (Part IX, column (A), lines 5-10) and fundraising fees (Part IX, column (A), line 11e) draising expenses (Part IX, column (D), line 25) enses (Part IX, column (A), lines 11a-11d, 11f-24f) enses. Add lines 13-17 (must equal Part IX, column (A), line 25)	78,006. 33,788. 49,915. 231,709.	32,470. 22,180. 133,650.							
	15 16a b 17 18 19	Benefits p Salaries, o Professio Total fund Other exp Total expe	paid to or for members (Part IX, column (A), line 4) other compensation, employee benefits (Part IX, column (A), lines 5-10) nal fundraising fees (Part IX, column (A), line 11e) Iraising expenses (Part IX, column (D), line 25) enses (Part IX, column (A), lines 11a-11d, 11f-24f)	78,006. 33,788. 49,915.	32,470.							
	15 16a b 17 18 19	Benefits p Salaries, o Professio Total fund Other exp Total expe Revenue	baid to or for members (Part IX, column (A), line 4) other compensation, employee benefits (Part IX, column (A), lines 5-10) anal fundraising fees (Part IX, column (A), line 11e) draising expenses (Part IX, column (D), line 25) enses (Part IX, column (A), lines 11a-11d, 11f-24f) enses. Add lines 13-17 (must equal Part IX, column (A), line 25) less expenses Subtract line 18 from line 12	78,006. 33,788. 49,915. 231,709. -55,650.	22,180. 133,650. 30,338.							
	15 16a b 17 18 19	Benefits p Salaries, o Professio Total fund Other exp Total exp Revenue	paid to or for members (Part IX, column (A), line 4) other compensation, employee benefits (Part IX, column (A), lines 5-10) and fundraising fees (Part IX, column (A), line 11e) draising expenses (Part IX, column (D), line 25) enses (Part IX, column (A), lines 11a-11d, 11f-24f) enses. Add lines 13-17 (must equal Part IX, column (A), line 25) less expenses Subtract line 18 from line 12 ets (Part X, line 16)	78,006. 33,788. 49,915. 231,70955,650. Beginning of Current Year	32,470. 22,180. 133,650. 30,338. End of Year							
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Net Assets or Fund Balances	15 16a b 17 18 19	Benefits p Salaries, o Professio Total fund Other exp Total exp Revenue Total asso Total liabi Net asset	paid to or for members (Part IX, column (A), line 4) other compensation, employee benefits (Part IX, column (A), lines 5-10) and fundraising fees (Part IX, column (A), line 11e) draising expenses (Part IX, column (D), line 25) enses (Part IX, column (A), lines 11a-11d, 11f-24f) enses. Add lines 13-17 (must equal Part IX, column (A), line 25) less expenses Subtract line 18 from line 12 ets (Part X, line 16)	78,006. 33,788. 49,915. 231,70955,650. Beginning of Current Year 2,975,543. 1,465.	32,470. 22,180. 133,650. 30,338. End of Year 2,978,790. 3,569.							
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S Net Assets or Self-und Balances	15 16a b 17 18 19 20 21 22 art II	Benefits p Salaries, Professio Total func Other exp Total expe Revenue Total assis Total liabi Net asset Signa Under pena and comple	paid to or for members (Part IX, column (A), line 4) other compensation, employee benefits (Part IX, column (A), lines 5-10) and fundraising fees (Part IX, column (A), line 11e) draising expenses (Part IX, column (D), line 25) denses (Part IX, column (A), lines 11a-11d, 11f-24f) denses. Add lines 13-17 (must equal Part IX, column (A), line 25) dess expenses Subtract line 18 from line 12 dets (Part X, line 16) dities (Part X, line 26) s or fund balances Subtract line 21 from line 20 ture Block litles of peygy, I declare that I have examined this return, including accompanying schedules and statement to Declaristion of prepare (other than officer) is based on all information of which preparer has any knowled little of officer RA GENTRY, EXECUTIVE DIRECTOR et or print name and title	78,006. 33,788. 49,915. 231,70955,650. Beginning of Current Year 2,975,543. 1,465. 2,974,078.	32,470. 22,180. 133,650. 30,338. End of Year 2,978,790. 3,569. 2,975,221.							
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Her Ssets or See See See See See See See See See Se	15 16a b 17 18 19 20 21 22 art II	Benefits p Salaries, o Professio Total func Other exp Total expense Total liabi Net asset Signa Under pena and comple Sigr Preparer's signature	paid to or for members (Part IX, column (A), line 4) pother compensation, employee benefits (Part IX, column (A), lines 5-10) pal fundraising fees (Part IX, column (A), line 11e) praising expenses (Part IX, column (D), line 25) presses (Part IX, column (A), lines 11a-11d, 11f-24f) presses. Add lines 13-17 (must equal Part IX, column (A), line 25) presses expenses Subtract line 18 from line 12 parts (Part X, line 16) part (Part X, line 26) part of pergry, I declare that I have examined this return, including accompanying schedules and statement the Declaration of prepare (other than officer) is based on all information of which preparer has any knowled adults of officer Part of pergry, EXECUTIVE DIRECTOR part of officer Part (A), line 4) part (A), line 4) part (A), line 25) part (A), line 26) part (A), line 26) part (A), line 27, line 28, line 29, line 2	78,006. 33,788. 49,915. 231,70955,650. Beginning of Current Year 2,975,543. 1,465. 2,974,078. Otheck if self-employed Check if self-employed	32,470. 22,180. 133,650. 30,338. End of Year 2,978,790. 3,569. 2,975,221. Ige and belief, it is true, correct,							
Net Assets or Sign Head	15 16a b 17 18 19 20 21 22 art II	Benefits p Salaries, o Professio Total func Other exp Total expine Revenue Total asset Total liabi Net asset Signa Under pena and comple Sigr Preparer's signature	paid to or for members (Part IX, column (A), line 4) pother compensation, employee benefits (Part IX, column (A), lines 5-10) pal fundraising fees (Part IX, column (A), line 11e) praising expenses (Part IX, column (D), line 25) presses (Part IX, column (A), lines 11a-11d, 11f-24f) penses. Add lines 13-17 (must equal Part IX, column (A), line 25) perses expenses Subtract line 18 from line 12 pets (Part X, line 16) petities (Part X, line 26) person for pengry, (other than officer) is based on all information of which preparer has any knowled that the officer person CASEY PETERSON & ASSOC ASSOC	78,006. 33,788. 49,915. 231,70955,650. Beginning of Current Year 2,975,543. 1,465. 2,974,078. Otheck if self-employed Check if self-employed	32,470. 22,180. 133,650. 30,338. End of Year 2,978,790. 3,569. 2,975,221.							
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

