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990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

Appkation pending Appkation pending	46 2542 1,107,832 or Yes X No Yes No ase mstructions)
Name change Initial return Initia	2542 1,107,832 or Yes X No Yes No No we mstructions)
Initial return Termination	2542 1,107,832 or Yes X No Yes No No we mstructions)
Termination Annerhood return Application pending Application pend	or Yes X No Yes No No ee mstructions)
Amended return Application pending ANNAPOLIS F Name and address of principal officer PETER SUMMERS, PRESIDENT 121 SOUTH VIILIA AVENUE ANNAPOLIS MD 21401 I Tax-exempt status X 501(c) (3) ◀ (insert no)	or Yes X No Yes No No ee mstructions)
Appkation pending Appkation pending Finame and address of principal officer PETTER SUMMERS, PRESIDENT 121 SOUTH VILLA AVENUE ANNAPOLIS MD 21401 I Tax-exempt status 5 01(c) (3)	Yes X No No see instructions)
PETER SUMMERS, PRESIDENT 121 SOUTH VILLA AVENUE ANNAPOLIS Tax-exempt status X SOI(c) (3) (Insert no) 4947(a)(1) or 527 Website: WWW.BGCAA.COM H(c) Group exemption num K Type of organization X Corporation Trust Association Other L Year of formation 1989 M State of leg Part Year of organization's mission or most significant activities: TO INSPIRE AND ENABLE ALL YOUNG PEOPLE, ESPECIALLY THOSE WHO NEED US MOST, TO REALIZE THEIR FULL POTENTIAL AS PRODUCTIVE, RESPONSIBLE, AND CARING CITIZENS THROUGH ACTIVE PARTICIPATION IN POSITIVE ALTENATIVES. 3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34 8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 Other revenue (Part VIII, column (A), lines 1-3) 14 Benefits paid to or for members gleaf (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), lines 1-4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16 Foressional fundrassing fees (Part IX, column (A), line 11e)	Yes X No Yes No nee instructions)
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Tax-exempt status	iber 🕨
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9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 21 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 22 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 16a Professional fundraising fees (Part IX, column (A), line 11e)	rent Year
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11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 16a Professional fundraising fees (Part IX, column (A), line 11e)	92,401
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 16a Professional fundraising fees (Part IX, column (A), line 11e)	7,323
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 16a Professional fundraising fees (Part IX, column (A), line 11e)	2,885
14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 16a Professional fundraising fees (Part IX, column (A), line 11e)	032,622
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 16a Professional fundraising fees (Part IX, column (A), line 11e)	
	988,468
	300, 100
K K	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 620, 370	602,365
18 Total expenses Add lines 13–17 (must equal Part IX, column.(A)_line_25) 1,629,399 1,	,590,833
18 Nevenue less expenses outdate line to non line 12	<u>-558,211</u>
	d of Year , 627 , 897
1007 040 PER 9 2 2011 101 1007 0401	459,487
28 21 Total habitudes (Fatt A, fine 20)	168,410
Part II Signature Block	
Under penalties of person, I declare that I have exemined this return including accompanying schedules and statements, and to the best of my knowled	dge
and be correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge	
Sign	
Here Signifficer of officer	,
Type or print name and title	<u> </u>
Preparer's	s identifying number
Peid Preparer's Replace See Instru	uctions)
THADDEUS N. TOAL, CPA	780668 -0274631
Use Only Firm's name (or yours f self-employed), 200 HARRY S TRUMAN PKWY STE 300 Phone	
	224-0343
May the IRS discuss this return with the preparer shown above? (see instructions)	
For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.	Yes No
$\mathcal{A} \sim \mathcal{A} \sim $	Yes No Form 990 (2009)

TO INSPIRE AND ENABLE OF TO REALIZE THEIR FULL OF CITIZENS THROUGH ACTIVITY	POTENTIAL AS PROD	UCTIVE, RESPONSI	IBLE, AND C	
2 Did the organization undertake any signification the prior Form 990 or 990-EZ?	nt program services during the yea	r which were not listed on		Yes X No
If "Yes," describe these new services on Sci				
3 Did the organization cease conducting, or m services?	nake significant changes in how it co	onducts, any program		Yes X No
If "Yes," describe these changes on Schedu	ile O	• •	• ••	T THE EN HO
4 Describe the exempt purpose achievements		e largest program services by ex	penses.	
Section 501(c)(3) and 501(c)(4) organization			f grants and	
allocations to others, the total expenses, and	d revenue, if any, for each program	service reported.		
FITNESS AND RECREATION PLAY OF THE DAY YOUTH BI-MONTHLY SPORTS NEWS: FORMATTED BY THE NIKE INFORMATIONAL SPORTS BENEATED OF ALL EVENTS. IT ALSO HIGHLID ACCOMPLISHMENTS ACHIEVED PUBLICATION GIVES MEMBERNANCE THEIR WRITING,	SPORTS NEWSLETTER LETTER THAT IS WR SWOOSH CLUB. THE I-MONTHLY PUBLICA L CURRENT AND PLA GHTS INDIVIDUAL A ED THROUGH, OUT TH ERS THE OPPORTUNI EDITING, AND TIME	- THIS IS A ITTEN, EDITED, I NEWSLETTER IS AI ITION THAT KEEPS NNED SPORTING ND TEAM E YEAR. THIS TY TO IMPROVE AI -MANAGEMENT SKII	n The ND Lls.	92,401)
GIRLS SPORTS PROGRAMS	- IF A GIRL DOESN	T PARTICIPATE .	IN .	
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				Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"				
	complete Schedule A		1	X	
2	is the organization required to complete Schedule B, Schedule of Contributors?		2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		-	1	
	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				l
	Schedule C, Part II		4	<u> </u>	X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)		ı	1	
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III		. 5	1	<u> </u>
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,"			1	
	complete Schedule D, Part I		. 6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			1	
	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		X
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,			🖵	1
	VII, VIII, IX, or X as applicable		- 11	X	HE STORY
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			0.4	1 3
	Schedule D, Part VI		7. c 1. z.		3
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more				1
	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 related 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			3 7 2	
_	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 48? If "Yes," complete Schedule D, Part X.				
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete				
	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.	12A	X_		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		_1;	Ц	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		14	<u>. </u>	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,		1		
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I		. 14	<u> </u>	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		١.,		
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	•	1(5	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			,	x
	on Part IX, 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		. م	x	
4.5	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		. 11	' ^	+
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		19	.	x
20	If "Yes," complete Schedule G, Part III Did the organization operate one or more hospitals? If "Yes," complete Schedule H		20		X
<u>20</u>	Did the organication operate one of more hospitalist in Test, complete contents in	<u></u>			0 (2009)
					-