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

X Yes No Form **990** (2009)

Form 990 (2009)

Form 990 (2009) RAPID CITY C
Part IV Checklist of Required Schedules

			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)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	N/	A
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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<u> </u>
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		X
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "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 25? If "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 487 If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			i
	Schedule D, Parts XI, XII, and XIII.	12	-	X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			3 -
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			v
	located outside the United States? If "Yes," complete Schedule F, Part III	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			х
46	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	10		Х
10	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	\vdash	
19	complete Schedule G, Part III	19		x
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
<u></u>	Side the digentification operation of their heaptrains in the complete desired.	_	990 a	2009)

Form 990 (2009) RAPID CITY CLUB FOR Part IV Checklist of Required Schedules (continued)

			Yes	No
21	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	х	
22	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
23	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			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		1	
	Schedule K If "No", go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
	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		X
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-EZ? If "Yes," complete	056		x
•	Schedule L, Part I	25b	-	A
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, substantial	20		
21	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
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	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			.,
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			х
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	-	<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	-3-		_
33	If "Yes," complete Schedule R, Part V, line 2	35		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization?	"		
-	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		<u> </u>	<u> </u>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O.	38	X	L
		Form	990 (2009)

Form 990 (2009) RAPID CITY CLUB FOR BOYS FOUNDATION, INC
Part V Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c_	X	
2 a	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			j
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by 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	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
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 Foreign Bank and			İ
	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 transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c_		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			77
	any contributions that were not tax deductible?	6a		X
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b_		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services	_		v
	provided to the payor?	7a		<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.		Х
	to file Form 8282?	7с_		
	If "Yes," indicate the number of Forms 8282 filed during the year			
ө	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	 7е		X
4	benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	Х	
9 h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	X	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the			
•	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings			
	at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		·	
а	Did the organization make any taxable distributions under section 4966? N/A	9a		1
b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			,
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			!
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders N/A 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			 }
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
		Form	990 ((2009)

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

Sec	tion A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body			,							
	Enter the number of voting members that are independent	!		'							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other										
	officer, director, trustee, or key employee?	2	_	X							
3	Did the organization delegate control over management duties customanly performed by or under the direct supervision										
	of officers, directors or trustees, or key employees to a management company or other person?	3		Х							
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X							
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X							
6	Does the organization have members or stockholders?	6		X							
7a	ses the organization have members, stockholders, or other persons who may elect one or more members of the										
	governing body?	7a		X							
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			İ							
	by the following										
а	The governing body?	8a	Х								
b	Each committee with authority to act on behalf of the governing body?	8b	X								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the										
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9_		<u> </u>							
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)										
			Yes	No							
	Does the organization have local chapters, branches, or affiliates?	10a		X							
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,										
	and branches to ensure their operations are consistent with those of the organization?	10b	72								
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X	<u> </u>							
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			J							
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X								
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise		х								
	to conflicts?	12b	Λ								
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40-	х								
40	in Schedule O how this is done	12c	X								
13	Does the organization have a written whistleblower policy?	13 14		X							
14	Does the organization have a written document retention and destruction policy?	14									
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?										
_	The organization's CEO, Executive Director, or top management official	15a	X	نــــن							
a	Other officers or key employees of the organization	15b		X							
þ	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			 -							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a										
	taxable entity during the year?	16a		_X_,							
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation										
_	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's										
	exempt status with respect to such arrangements?	16b	1								
Sec	tion C. Disclosure										
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	for									
	public inspection. Indicate how you make these available. Check all that apply.										
	Own website Another's website X Upon request										
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, are	id fina	ncial								
	statements available to the public.										
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who person of the person of the person who person of the pe	ion: 🕨	·								
	SARA GENTRY, EXECUTIVE DIRECTOR - 605-343-3500										
	320 N 4TH STREET, RAPID CITY, SD 57701										

Form 990 (2009)

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

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax vear. 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 employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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 organization did not co	(C)						(D)	(E)	(F)	
Name and Title	(B) Average		Position (check all that apply)					Reportable	Reportable	Estimated
Name and This	hours	(cl						compensation	compensation	amount of
	per	H	T - T - T				Ė	from	from related	other
:	week	Individual trustee or director	İ			_		the	organizations	compensation
		ee 04	stee			nsate		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
		T S	la tr		oyee	e a		(VV-2/1099-WISC)		organization and related
		Mgra	Institutional trustee	Officer	Key employee	Highest compensated employee	朣			organizations
		3	ISE	ਙਿੰ	ξ	돌	چَ			
DR H LEE AHRLIN									_	
DIRECTOR	1.20	X	<u> </u>				$ldsymbol{ld}}}}}}$	0.	0.	0.
ROGER JOHNSEN	4 00	l	l		ı				_	
DIRECTOR	1.20	X	<u> </u>	Щ	<u> </u>		ļ	0.	0.	0.
CRAIG TIESZEN	1 00		İ						_	0
DIRECTOR	1.20	X	_		<u> </u>	 	 	0.	0.	0.
CONSTANCE NELSON LANE	1.20	x				İ		0.	0.	0.
VICE-PRESIDENT CHRIS SCHMID	1.20	_	<u> </u>		\vdash		-	0.	0.	0.
PRESIDENT	1.20	x						0.	0.	0.
JOE DOBBS	1.20	^	-	┢┈	┝	-	\vdash		0.	•
TREASURER	1.20	x	1				İ	0.	0.	0.
PAT TLUSTOS	1.20		\vdash		\vdash	<u> </u>	 			
DIRECTOR	1.20	х			ļ			0.	0.	0.
RODNEY MEADOR										•
SECRETARY	1.20	X						0.	0.	0.
SARA GENTRY										_
EXECUTIVE DIRECTOR	40.00	L		Х		L	L	61,532.	0.	0.
					<u> </u>	ļ	<u> </u>			
		-			L	-	-			
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Par	VII Section A. Officers, Directors, Tru	ıstees, Key Er	nplo	yee	s, a	nd l	High	est	Compensated Employ	ees (continued)				
	(A)	(B)	(C)						(D)	(E)			(F)	
	Name and title	Average	١,,		Pos			L A	Reportable	Reportable	- 1		timate	
		hours per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee	Ť	compensation from the organization (W-2/1099-MISC)	compensation from related organization (W-2/1099-MIS	t sı	com fro	nount of other pensar om the anization of the anization o	tion e on ed
											\neg			
		-				\vdash					_			
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1b	Total						<u> </u>		61,532.		0.			0.
2	Total number of individuals (including but n	ot limited to th	ose	liste	d al	DOV	e) wł	no re	eceived more than \$100	,000 in reportab	e			C
	compensation from the organization							•					Yes	No
3	Did the organization list any former officer,		stee	, ke	y em	plo	yee,	or h	nighest compensated er	nployee on				x
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su		le co	omp	ensa	ation	n and	d otl	her compensation from	the organization	}	3		
	and related organizations greater than \$150										-	4		X
5	Did any person listed on line 1a receive or a the organization? If "Yes," complete Sched				rom	any	/ unr	elat	ted organization for serv	ices rendered to		 5		X
Sect	ion B. Independent Contractors													
1	Complete this table for your five highest co the organization NONE	mpensated inc	depe	ende	nt c	onti	racto	ors t	that received more than	\$100,000 of con	npensa	ation f	rom	
	(A) Name and business	addraga							(B) Description of s	ion/ion		(C	;) nsation	
	Name and business	address						\dashv	Description of s	lei vices		ompei	1541101	1
								-						
								_						
				·										
		·-						7						
	Total number of independent contractors (i	ncluding but n	ot lu	mıte	d to	tho	se lis	stec	d above) who received m	nore than				
	\$100,000 in compensation from the organization						0							

				UB FOR B	OYS FOUNDA	TION, INC	75-3015	710 Page 9
Pa	rt VII	Statement of Rever	nue		,			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1 a	Federated campaigns	1a					
ga		Membership dues	1b					
and the	С	Fundraising events	1c					
ig'i	d	Related organizations	1d					
sim		Government grants (contribut						
iğ je	Ť	All other contributions, gifts, gran similar amounts not included abo		144,855.				
풀티	~	Noncash contributions included in lines		144,033.		:		
Contributions, gifts, grants and other similar amounts	•	Total. Add lines 1a-1f			144,855.			
\neg				Business Code				
, e	2 a							
ه چَ	b							
Program Service Revenue	C							
e a	d							
<u>6</u>	е							
۱ ۳		All other program service reve	enue					
\dashv		Total. Add lines 2a-2f		•	-			
I	3	Investment income (including other similar amounts)	aiviaenas, intere	est, and	8,758.			8,758.
	4	Income from investment of ta	v.evemnt hand r	proceeds	0,7300			<u> </u>
	5	Royalties	x-exempt bond p	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	Ū	Hoyanos	(i) Real	(II) Personal	-			
	6 a	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) Securities	(ii) Other				
		assets other than inventory	59,547.					
ı	b	Less: cost or other basis	49,172.					
	_	and sales expenses	10,375.					
		Gain or (loss) Net gain or (loss)	10,3,3	'	10,375.	10,375.		
ا ؞		Gross income from fundraisin	a events (not					
ğ		including \$						
ě		contributions reported on line						:
- E		Part IV, line 18	а					
Other Revenue		Less: direct expenses	b	L				-
_		Net income or (loss) from fund		<u> </u>				
l	9 a	Gross income from gaming ac						
	L	Part IV, line 19	a					
		Less: direct expenses Net income or (loss) from gan	b nno activities	L			·	
		Gross sales of inventory, less	_		10 10 10 10 10 10 10 10 10 10 10 10 10 1			
		and allowances	а					
ļ	b	Less: cost of goods sold	b					
Į		Net income or (loss) from sale	s of inventory	>				
[Miscellaneous Revenu	ie	Business Code				
l	11 a							
ļ	b							
	C	All sales as a second						
	d	All other revenue Total. Add lines 11a-11d						
	12	Total revenue. See instructions.			163,988.	10,375.	0.	8,758.
93200 02-04								Form 990 (2009)