	- Continued of the Cont			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations		Yes	No
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	24		x
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the	21	-	_
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, 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		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	_23		- 32
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	1		
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		X
b	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	240		
٠	to defease any tax-exempt bonds?	1		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d	_	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	240		
200	• • • • • • • • • • • • • • • • • • • •	05.		x
ь	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
U	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			•
20	990-EZ? If "Yes," complete Schedule L, Part I	25b		<u> </u>
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 contributor, or a grant selection committee member, or to a person related to such an individual?			77
	If "Yes," complete Schedule L, Part III	27	AND AND A	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			r fre-
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	学通過		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a	1		
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,	1		7.7
	Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	1 1		7.5
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	1		97
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
	Schedule N, Part II	32		_ <u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			•
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	1		v
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	1		~
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			v
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			7.5
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			v
	19? Note. All Form 990 filers are required to complete Schedule O.	38	990	X
		Fam	3 3 3 L	c or it it?

1.4	1514-99 Oracements regarding Other Ino Finings and Tax compliance					
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1	l		Yes	No
	U.S. Information Returns Enter -0- if not applicable	1a	7	31.5	100	1.7
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0	1.5.6		943
c	Did the organization comply with backup withholding rules for reportable payments to vendors and repor	table				7.3
	gaming (gambling) winnings to prize winners?			1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		•	200		建
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	77		数针	
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		• •	F **7		
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	У				
	this return?			3a		X
þ	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 auti	hority				
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	ial		1 1		1
	account)?			4a		X
b	If "Yes," enter the name of the foreign country: ▶		•	\$ 15 J	i Series	de
	See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report of Foreign Bar	nk			e Nest	
	and Financial Accounts			6.00	製鋼	
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
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regard	ing				
	Prohibited Tax Shelter Transaction?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			1		
	organization solicit any contributions that were not tax deductible?			6a		X
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions	ОГ				
_	gifts were not tax deductible?	•	, ,	6b	37.75	1 TO 1
7	Organizations that may receive deductible contributions under section 170(c).	٠.				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goo	as		7.0		
	and services provided to the payor?			7a		-
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	• •		7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		
А	If "Yes," indicate the number of Forms 8282 filed during the year	7d			14.3	
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a pers					
	benefit contract?	01.01		70	EDOMETY.	SACRE VINE
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract	? `		7f		ļ
a	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	•	• •	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	5	•			
	required?			7h_		<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			1		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring				الماظر الدساء	15 -2.5
	organization, have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?			9a		<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		× × ×
10	Section 501(c)(7) organizations. Enter:		1)	
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	<u> </u>			
11	Section 501(c)(12) organizations. Enter:	ı	1		11	
a	Gross income from members or shareholders	11a				2
b	Gross income from other sources (Do not net amounts due or paid to other sources against	 				
	amounts due or received from them.)	116	<u></u>			A SEA
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10			12a	8. F. A. /	
_ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		No state of	900	(2009)

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.

<u>360</u>	tion A. Governing Body and management			
	m. n	C200	Yes	No
18	Enter the number of voting members of the governing body Finter the number of voting members that are independent 1b 40			
ь	The state of the s	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	2	3 35 559	X
•	any other officer, director, trustee, or key employee?	-		
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		x
	supervision of officers, directors or trustees, or key employees to a management company or other person?	4		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	. 5		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	6		X
6	Does the organization have members or stockholders?	-		
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	7-		x
	of the governing body?	7a 7b		X
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		12.5	11
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
_	the year by the following:	8a	X	BOHY A
a	The governing body?	8b	X	
ь	Each committee with authority to act on behalf of the governing body?	- 65	-	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	وا		x
500	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O tion B. Policles (This Section B requests information about policies not required by the Internal			<u> </u>
_				
Rev	enue Code.)		Yes	No
40-	Describe amenination have local chapters bronches or offlictor?	10a	105	X
10a	Does the organization have local chapters, branches, or affiliates? If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	108		
Ь	affiliates, and branches to ensure their operations are consistent with those of the organization?	105		l
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	1.02		
••	form?	11		X
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	1		
	rise to conflicts?	12b	X	l
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
·	describe in Schedule O how this is done	12c	x	1
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	х	
15	Did the process for determining compensation of the following persons include a review and approval by		STEEL AND THE	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	X	
ь	Other officers or 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 arrangement		3	
	with a taxable entity during the year?	16a		X
ь	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		新楼	
	the organization's exempt status with respect to such arrangements?	16b	<u> </u>	<u> </u>
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			
	X Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶ BOYS & GIRLS CLUBS 121 SOUTH VILLA AVE	46 64		
A	NNAPOLIS MD 21401 4	10-26	<u>3−2</u>	542