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

	All other organizations must comp	lete column (A) but are			
	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				
	organizations in the U.S. See Part IV, line 21	79,000.	79,000.		
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	30,484.		15,242.	15,242.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and			1	
	persons described in section 4958(c)(3)(B)		_		
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	1,986.		993.	993.
11	Fees for services (non-employees):				
а	Management				
b	Legal	1 716		4 742	
С	Accounting	1,716.		1,716.	
d	Lobbying		1		<u> </u>
е	Professional fundraising services. See Part IV, line 17	F 0.63		F 963	
f	Investment management fees	5,862.		5,862.	
g	Other	E 224			E 224
12	Advertising and promotion	5,334. 101.		101.	5,334.
13	Office expenses	101.		101.	
14	Information technology				
15	Royalties				
16	Occupancy	13.		13.	•
17	Travel	13.		13.	.
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20 21	Payments to affiliates				·
21 22	Depreciation, depletion, and amortization	,			
23	Insurance		· · · ·		
23 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.)	0 067		0 007	·
а	BAD DEBT	8,967.		8,967.	
b	MISCELLANEOUS	187.		187.	
C					J
d					
•	All 11				
f	All other expenses	133,650.	79,000.	33,081.	21,569.
25	Total functional expenses. Add lines 1 through 24f Joint costs. Check here ☐ If following	133,030.	73,000.	22,001.	41,303.
26	SOP 98-2. Complete this line only if the organization		1		
	reported in column (B) joint costs from a combined				
	reported in column (b) joint costs nom a combined				

Form 990 (2009)

	t X	Balance Sheet		(4)	- 1	(5)
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		485.	1	610
	2	Savings and temporary cash investments		230,360.	2	140,401
1	3	Pledges and grants receivable, net		1,422,584.	3_	1,523,526
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, di	rectors, trustees, key			
- 1		employees, and highest compensated employee				
١		of Schedule L	·		5	
1	6	Receivables from other disqualified persons (as	defined under section			
		4958(f)(1)) and persons described in section 495				
- 1		Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		9		
		Land, buildings, and equipment: cost or other	1 1			
		basis. Complete Part VI of Schedule D	10a			
	h	Less: accumulated depreciation	10b		10c	
	11	Investments - publicly traded securities	100	1,257,328.	11	1,250,813
ŀ	12	Investments - other securties. See Part IV, line 1		12		
	13	Investments - program-related. See Part IV, line			13	
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11		64,786.	15	63,440
	16	Total assets. Add lines 1 through 15 (must equal	al line 34)	2,975,543.	16	2,978,790
7	17	Accounts payable and accrued expenses		1,465.	17	3,569
	18	Grants payable		18		
	19	Deferred revenue		19		
1	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete I	Part IV of Schedule D		21	
	22	Payables to current and former officers, director				
		highest compensated employees, and disqualifi				
		of Schedule L			22	
	23	Secured mortgages and notes payable to unrela	ated third parties		23	
	24	Unsecured notes and loans payable to unrelate			24	
	25	Other liabilities. Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		1,465.	26	3,569
		Organizations that follow SFAS 117, check he	ere X and complete			
ı		lines 27 through 29, and lines 33 and 34.	•			
	27	Unrestricted net assets		1,523,875.	27	1,376,521
	28	Temporarily restricted net assets		1,450,203.	28	1,598,700
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117, c	heck here			
Į		complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	`31	Paid-in or capital surplus, or land, building, or ed			31	
- 1	32	Retained earnings, endowment, accumulated in	· ·		32	
	عو	moraniou carrings, endowincin, accomulated in	como, or other falles			0 005 001
	33	Total net assets or fund balances		2,974,078.	33	2,975,221

_			(2009) RAPID CITY CLUB FOR BOYS FOUNDATION, INC. 75-3015) / T O	Pag	ge 12
I	Par	t XI	Financial Statements and Reporting			
					Yes	No
	1	Acc	ounting method used to prepare the Form 990: Cash X Accrual Other			
		If the	e organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
	2a	Wer	re the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	b	Wer	re the organization's financial statements audited by an independent accountant?	2b		X
	C	If "Y	es" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
		revie	ew, or compilation of its financial statements and selection of an independent accountant?	2c		
		If the	e organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
	d	If "Y	'es" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
		cons	solidated basis, separate basis, or both			
			Separate basis Consolidated basis Both consolidated and separate basis			
	За	As a	a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
		Act a	and OMB Circular A-133?	3a		X
	b	If "Y	es," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
		or ai	udite, explain why in Schedule O and describe any steps taken to undergo such audits	3h		

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

RAPID CITY CLUB FOR BOYS FOUNDATION, INC 75-3

Employer identification number 75-3015710

Part I	Reason	for Public Char	i ty Status (All organiz	ations mu	st complet	e this part) See inst	ructions.		_	
he organi	zation is not a	private foundation l	because it is: (For lines 1	l through	11, check	only one b	ox)				
1 🗀		•	s, or association of churc	_							
2	•		0(b)(1)(A)(ii). (Attach Sci								
3 🗔			tal service organization of	· ·	ın section	170(b)(1)(Al(iii).				
4 🗔			pperated in conjunction					(b)(1)(A)(iii	i). Enter th	e hospital's n	ame.
· —	city, and state				F			- N - N - N -			ŕ
5 🔲			benefit of a college or ur	averety o	wheel or or	perated by	a governi	mental unit	describe	d in	
3 <u> </u>	-	(b)(1)(A)(iv). (Comple		iivorsity O	milea or of	oratou by	a govoiii	norna am	. 00001150		
• [- 470/h)/4	VAV.A				
<u>€</u>	•	. •	ent or governmental unit								
7 📖	•		eives a substantial part	of its supp	ort from a	governme	ntai unit o	r from the	general p	ublic describe	a in
	•	b)(1)(A)(vi). (Comple	•								
8	-		ection 170(b)(1)(A)(vi). (
9	•	•	eives: (1) more than 33 1								
			nctions - subject to certa								
	income and u	inrelated business ta	axable income (less sect	tion 511 ta	x) from bu	sinesses a	cquired b	y the orga	nization a	fter June 30, 1	1975.
	See section	509(a)(2). (Complete	Part III.)								
10 🖳	An organizati	on organized and op	erated exclusively to tes	st for publ	ıc safety. S	See sec tio	n 509(a)(4	l).			
11 X	An organizati	on organized and op	erated exclusively for th	ne benefit :	of, to perfo	orm the fur	nctions of,	or to carry	out the p	ourposes of or	ne or
	more publicly	supported organiza	itions described in section	on 509(a)(1) or section	on 509(a)(2). See sec	tion 509(a	a)(3). Che	ck the box tha	ıt
	describes the	type of supporting	organization and comple	ete lines 1	1e through	11h.					
	a X Type I	b] Type II c	: 📖 Тур	e III - Func	tionally int	egrated		d 📖	Type III - Othe	er
e X	By checking f	this box, I certify tha	t the organization is not	controlled	directly o	r indirectly	by one or	r more disc	qualified p	ersons other	than
	foundation m	anagers and other the	han one or more publicly	y supporte	d organiza	tions desc	cribed in s	ection 509	(a)(1) or s	ection 509(a)(2).
f		-	ten determination from t								
	supporting or	rganization, check th	is box								
g		-	rganization accepted ar	ny gift or c	ontribution	from any	of the follo	owing pers	ons?		
Ţ			rectly controls, either al							Ye	s No
			ipported organization?			•		`, `		11g(i)	X
			described in (i) above?							11g(ii)	Х
	•	•	person described in (i) of		97					11g(iii)	Х
h	• •	•	about the supported or							· · · · · · / ·	
"	r lovide the it	Ollowing information	about the supported of	garnzation	(3)						
(1) N		/// FIN	(iii) Type of	(iv) Is the c	rganization	(v) Did you	notify the	(vi) Is	the	(vill) Amoun	
	of supported	(ii) EIN	organization		sted in your			organizátio (i) organiz	in in col. I	(vii) Amour support	
Ulga	inization		(described on lines 1-9	governing	document?	(i) of your		U.S.	?	заррога	•
			above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No		
מדמגס	CITY		(
		46-0277778	1 1 A	x		х		х		79	000.
СПОВ	FOR BOT	20-02/1//0	110	<u> </u>							
				 	 			 	 		
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				1				i	j i	70	000
Total				<u></u>	<u></u>			<u> </u>	<u> </u>		000.

chedule A (Form 990 or 990-EZ) 2009 Part II Support Schedule fo	r Organization	s Described i	Sections 170)(b)(1)(A)(iv) an	d 170(b)(1)(A)(Page 2
(Complete only if you check	-			(2)(1)(0,0)(10) (211		,
ection A. Public Support			<u> </u>			
alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and			1			1.0
membership fees received. (Do not						
include any "unusual grants.")	j		1			
2 Tax revenues levied for the organ-						
ization'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						
4 Total. Add lines 1 through 3						
5 The portion of total contributions						
by each person (other than a						
governmental unit or publicly	1					
supported organization) included						
on line 1 that exceeds 2% of the						
amount shown on line 11,	1				ļ	
column (f)						
• • • • • • • • • • • • • • • • • • • •				· · · · · · · · · · · · · · · · · · ·		
Public support. Subtract line 5 from line a ection B. Total Support	<u>.</u>	.l	<u> </u>		<u> </u>	
alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	(4) 2000	(5) 2000	(0) 2007	(4) 2000	(0) 2000	(1) 10141
B Gross income from interest,		-				
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources						
			1			
	•					
activities, 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.)						
1 Total support. Add lines 7 through 10		<u> </u>		L	1	L
2 Gross receipts from related activitie	•	•			12	
3 First five years. If the Form 990 is to	=	's first, second, th	ird, fourth, or fifth t	ax year as a section	on 501(c)(3)	
organization, check this box and st ection C. Computation of Pul	op nere olic Support Po	ercentage				<u> </u>
Public support percentage for 2009	(line 6, column (f)	divided by line 11,	column (f))		14	
5 Public support percentage from 20	08 Schedule A, Par	t II, line 14			15	
6a 33 1/3% support test - 2009.If the	organization did ne	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and
stop here. The organization qualifie	s as a publicly sup	ported organizatio	n			▶∟
b 33 1/3% support test - 2008.If the	organization did ne	ot check a box on	line 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
and stop here. The organization qu	-					▶□
7a 10% -facts-and-circumstances te				13, 16a, or 16b,	and line 14 is 10%	or more,
and if the organization meets the "f						
meets the "facts-and-circumstance					3	▶□
b 10% -facts-and-circumstances to					17a, and line 15 is	10% or
more and if the organization meets						