Particula 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 organization'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 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	•	sate a	any (curre	nt of	fficer,	dire	ctor, or trustee		
(A)	(B)				;)			(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director		Officer		Highest compensated a employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estmated amount of other compensation from the organization and related
		8	stee			enseted				organizations
BARRY VALENTINE										
MEMBER	1.00	X				L		0	0	0
BETTY TURNER						i I			_	
MEMBER	1.00	X				Ш		0	0	0
BRENT BOONE]						_		_
MEMBER	1.00	X		L_		\sqcup		0	0	0
CAROL LARCHER						1 1				
MEMBER	1.00	X						0	0	0
CHARLES PARKER	1 00					1 1		o		0
MEMBER	1.00	X	_	<u> </u>	-	\vdash		U	0	
CHRISTOPHER COMER		👡						o	o	0
MEMBER	1.00	X	-	_	┝	╁		0		
CLARK GRAHAM	1	x	İ					o	0	0
MEMBER	1.00	 ▲	├	-	<u> </u>	╁┷╅		<u> </u>		
CLIFTON MARTIN	1.00	x	1	l	ļ	1 1		o	o	0
CON ERRICO	1.00	1	┢	┢	├	╁				
MEMBER	1.00	x						0	0	0
DAVE CORDLE, SR.	1.00	12	┝	-	├	╂╌┤	_			
MEMBER	1.00	x				1 1		О	o	0
DELORES DUNCAN-WE		 ^	\vdash	 	\vdash	1-1				
VICE PRESIDENT	1.00	x		x				o	o	0
ENRIQUE MELENDEZ		 	┢╌	 	Н					
MEMBER	1.00	X						O	0	0
FRANK CAMPBELL		Ť								
MEMBER	1.00	X	l	ì		1 1		0	0	0
GLORIA WILSON SHE	LTON	1								
MEMBER	1.00	X						0	0	0
HANK LIBBY				Γ						-
MEMBER	1.00	X	L	L				0	0	0
J. JEFFREY FOX	1									_
MEMBER	1.00	X	<u></u>	乚		\bot		0	0	0
JAN HOLT RAPSON									_	
MEMBER	1.00	X	١_	1	乚	┸┚		0	0	000,000
DAA										Form 990 (2009)

Section A. Officers, (A) Name and Title	(B) Average hours per	Pos	ition ((C checi	call t	hat es	ply)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
JEANNINE WAYSON MEMBER	1.00	x						0	0	0
JENELLE MURPH										
MEMBER JOHN WESLEY SMITH	1.00	X						0	0	
MEMBER	1.00	x						o	o	O
JOSEPH G. MAYER										
MEMBER NA MINUSTRIA	1.00	X	_					0	0	0
JOSEPH MATTHEWS MEMBER	1.00	x						o	o	o
KIRK CRANFORD	<u> </u>									
MEMBER	1.00	X	<u> </u>			<u> </u>		0	0	0
LAURA S. KIESSLIN MEMBER	1.00	x						o	o	o
MARY KAY ROBERTSO			_							
MEMBER	1.00	X	ļ					0	0	O
MICHAEL PITCHFORD MEMBER	1.00	x	ŀ					o	0	o
MIKE GORMLEY	1.00						_	0	<u> </u>	
MEMBER	1.00	X	<u> </u>					0	0	
MIRANDA DARDEN	1 00		1						•	
MEMBER OLA ALLSUP	1.00	X	├	-		-		0	o	<u> </u>
MEMBER	1.00	x						_0	0	C
PAT COOLEY										
MEMBER	1.00	X	L					85,096	0	11,528
Total Total number of individuals (incl.)	uding but not lin	nited	to th	ose I	isted	abo	ve)		00,000 in	11,520
reportable compensation from the			0							
 Did the organization list any formemployee on line 1a? If "Yes," of For any individual listed on line the organization and related organization and related organization and related organization listed on line 1a Did any person listed on line 1a 	omplete Schedula, is the sum of anizations great receive or accru	ule J f repo ter th ue co	for sontable an \$1000 an \$10000 an \$10000 an \$10000 an \$10000 an	uch i le co 150,0	ndivi impe 200? on fi	dual ensat If "Y	ion a 'es," any u	and other compensation from complete Schedule J for su 		Yes No 3 X 4 X 5 X
services rendered to the organize Section B. Independent Contractor		com	piete	SCN	eau	e J K	X SU	cri person	***	5 X
Complete this table for your five compensation from the organization.	highest comper	nsate	d inc	lepe	nder	t cor	ntrac	tors that received more than	1 \$100,000 of	
	(A) usiness address							Descript	(B) ion of services	(C) Compensation
							-			
	······································						-	<u></u>		
							1			

gh X	Y)	Julia	ent of Reve	(5) 18)	The state of		ii.	(A) otal revenue	(B) Related or	(C) Unrelated	(D) Revenue
							<u>'</u>	otal revenue	exempt function revenue	business revenue	excluded from tax under sections 512, 513, or 514
2 1	la	Federated cam	paigns	1a		8,05	8			建筑地域	List of the second
딁		Membership du		1b				ESSI LE			
Ě	С	Fundraising ev	ents .	1c		111,12	5		de la companya de la	and the second	
<u>8</u>	d	Related organiz	zations	1d				Et h			2004
Ē	0	Government grants (contributions)	10		380,00	0				
		All other contributions						eka kal			
튕		and similar amounts	not included above	1f		430,83	0				14 14 14 14 14
and oth	g	Noncash contribution	s included in lines 1a-1	ıf Ş	5						
	h	Total. Add line	s 1a–1f					930,013	柳柳新 经股份价	har a said and the firm of	
						Busn. Cod	le P	(4)有数字形			A STATE OF THE SAME
: :	2a	SUMMER (AMPS & KEYST	ONE C	LUBS			75,134			
	b	Memberse	IP DUES					17,267	17,267		
<u> </u>	C		• •				<u> </u>				
3	d							<u> </u>			ļ
	0	,							4		
8		. •	am service rever	ue					10.55 T. 10.5 T		TO THE PARTY OF TH
4_	Я	Total. Add line	s 2a-2f	<u>.</u>		<u></u>		92,401	DINCE SERVICE AND ADDRESS OF THE PARTY OF TH	SALE SALES BELLEVILLE	《新聞歌》,以為
;			ome (including d	ividend	s, interes	t, and					
ı		other similar ar	•			•		7,323	<u> </u>		7,3
- 1 4	4		vestment of tax-	exemp	t bond pro	ceeds	·			 	ļ
1	5	Royalties	 			<u> </u>	5200KAR	nasar et en	TENNE TO THE SUPERIOR CONTRACTOR	Nerth Market	The state of the state of
			(i) Real		(li) F	ersonal	_				
19	6a	Gross Rents							The Control of	A Wally Salam	推入1844。1875
	þ	Less rental exps					_	100			
	C	Rental inc or (loss)									
١,		Net rental inco			ľ		10000	national and the second	THE RESERVE OF THE PROPERTY OF THE PERSON	15 3 CONTRACTOR (60 F 10 CONTRACTOR)	engen og mad gan, og skjenak okkenske enne at
- ['		sales of assets	(i) Securities	•	(11)	Other					
1		other than inventory	_								
	þ	Less cost or other									
1		basis & sales exps						1			张 为 《美艺》
-		Gain or (loss)	<u>. </u>		L					THE PAYEN	
1		Net gain or (los	-	. (<u> </u>	7020	TO CHECK THE FIRST		AND CHARGE AND SHAPE OF THE	PROPERTY OF THE STREET
g '	8a		m fundraising ever					126			
		(not including \$	111,					**			
			eported on line 1c)			75 01					
_ 1		See Part IV, line	• • • •	a		75,21		1			
		Less. direct ex	•] @ :-:-		75,21					AND DESCRIPTION
Ι.			(loss) from fundi		events		Bone and			प्रकार ्या स्टब्स्ट	2.89295
'	74	See Part IV, line	m gaming activitie	s							
	_	•						第47 章			
		Less direct ex	penses (loss) from gami	ا⊍ ⊶دہ مم	utioe		- Leaves	X Kinden and the south	A STATE OF THE PARTY OF THE PAR	Control of the state of the sta	an large Medical and table and complete shade.
		Gross sales of	_	الي ودار.]	003				The second secon	Contract Con	
'	va	returns and all	-	ا							第二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十
	h	Less cost of g									第二十四十二
		_	(loss) from sales	of inve	entory		- HORESKY.	THE PERSON NAMED IN COLUMN			
	Ť		elianeous Revenue			Busn. Co	100				
1	1a		EOUS INCOME			1	THE REAL PROPERTY.	2,885			
[b	, 						, , , , , ,	1		
	C		• • • • •	•	• •						
	d	All other reven	ue		•						
	-	Total. Add line			•	•		2,885		SHADOW STREET	an and a second and
			. See instruction					1,032,622			7,3