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

Schedule A (Form 990 or 990-EZ) 2009 Page 3 Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (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 through 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 \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 13 Total support (Add lines 9, 10c, 11, and 12) 14 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 16 Public support percentage from 2008 Schedule A, Part III, line 15 % 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 18 Investment income percentage from 2008 Schedule A, Part III, line 17 % 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 line 19a, and line 16 is more than 33 1/3%, and

line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

2009
Open to Public Inspection

Employer identification number

Name of the organization

RAPID CITY CLUB FOR BOYS FOUNDATION, INC 75-3015710

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
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		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's	-	Yes No
6	Did the organization inform all grantees, donors, and donor a	-	used only
	for charitable purposes and not for the benefit of the donor		
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or public use)	pleasure) Preservation of an hi	storically important land area
	Protection of natural habitat		tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
	•		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06	2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	e organization during the tax
	year >		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements in	it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements of	during the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during	g the year > \$
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 170	D(h)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	the organization's accounting for
	conservation easements.		
Par			Other Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116, no	•	•
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pu	iblic 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 balar	nce sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, of	or research in furtherance of public servic	e, 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		► \$ ► \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under SFAS 1	16 relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		► \$ ► \$

	dule D (Form 990) 2009 RAPID C	Callections of Art				3015/10 Page 2
Ь						
3	Using the organization's acquisition, accessi	on, and other records, o	check any or the	tollowing that are a	i significant use o	its collection items
	(check all that apply):	ا ہ		anna programs		
a	Public exhibition	d L	Other	nange programs		
b	Scholarly research	e L	Otner			
C	Preservation for future generations	-lla atrana and arralain be	au thai firthar th	a arganization's a	vomnt numaca in	Part VIV
4	Provide a description of the organization's co					rait Aiv.
5	During the year, did the organization solicit of				iidi doseto	Yes No
Day	to be sold to raise funds rather than to be mit IV Escrow and Custodial Arran				orm 990. Part IV	
[Fai	reported an amount on Form 990, Pa	-	ii Organization ai	isweied les tol	omi 550, i aitiv,	iii 16 3, 01
10	Is the organization an agent, trustee, custod		v for contribution	s or other assets n	ot included	
ıa	on Form 990, Part X?	ian or other intermediary	y for continuation	3 01 011101 233013 11	ot moladed	Yes No
h	If "Yes," explain the arrangement in Part XIV	and complete the follow	vina table:			
U	ii res, explain the analigement in Fart XIV	and complete the follow	ving table			Amount
	Regionare balance				1c	ranodric
	Beginning balance Additions during the year				1d	
d	Distributions during the year				1e	
f	Ending balance				1f	
	Did the organization include an amount on F	orm 990 Part X line 211	?		<u> </u>	Yes No
	If "Yes." explain the arrangement in Part XIV	Om 550, 1 att A, m 6 2 1	•			
Pai		f the organization answe	ered "Yes" to Fo	rm 990. Part IV, line	e 10.	
			(b) Prior year	(c) Two years back		ack (e) Four years back
1a	Beginning of year balance		227,276.	(6)	1,5/	1.1.7
b	Contributions	132,943.	181,141.			
c	Net investment earnings, gains, and losses	-146,646.	347,166.		 	
d	Grants or scholarships				·	
	Other expenditures for facilities				· · · · · · · · · · · · · · · · · · ·	1
Ū	and programs	79,000.	70,000.			
f	Administrative expenses	54,651.	161,709.			
g	End of year balance	1,376,520.1,				
2	Provide the estimated percentage of the year					
а	Board designated or quasi-endowment	100.00 %	,			
b	Permanent endowment ▶	%				
С	Term endowment					
За	Are there endowment funds not in the posse	ssion of the organizatio	n that are held a	nd administered fo	r the organization	
	by.					Yes No
	(i) unrelated organizations					3a(i) X
	(ii) related organizations					3a(ii) X
b	If "Yes" to 3a(ii), are the related organization:	s listed as required on S	chedule R?			3b
4	Describe in Part XIV the intended uses of the					
Pai	rt VI Investments - Land, Building	gs, and Equipment	t. See Form 990,	, Part X, line 10.		
	Description of investment	(a) Cost or other	1 ' '	1 ' '	Accumulated	(d) Book value
		basis (investmen	it) basis ((other) c	depreciation	
1a	Land					
b	Buildings					
¢	Leasehold improvements					
d	Equipment					
	Other					
Total	LAdd lines 1a through 1e (Column (d) must e	gual Form 990 Part X. o	column (B), line 1	O(c).)		0.

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 RAPID CITY Part VII Investments - Other Securities. Se	CLUB FOR B	OYS F	OUNDATION	, INC	75-3015710	Page 3
(a) Description of security or category			10) Method of v	aluation:	
(including name of security)	(b) Book value	'		or end-of-year		
Financial derivatives	<u></u>					
Closely-held equity interests			 			
Other						
			· · · · · · · · · · · · · · · · · · ·			
			<u> </u>			
						
					·	
			•			
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶]					
Part VIII Investments - Program Related. S	ee Form 990, Part X,	line 13				
(a) Description of investment type	(b) Book value) Method of v		
			Cost o	or end-of-year	market value	
		_		 		
				·		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ► Part IX Other Assets. See Form 990, Part X, line	45					
	Description				(b) Book va	ılue
					(3,555	
				. w · 		
			· 			
				· · · ·		
				**		
	· · · · · · · · · · · · · · · · · · ·			·		
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 15)				—	
Part X Other Liabilities. See Form 990, Part X,		•				
1 (a) Description of liability		(b)	Amount			
Federal income taxes						
						
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 25.)					

^{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. 932053 02-01-10

	dule D (Form 990) 2009 RAPID CITY CLUB FOR BOYS FOU		INC		3015710	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to A	udited Financ	cial State	ement	:s	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	j	1			
2	Total expenses (Form 990, Part IX, column (A), line 25)		2			
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3			
4	Net unrealized gains (losses) on investments		4			
5	Donated services and use of facilities		5			
6	Investment expenses		6			
7	Prior period adjustments		7			
8	Other (Describe in Part XIV.)		8			
9	Total adjustments (net). Add lines 4 through 8		9			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		10	.		
Pai	t XII Reconciliation of Revenue per Audited Financial Statement	s with Reven	iue per i		<u> </u>	
1	Total revenue, gains, and other support per audited financial statements			1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	- 1				
a	Net unrealized gains on investments	2a		-		
þ	Donated services and use of facilities	2b		-		
C	Recoveries of prior year grants	2c		1		
d	Other (Describe in Part XIV.)	2d		اا		
•	•			2e		
3	Subtract line 2e from line 1			3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	ا مه				
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV.)	4a 4b		1		
b		40		4c		
с 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5		-
	rt XIII Reconciliation of Expenses per Audited Financial Statemen	ts With Expe	nses per	_	rn	
1	Total expenses and losses per audited financial statements			1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
_ а	Donated services and use of facilities	2a		1		
b	Prior year adjustments	2b		1.		
c	Other losses	2c				
d	Other (Describe in Part XIV.)	2d				
е	Add lines 2a through 2d			2e		
3	Subtract line 2e from line 1			3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a] `		
b	Other (Describe in Part XIV.)	4b][
C	Add lines 4a and 4b			4c		
_5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5		
Pa	rt XIV Supplemental Information					
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, li					4; Part
	e 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complet					
PA	RT V, LINE 4: THE ENDOWMENT FUNDS ARE USED T	O PROVID	E FINA	TMCT	AL	
CIT	DOOR NO WITE DADID CIMY CITIE FOR BOYC THE					
50.	PPORT TO THE RAPID CITY CLUB FOR BOYS, INC.					
						-
_						
						

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization RAPID CITY CLUB FOR	CLUB FO	BOYS	FOUNDATION, I	INC			Employer identification number 75-3015710
General Information on Grants and Assistance	d Assistance						
Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	o substantiate the	e amount of the grants	s or assistance, the	grantees' eligibility	for the grants or ass	istance, and the selec	
criteria used to award the grants or assistance?	tance?	;	:				X Yes No
 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 	cedures tor monr	toring the use of grant	runds in the Unite	d States.			i
Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	Sovernments and 5,000. Check this	d Organizations in the box if no one recipier	e United States. C nt received more th	complete if the orgains \$5,000. Use Pa	anization answered "Y irt IV and Schedule I-1	'es" to Form 990, Part (Form 990) if addition	IV, line 21, for any lal space is needed ▶ ☐
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RAPID CITY CLUB FOR BOYS, INC. 320 N. 4TH STREET RAPID CITY, SD 57701	46-0277778	501C3	.000 67	0			TO SUPPORT THE GENERAL ACTIVITIES OF THE RAPID CITY CLUB FOR BOYS, INC.
						;	
Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations	id government or	ganizations		,			
For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	tion Act Notice,	see the Instructions	for Form 990.				Schedule I (Form 990) 2009

Schedule I (Form 990) 2009 RAPID CITY CLUB FOR BOYS FOUNDATION, INC

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

Page 2

75-3015710

uation (f) Description of non-cash assistance al, other)							
(e) Method of valuation (book, FMV, appraisal, other)			r additional information	O THE RAPID	ASH FLOW		
(d) Amount of non- cash assistance			, line 2, and any other	THE ORGANIZATION PROVIDES AWARDS TO THE	OPERATING C	Ä.	
(c) Amount of cash grant			n required in Part I	ON PROVID	G ON THE	OF THE FOUNDATION.	
(b) Number of recipients			ide the informatio	GANIZATI	DEPENDIN		
(a) Type of grant or assistance			Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	SCHEDULE I, PART I, LINE 2: THE OF	CITY CLUB FOR BOYS, INC. ANNUALLY DEPENDING ON THE OPERATING CASH FLOW	NEEDS OF THE CLUB AND THE EARNINGS	

932102 02-02-10

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

RAPID CITY CLUB FOR BOYS FOUNDATION, INC

Employer identification number 75-3015710

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ENDOWMENT FUND SUPPORTING THE CLUB FOR BOYS, AN ORGANIZATION DEDICATED
TO PROVIDING POSITIVE EXPERIENCES THAT DEVELOP SELF-ESTEEM AND
CHARACTER IN A SAFE, CARING AND FUN ENVIRONMENT FOR ALL BOYS.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ENVIRONMENT FOR ALL BOYS.
FORM 990, PART VI, SECTION B, LINE 11: THE EXECUTIVE DIRECTOR REVIEWED A
DRAFT OF THE FORM 990 AND PROVIDED A COPY TO THE BOARD. THE BOARD REVIEWED
AND APPROVED THE 990 AT A REGULAR BOARD MEETING PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C: IN THE EVENT A CONFLICT OF
INTEREST IS IDENTIFIED THE BOARD MEMBER INVOLVED IS REQUIRED TO DECLARE THE
ISSUE AND EXCUSE THEMSELVES FROM VOTING. DUE TO THE SIZE OF THE COMMUNITY,
THE BOARD IS OFTEN AWARE OF ANY SITUATIONS THAT MAY ARISE.
FORM 990, PART VI, SECTION B, LINE 15A: THE BOARD REVIEWS THE COMPENSATION
OF THE EXECUTIVE DIRECTOR ANNUALLY. THE SALARY FOR THIS POSITION WAS BASED
ON THE SALARY FOR COMPARABLE ORGANIZATIONS IN THE RAPID CITY AREA. THE
BOARD GENERALLY ALLOWS FOR COST OF LIVING ADJUSTMENTS EACH YEAR.
FORM 990, PART VI, SECTION C, LINE 19: THE FOUNDATION MAKES ITS GOVERNING
DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