Form 990 (2009)

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 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				
2	Grants and other assistance to individuals in				
	the U S. See Part IV, line 22				Lail Laborate was
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16			A TOTAL STREET	
4	Benefits paid to or for members				以外,在一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个
5	Compensation of current officers, directors,				
	trustees, and key employees	85,096	68,032	9,794	7,270
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	776 460	600 BEB	00 360	66 337
7	Other salanes and wages	776,463	620,757	89,369	66,337
8	Pension plan contributions (Include section 401(k)			,	
	and section 403(b) employer contributions)	64 000	E1 016	7 360	E AAS
9	Other employee benefits	64,020	51,216		5,442 5,346
10	Payroll taxes	62,889	50,311	7,232	5,346
11	Fees for services (non-employees)]			
a	Management			<u> </u>	
b	Legal				
C	Accounting				
d	Lobbying				
0	Professional fundraising services. See Part IV, line 17		持 点下 以 有种种的	And the second s	
f	Investment management fees	00 070	10.000	56,624	20 504
9	Other	98,270	12,060	36,624	29,586 3,403
12	Advertising and promotion	3,403	20 105	4,649	2,730
13	Office expenses	35,484	28,105	4,043	<u> </u>
14	Information technology				
15	Royalties	145,188	119,275	19,603	6,310
16	Occupancy	3,425	3,033		0,520
17	Travel	3,423	3,033	352	
18	Payments of travel or entertainment expenses]	
4.0	for any federal, state, or local public officials	41,071	12,608	28,463	· -
19	Conferences, conventions, and meetings	36,613	34,416		732
20	Interest .	30,023	34/120		
21	Payments to affiliates Depreciation, depletion, and amortization	95,680	89,939	3,827	1.914
22		38,248	35,122		394
23	Insurance				PORT TO THE PART OF THE
24	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.)				
а	AUTOMOBILE EXPENSE	48,122	43,310	2,406	2,400
ь	FIELD TRIPS/SPECIAL EVENT	24,021	24,021		
c	FINANCIAL ASSISTANCE	12,709	8,589		
d	MEMBERSHIP DUES	12,504	11,254		
8	FOOD	4,848	4,597		
f	All other expenses	2,779	1,341	1,438	
25	Total functional expenses. Add lines 1 through 24f	4 500 000	1,217,986		131,870
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				
DAA	fundraising solicitation .				Form 990 (200

Form 990 (2009)

17	9	Balance Sheet						
						(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing				36,890		71,975
	2	Savings and temporary cash investments		•		1,309,545		925,239
- 1	3	Pledges and grants receivable, net				819,595	3	210,637
- 1	4	Accounts receivable, net					4	
l	5	Receivables from current and former officers, directors, tru	ustees, key			"大学","大学","大学","大学","大学","大学","大学","大学",		
ı		employees, and highest compensated employees. Complete	ete Part II of			(中国) (1) (1) (1)	ENLINE.	The second secon
1		Schedule L					5	MARINE SCALE CONTRACTOR CONTRACTOR
- 1	6	Receivables from other disqualified persons (as defined un	nder section					
		4958(f)(1)) and persons described in section 4958(c)(3)(B)) Complete			THE PROPERTY OF THE PARTY OF TH	***	MANAGEMENT OF THE PARTY OF THE
		Part II of Schedule L					6	
Assets	7	Notes and loans receivable, net					7	
89	8	Inventones for sale or use					8	
•	9	Prepaid expenses and deferred charges				4,597	9	5,494
	10a	Land, buildings, and equipment cost or				Part of the second		
		other basis. Complete Part VI of Schedule D	10a 2	2,975,				
	b	Less. accumulated depreciation	10b	561,	015	2,496,734		2,414,552
]	11	Investments—publicly traded securities					11	
i	12	Investments—other securities. See Part IV, line 11					12	
l	13	Investments—program-related See Part IV, line 11					13	
-	14	Intangible assets	•				14	
	15	Other assets. See Part IV, line 11				4 665 061	15	2 607 007
_	16	Total assets. Add lines 1 through 15 (must equal line 34)		<u> </u>	_	4,667,361	16	3,627,897
	17	Accounts payable and accrued expenses	•			177,040		105,786
1	18	Grants payable					18	
	19	Deferred revenue					19	
	20	Tax-exempt bond liabilities					20	
Llabilities	21	Escrow or custodial account liability Complete Part IV of S					21	Partition of Marketine College
=	22	Payables to current and former officers, directors, trustees	· ·					
ap		employees, highest compensated employees, and disqual	imed			· 中国中国的特别的	22	
<u> </u>		persons Complete Part II of Schedule L				920,000		353,701
	23	Secured mortgages and notes payable to unrelated third p				320,000	24	333,732
	24	Unsecured notes and loans payable to unrelated third par	TIES .				25	
	25 26	Other liabilities. Complete Part X of Schedule D Total liabilities. Add lines 17 through 25	•			1,097,040		459,487
-	20	Organizations that follow SFAS 117, check here ▶ 🖁	and			THE LABOR TO SERVICE AND ADDRESS OF THE PARTY OF THE PART		
ances		complete lines 27 through 29, and lines 33 and 34.	-J 41.10				27	
a	27	Unrestricted net assets				2,657,051	27	2,700,560
Bal	28	Temporarily restricted net assets	•		••	763,270	28	467,850
ᇴ	29	Permanently restricted net assets	•			150,000		
Fund		Organizations that do not follow SFAS 117, check her	re ▶ 📋	•				
Ē		and complete lines 30 through 34.						
0	30	Capital stock or trust principal, or current funds					30	
šet	31	Paid-in or capital surplus, or land, building, or equipment	fund		•		31	
38	32	Retained earnings, endowment, accumulated income, or					32	
Net Assets or	33	Total net assets or fund balances				3,570,321		3,168,410
ž	34	Total liabilities and net assets/fund balances		• • • • •	<u></u>	4,667,361	34	3,627,897