SCHEDULE R

Related Organizations and Unrelated Partnerships

2009 Open to Public Inspection

OMB No 1545-0047

Employer identification number 75-3015710

Schedule R (Form 990) 2009 Direct controlling Direct controlling entity entity Identification of Related Tax-Exempt Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) $\boldsymbol{\varepsilon}$ A/Z Public charity status (if section End-of-year assets 501(c)(3)) 11A ► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Exempt Code Total income section ਉ € 501C3 ▶ See separate instructions. Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or Legal domicile (state or foreign country) foreign country) SOUTH DAKOTA RAPID CITY CLUB FOR BOYS FOUNDATION, INC LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. SELF-ESTEEM AND CHARACTER EXPERIENCES THAT DEVELOP ► Attach to Form 990. Primary activity Primary activity TO PROVIDE POSITIVE - 46-0277778 Name, address, and EIN Name, address, and EIN of related organization RAPID CITY CLUB FOR BOYS, INC. of disregarded entity RAPID CITY, SD 57701 Name of the organization 320 N. 4TH STREET Department of the Treasury Internal Revenue Service (Form 990) Part II Part

75-3015710

Page 2

Schedule R (Form 990) 2009 RAPID CITY CLUB FOR BOYS FOUNDATION, INC

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

(a)	(g)	(2)	(Q)	(e)	ε	(6)	(F)	(0)	9
Name, address, and EIN of related organization	Primary activity	Legal domicite (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets	ortion- ations?	Code V-UBI amount in box 20 of Schedule	General or managing partner?
		country)		sections 512-514)			Yes No	K-1 (Form 1065)	VesNo
		_							
									_
			!						-
	•								
									-
Part IV Identification of Related Organizations Taxable as a Corporation organizations treated as a corporation or trust dumg the tax year,	ganizations Taxable as a C proporation or trust during the	orporation or tax year.)	Trust (Complete if t	ion or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related .)	d "Yes" to Form 99	10, Part IV, line 34	because it b	nad one or more re	lated

-							
(a)	(q)	(o)	(p)	(ə)	ω	(6)	(F)
Name, address, and ElN of related organization	Pnmary activity	Legal domicile (state or foreign country)	Direct controlling entrty	Type of entry (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership
		_					
		-					
							·
							,
932162 07-21-10						Schedule R (Form 990) 2069	. 6002 (066 u

Schedule R (Form 990) 2009 RAPID CITY CLUB FOR BOYS FOUNDATION, INC

sactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)	
/ Tra	,
Part V	

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			Yes	Ŷ
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?				
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		1a		×
b Gift, grant, or capital contribution to other organization(s)		4	×	
c Gift, grant, or capital contribution from other organization(s)		1c		×
d Loans or loan guarantees to or for other organization(s)		1d		×
e Loans or loan guarantees by other organization(s)		P		×
				-
f Sale of assets to other organization(s)		#		×
g Purchase of assets from other organization(s)		19		×
h Exchange of assets		ŧ		×
i Lease of facilities, equipment, or other assets to other organization(s)		Į.		×
j Lease of facilities, equipment, or other assets from other organization(s)		į.		×
k Performance of services or membership or fundraising solicitations for other organization(s)		*		×
I Performance of services or membership or fundraising solicitations by other organization(s)		=		×
m Sharing of facilities, equipment, mailing lists, or other assets		£1		×
n Sharing of paid employees		1u		×
o Reimbursement paid to other organization for expenses		10		×
p Reimbursement paid by other organization for expenses		1 _p		×
				-
q Other transfer of cash or property to other organization(s)		<u>=</u>		×
r Other transfer of cash or property from other organization(s)		+		×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	insaction thresholds			
(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved	volvec	75
(1) RAPIC CITY CLUB FOR BOYS, INC.	В	51	79,000.	00

Schedule R (Form 990) 2009

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INC Schedule R (Form 990) 2009 RAPID CITY CLUB FOR BOYS FOUNDATION, Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

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

General or managing partner? Yes No Ξ Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) 6 Disproportionate allocations? Share of end-ofyear assets <u>e</u> Are all partners section 501(c)(3) organizations? Yes No € (state or foreign Legal domicile country) છ Primary activity Name, address, and EIN of entity

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

Form 8868 (Rev. 4-2009)

 If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box 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. 			
Par	Automatic 3-Month Extension of Time. Only submit onginal (no copies needed).		
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only			
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.			
noted (not a you m	ronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic utomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or collust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files gov/efile and click on e-file for Charities & Nonprofits	ically if	(1) you want the additional ated Form 990-T Instead,
Type of print File by t due date filing your return Sinstruction	Name of Exempt Organization	Emp	loyer identification number
	RAPID CITY CLUB FOR BOYS FOUNDATION, INC	7	5-3015710
	e for Number, street, and room or suite no. If a P.O. box, see instructions.		
Check type of return to be filed (file a separate application for each return). X Form 990 Form 990-T (corporation) Form 4720 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5227 Form 990-EZ Form 990-T (trust other than above) Form 6069 Form 990-PF Form 1041-A Form 8870			
SARA GENTRY, EXECUTIVE DIRECTOR • The books are in the care of ▶ 320 N 4TH STREET - RAPID CITY, SD 57701 Telephone No ▶ 605-343-3500 FAX No. ▶ • If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ▶ If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension will cover.			
I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until			
2	If this tax year is for less than 12 months, check reason: Initial return Final return	X	Change in accounting period
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		··· ·· · · · · · · · · · · · · · · · ·
	nonrefundable credits. See instructions. If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	3a	\$
	tax payments made. Include any prior year overpayment allowed as a credit.	3ь	\$
C	Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required,		
	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ N/A
Cauti	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-	EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.