Form 990 (2009)

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

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.

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

BOYS & GIRLS CLUB OF ANNAPOLIS AND ANNE ARUNDEL COUNTY, INC.

Employer identification number 52-1736346

R	114	Reaso	on for Pul	blic Charity	Status (All organizations	must co	mplete	this pa	art.) Se	e ins	tructio	ns.			
The	orgai	nization is not a	private four	ndation because	it is (For lines 1 through 11, che	eck only o	ne box)								
1		A church, con	vention of cl	nurches, or asso	ciation of churches described in	section 1	70(b)(1)(A	A)(i).							
2	П	A school desc	nbed in sec	tion 170(b)(1)(A	i)(ii). (Attach Schedule E)										
3	П	A hospital or a	cooperative	e hospital service	e organization described in sect	ion 170(b)	(1)(A)(III)								
4	\sqcap	A medical res	earch organ	zation operated	in conjunction with a hospital de	scnbed in	section 1	70(b)(1)	(A)(III).	Enter th	e hospit	al's na	me,		
		city, and state	-	•	•										
5		-		for the benefit of	a college or university owned or	r operated	by a gove	mmenta	ıl unıt de	scnbed	in				
				(Complete Part I		•	• -								
6		-			vernmental unit described in sec	tion 1700	b)(1)(A)(v).							
7	X				ubstantial part of its support from				the ge	neral pu	blic				
٠		•		b)(1)(A)(vi). (Co	• • • • • • • • • • • • • • • • • • • •										
8	\Box				70(b)(1)(A)(vi). (Complete Part I	1.5									
9	H	•			more than 33 1/3 % of its supp	•	ntribution	s. memb	ership fe	es. and	l aross				
•	ш				ot functions—subject to certain e										
					d unrelated business taxable inc										
			_		, 1975 See section 509(a)(2).			,							
10		•	-		xclusively to test for public safet			a)(4).							
11	H	•	~	•	xclusively for the benefit of, to pe				carry ou	t the					
••	ш				d organizations described in sec						tion				
					e type of supporting organization										
		a Type		Type II	c Type III-Function			d		e III-Ot	her				
					inization is not controlled directly			or more	_ • •						
•	ш				and other than one or more publi						tion				
		509(a)(1) or s					•								
f			•		mination from the IRS that it is a	Type I, Ty	pe II, or T	ype III s	upportin	g					
•		organization,					•		• •	-					П
g		Since August	17, 2006, h	as the organizati	on accepted any gift or contribut	on from a	ny of the	•			• •	• •		•••	_
•		following pen	_	•			•								
				v or indirectly co	ntrols, either alone or together w	ith person	s describe	ed in (iı)						Yes	No
					the supported organization?	•							11g(i)		
			_	person describe					•	•			11g(ii)		
					escribed in (i) or (ii) above?	•			•			•	11g(iii)		
h				-	e supported organization(s).							• • • •			
(1	Nam	e of supported		ii) EIN	(iii) Type of organization	(Iv) Is the	organization	(v) Did y	ou notify	(vi)	s the		(vii) Amo	unt of	
•		anization	,	• •	(described on lines 1-9	1	isted in your		ization in	organizat			supp	ort	
					above or IRC section (see instructions))	governing	document?		of your port?		zed in the l S.?				
					(ass insudedona))	Yes	No	Yes	No	Yes	No				
								<u> </u>							
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			F 1672 1							H.					
Tot	a i			新。好說,	THE PERSON NAMED IN COMMENT	14.13(4)			交響	接地	Research to the second				

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning In) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not 930,013 include any "unusual grants.") 2,481,358 2,268,010 2,039,084 8,540,455 Tax revenues levied for the organization's 2 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 2,481,358 Total. Add lines 1 through 3 2.268.010 2.039.084 821.990 930.013 8,540,455 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) Public support. Subtract line 5 from line 4 8,540,455 Section B. Total Support (d) 2008 (e) 2009 Calendar year (or fiscal year beginning in) (a) 2005 (c) 2007 (f) Total (b) 2006 821,990 930.013 8,540,455 7 Amounts from line 4 2,481,358 2,268,010 2,039,084 Gross income from interest, dividends. payments received on securities loans, rents, royalties and income from similar 72.239 29,065 7,323 10,231 42,901 161,759 sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 8,702,214 Gross receipts from related activities, etc. (see instructions) 906,177 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) 13 ▶ [organization, check this box and stop here Section C. Computation of Public Support Percentage 98.14% 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) Public support percentage from 2008 Schedule A, Part II, line 14 15 98.16% 15 33 1/3 % support test-2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box 16a and stop here. The organization qualifies as a publicly supported organization \triangleright b 33 1/3 % support test-2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

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Page 3

Schedule A (Form 990 or 990-EZ) 2009 BOYS & GIRLS CLUB OF ANNAPOLIS

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

Sec	tion A. Public Support	JUNES HIS DOX	on and o or r a				
	lendar 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		ļ		<u> </u>		
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received		ļ				
	from other than disqualified persons that				1		
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year				<u> </u>		
C	Add lines 7a and 7b	CREATURE CONTRACTOR AND	NETS OF SET FORMARETS ASSESSMENT	GIATERIO SE	STEERING STREET	MARGERTAN CONTRACTOR	
8	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support	_		,			
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6				ļ		
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						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned 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)	L	L.,				
14	First five years. If the Form 990 is for the organization, check this box and stop here	-	, second, third, four	th, or fifth tax year	as a section 501(c)	(3)	▶ [
Sec	tion C. Computation of Public Su		ane	· · · · · · · · · · · · · · · · · · ·		····	
15	Public support percentage for 2009 (line 8,			(ft)		15	%
16	Public support percentage from 2008 Sche	• • •	•	V//		16	%
$\overline{}$	tion D. Computation of Investme						
<u> </u>	investment income percentage for 2009 (li			column (fi)		17	%
18	Investment income percentage from 2008				• •	18	%
19a	33 1/3 % support tests—2009. If the orga				more than 33 1/3 %		
,	17 is not more than 33 1/3 %, check this be						▶ [
b	33 1/3 % support tests—2008. If the orga						_
-	line 18 is not more than 33 1/3 %, check th	ns box and stop h	ere. The organization	on qualifies as a pu	ublicly supported on	ganization	. ▶[
20	Private foundation. If the organization did						▶ [

Schedule A (Fo	orm 990 or 990-EZ) 200			OF ANNAPOLIS		
PERMIT	Supplemental Ir Part II, line 17a	nformation. Com or 17b; and Part	plete this part to III, line 12. Prov	provide the explant de any other addition	ations required by Part onal information. See i	II, line 10; nstructions.
•						
	••	•				
		•			٠	
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•	•		•	• • • •		•
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	• • •					
				• • • •		
•						
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•						

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.

OMB No 1545-0047

	of the organization		Employer	Identification number
_	DYS & GIRLS CLUB OF ANNAPOLIS ND ANNE ARUNDEL COUNTY, INC.		52-1	736346
	Organizations Maintaining Donor Advised Fund the organization answered "Yes" to Form 990, P	ds or Other Similar Funds or Ac		
		(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	ne assets held in donor advised		
	funds are the organization's property, subject to the organization's exclus			Yes No
6	Did the organization inform all grantees, donors, and donor advisors in wr	•		
	used only for chantable purposes and not for the benefit of the donor or d	onor advisor, or for any other		
	purpose conferring impermissible private benefit?			Yes No
	Conservation Easements. Complete if the organ	nization answered "Yes" to Form	990, Pa	rt IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check at			
	Preservation of land for public use (e.g., recreation or pleasure)	Preservation of an historically imp	ortant land	area
	Protection of natural habitat	Preservation of certified historic st	ructure	
	Preservation of open space	_		
2	Complete lines 2a through 2d if the organization held a qualified conserva	ition contribution in the form of a conservat	tion	
	easement on the last day of the tax year			
				Held at the End of the Tax Year
a	Total number of conservation easements		2a	
Þ	Total acreage restricted by conservation easements		2b	
C	Number of conservation easements on a certified historic structure include	ed in (a)	. 2c	
d	Number of conservation easements included in (c) acquired after 8/17/06		2d	<u></u>
3	Number of conservation easements modified, transferred, released, extin	guished, or terminated by the organization	during	
	the taxable year ▶			
4	Number of states where property subject to conservation easement is loc	ated >		
5	Does the organization have a written policy regarding the periodic monito	ring, inspection, handling of		
	violations, and enforcement of the conservation easements it holds?	••		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing	g conservation easements during the year		
	-			
7	Amount of expenses incurred in monitoring, inspecting, and enforcing cor	nservation easements during the year		
	> \$			
8	Does each conservation easement reported on line 2(d) above satisfy the	e requirements of section		
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIV, describe how the organization reports conservation easemer			
	balance sheet, and include, if applicable, the text of the footnote to the on	ganization's financial statements that desc	ribes	
177	the organization's accounting for conservation easements	Notesiani Transverse or Other Si	mila- Aa	
······································	Organizations Maintaining Collections of Art, I Complete if the organization answered "Yes" to	Form 990 Part IV line 8	IIIIIai As	, ser.
4.5	If the organization elected, as permitted under SFAS 116, not to report in		works of	
ıa	art, historical treasures, or other similar assets held for public exhibition,) .
	provide, in Part XIV, the text of the footnote to its financial statements tha			•
ь	If the organization elected, as permitted under SFAS 116, to report in its		s of art,	
_	historical treasures, or other similar assets held for public exhibition, educ			
	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 treasures, or or	ther similar assets for financial gain, provid	e the	
_	following amounts required to be reported under SFAS 116 relating to the			
а	Revenues included in Form 990, Part VIII, line 1		, >	\$
ь	Assets included in Form 990, Part X		►	\$
_				

		TO CTOR OF W	INAPOLIS	52-1/36346	Page 2
BE	Organizations Maintaining C	ollections of Art, His	storical Treasures, o	r Other Similar Asse	ts (continued)
3	Using the organization's acquisition, accession, a collection items (check all that apply):	and other records, check a	ny of the following that are a	a significant use of its	
8	Public exhibition	d Loan or	exchange programs		
b	Scholarly research	e Other			
c	Preservation for future generations				_
4	Provide a description of the organization's collect Part XIV.	tions and explain how they	further the organization's e	xempt purpose in	
5	During the year, did the organization solicit or recassets to be sold to raise funds rather than to be			nilar	Yes No
Ì	Escrow and Custodial Arran	gements. Complete	if the organization an	swered "Yes" to Form	n 990, Part
	IV, line 9, or reported an amo	unt on Form 990, Pa	art X, line 21.		
1a	Is the organization an agent, trustee, custodian of			not	
	included on Form 990, Part X?				Yes No
b	If "Yes," explain the arrangement in Part XiV and	complete the following tab	ole.	· ·	
					Amount
C	Beginning balance			1c	
d	Additions during the year			1d	
0	Distributions during the year		, ,	1e	
f	Ending balance	• •	• •	1f	<u></u>
2a	Did the organization include an amount on Form	990. Part X. line 21?			Yes No
	If "Yes," explain the arrangement in Part XIV		•		
-	Endowment Funds. Complet	e if organization ans	wered "Yes" to Form	990, Part IV, line 10.	
<u> </u>	1	(a) Current year		years back (d) Three years	back (e) Four years back
1a	Beginning of year balance	1,309,545	1,669,065		
b	Contributions		100,329		
c	Net investment earnings, gains,		graph in		
_	and losses		-9,215		
d	Grants or scholarships				
	Other expenditures for facilities				No.
·	and programs	1,309,545	-450,634		
f	Administrative expenses		25.00		
a	End of year balance		1,309,545		
2	Provide the estimated percentage of the year en	d balance held as.	, , , , , , , , , , , , , , , , , , , ,		
8	Board designated or quasi-endowment ▶	%			
b		'			
c	Term endowment ▶ %				
38	Are there endowment funds not in the possession	n of the organization that a	are held and administered fo	or the	
	organization by.				Yes No
	(i) unrelated organizations				3a(i) X
	(ii) related organizations			•	3a(ii) X
ь	If "Yes" to 3a(ii), are the related organizations lis	ted as required on Schedu	ile R?		3b
4	Describe in Part XIV the intended uses of the on	•	,		
	Investments—Land, Building	s, and Equipment.	See Form 990, Part >	K, line 10.	
	Description of investment	(a) Cost or other basis	(b) Cost or other	(c) Accumulated	(d) Book value
	•	(investment)	basis (other)	depreciation	
18	Land			EFFECT OF THE STATE OF	
	Buildings		2,579,734	244,982	2,334,752
	Leasehold improvements	<u> </u>			
đ			395,833	316,033	79,800
	Other		1		
	il. Add lines 1a through 1e. (Column (d) must equa	at Form 990, Part X, colum	n (B), line 10(c).)	<u> </u>	2,414,552

Part	brm 990) 2009 BOYS & GIRLS CLUB OF A		<u>52-1736346</u>	Page 3
	Investments—Other Securities. See Form 990,	Part X, line 12.		·
	(a) Description of security or category	(b) Book value	(c) Method of	
	(including name of security)		Cost or end-of-yea	r market value
Financial deriv				
Closely-held e	quity interests			
Other				
				
				
				
				1525 TAC MAR ESTATE ASSESSMENT STREET
	n (b) must equal Form 990, Part X, col (B) line 12.)	<u> </u>		
PartVIII	Investments—Program Related. See Form 990			
	(a) Description of investment type	(b) Book value	(c) Method of	
			Cost or end-of-yea	r market value
				<u>.</u>
			····	
				 -
		,,		
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			and the same was the same of t	Challed the miles and a make
	n (b) must equal Form 990, Part X, col. (B) line 13.)	<u> </u>	小学院等的证明	
PatiX	Other Assets. See Form 990, Part X, line 15.			(h) Daak value
	(a) Description			(b) Book value
_				
Total (Colum	n (h) must equal Form 990, Part X, col. (R) line 15.)			
	n (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. See Form 990, Part X, line 25		•	
ParkX	Other Liabilities. See Form 990, Part X, line 25		>	
Part X 1	Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability	(b) Amount		
ParkX	Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability			
Part X 1	Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability			
Part X 1	Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability			
Part X 1	Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability			
Part X 1	Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability			
Part X 1	Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability			
Part X 1	Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability			
Part X 1	Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability			
Part X 1	Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability			
Part X 1	Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability			

	dule D (Form 990) 2009 BOYS & GIRLS CLUB OF ANNAPOLI	<u>s</u>	52-17363	46	Page 4
Pa	Reconciliation of Change in Net Assets from Form 990 to	Audit	ted Financial Staten	nents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			11	1,032,622
2	Total expenses (Form 990, Part IX, column (A), line 25)		•	2	1,590,833
3	Excess or (deficit) for the year. Subtract line 2 from line 1		•	3	-558,211
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities		•	5	
6	Investment expenses			6	· ·
7	Pnor penod adjustments	•		7	
8	Other (Describe in Part XIV.)	•	•	8	
9	Total adjustments (net). Add lines 4 through 8	• •	•••	9	
-	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			10	-558,211
10 Da		nte W	ith Payanua par Pa		-330,211
	Reconciliation of Revenue per Audited Financial Stateme	1165 11	itti Kavattua bai Ka	Lum	1,032,622
1	Total revenue, gains, and other support per audited financial statements			1 1 1 1 1 1 1 1 1	1,032,622
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	1	I	A 20	
а	Net unrealized gains on investments	2a			
þ	Donated services and use of facilities	2b	<u> </u>		
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	<u>2d</u>	<u> </u>		
0	Add lines 2a through 2d			20	
3	Subtract line 2e from line 1	,	ſ	3	1,032,622
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
c	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,032,622
P	Reconciliation of Expenses per Audited Financial Statem	ents \	With Expenses per	Return	
1	Total expenses and losses per audited financial statements			1	1,590,833
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
ď	Other (Describe in Part XIV.)	2d			
_	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	1,590,833
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	.]	1		
٠,	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
a .	•	4b			
0	Other (Describe in Part XIV.)	_ 70		4c	
c	Add lines 4a and 4b			5	1,590,833
- 6	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			[8]	1,330,033
	Supplemental Information	. 4	4.0-4.04.046		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, line				
	b, Part V, line 4, Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines	s 2d an	d 4b Also complete		
this p	art to provide any additional information.				
				- - -	
				- - -	
			-		
		· - -			
		. _ -			
_					

Schedule D (Fo	orm 990) 2009	BOYS &	GIRLS CLUB	OF ANNAPOLIS	52-1736346	Page 5
PERTYPLE	Supplem	ental Informa	ition (continued)			
					. -	
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					_ -	
						
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	- 					
						
	-	-				
				 _	- 	

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service Name of the organization

BOYS & GIRLS CLUB OF ANNAPOLIS

Employer Identification number

AND ANNE ARUNDEL COUNTY, INC. 52-1736346 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Internet and email solicitations f Solicitation of government grants Special fundraising events Phone solicitations In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (III) Did fund-(I) Name of individual (II) Activity (iv) Gross receipts (v) Amount paid to (vi) Amount paid to raiser have from activity (or retained by) (or retained by) or entity (fundraiser) custody or fundraiser listed in organization control of col (i) Yes No List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

	more ti	nan \$15	<u>,000 o</u>	n Form 990-	EZ, line	<u>6a. L</u>			s rece			5,000.
		(a) Event #1 SPECIAL EVENTS			(b) Even	t #2		(c) Other	events	(d) Total events		
			SPE		ENTS				<u>N</u>	ONE		(add col (a) through
92				(event type)			(event ty)		(total nui	nber)	col (c))
Revenue	1 Gross receipts 2 Less Charitable	_		18	6,335							186,335
	contributions			11	1,125							111,125
	3 Gross revenue minus line 2)	(line 1		7	5,210				_ _		· · · · · · · · · · · · · · · · · · ·	75,210
	4 Cash prizes										· V	
	5 Noncash prizes											
enses	6 Rent/facility cos	sts								·		
Direct Expenses	7 Food and beve	rages							+-			
٥	8 Entertainment											
	9 Other direct ex	penses		7	5,210							75,210
	10 Direct expense	summary	Add lin	es 4 through 9 in	n column (d)) .					. •	75,210
	11 Net income sur	nmary Co	mbine li	ne 3, column (d)	, and line 1	0	J 457 - 7 4 -	<u></u>	<u> </u>		10	
-717				the organiza m 990-EZ, lir		were	ed Tes to	Form 99	u, Pan	iv, line	19, or repo	orted more
<u>Ф</u>				(a) Bingo			(b) Pull tabs			(c) Other g	iamino	(d) Total gaming (Add
Revenue	l			(4) 2			bingo/progress	rve bingo				col (a) through col (c))
~ —	1 Gross revenue						····					
ses	2 Cash prizes								_			
Expen	3 Noncash prizes	,						<u> </u>				
Direct Expenses	4 Rent/facility cos	sts .					. =-	····	-			
	5 Other direct ex	penses					<u></u>			.		
	6 Volunteer labor			Yes No	. %		Yes No	%	,	Yes No	%	
	7 Direct expense	summary	Add lin	es 2 through 5 ir	n column (d) .					•	<u> </u>
	8 Net gaming inc	ome sumn	nary Co	ombine line 1, co	lumn d, and	line 7	<u> </u>		•			
9	Enter the state(s) in		-				e states?					Yes No
b												
10a		ganization'	's gamin	g licenses revok	ed, suspen	ded or	terminated d	uring the tax	k year?			10a
11 12	Does the organization						per of a partne	 ership or oth	 er entitv			11
_	formed to administr				a nust of a							12
DA	1									S	icnedule G (Form 990 or 990-EZ) 2009

Sche	BOYS & GIRLS CLUB OF ANNAPOLIS	52-1736346	Page -
	•	1 1 9	Yes No
13	Indicate the percentage of gaming activity operated in:		
a	The organization's facility	13a %	
b	An outside facility	13b %	
14	Provide the name and address of the person who prepares the organization's gaming/special events books		y, a b k-
	and records:		
	Name •		
	Address >		
15a	Does the organization have a contract with a third party from whom the organization receives gaming	3	
	revenue?		15a
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$	and the	
	amount of gaming revenue retained by the third party ▶ \$		
C	If "Yes," enter name and address of the third party:		
	Name		
			241
	Address >	S.	
16	Gaming manager information		THE PROPERTY.
	Name ▶		AVI.
	Gaming manager compensation ▶ \$		
	Description of services provided ▶		
	Director/officer Employee Independent contractor		
		4	
17	Mandatory distributions		
"a	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
-	retain the state gaming license?		17a
ь	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
J	in the organization's own exempt activities during the tax year.	** & ! !	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

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

► See the Instructions for Form 990.

2009

Department of the Treasury Internal Revenue Service Name of the Organization

BOYS & GIRLS CLUB OF ANNAPOLIS AND ANNE ARUNDEL COUNTY, INC.

Employer Identification number 52-1736346

Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated (A) (B) (C) (D) (F) Average hours Position (check all that apply) Reportable Reportable Estimated Name and Trile per week Individual trustee or director Highest compensa employee compensation compensation amount of Officer institutional trustee Key employee from related from other compensation the organizations (W-2/1099-MISC) from the organization (W-2/1099-MISC) and related organizations PATTI O. WHITE **MEMBER** 1.00 X 0 0 0 PETE PONNE TREASURER 1.00 X X 0 0 0 PETER SUMMERS PRESIDENT 1.00 X x 0 0 0 RICHARD HEGSTROM 0 0 VICE PRESIDENT 1.00 X 0 SANDY STEPHENS 0 MEMBER 1.00 X 0 0 SCOTT DOUGLAS MEMBER 1.00 X 0 0 0 STEVE KLING X 0 0 MEMBER 1.00 0 SUSAN STEELE 0 0 MEMBER 1.00 X 0 THOMAS O'BRIEN 0 X 0 MEMBER 1.00 0 TONYA HILL 0 0 1.00 X 0 MEMBER REGINALD BRODDIE 0 X 85,096 40.00 11,528 EXEC DIR

SCHEDULE O (Form 990)

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.

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service Name of the organization

BOYS & GIRLS CLUB OF ANNAPOLIS AND ANNE ARUNDEL COUNTY, INC.

Employer Identification number 52-1736346

FORM 990, PART III, LINE 4A - FIRST ACHIEVEMENT
SPORTS BY AGE 10, HER CHANCES OF PARTICIPATING BY THE TIME
SHE IS 25 ARE LESS THAN 10 PERCENT. B&GCA WANT TO ASSIST
AND GUIDE CLUBS IN MAKING THEIR SPORTS AND FITNESS
PROGRAMS MORE EQUITABLE FOR GIRLS. THE GIRLS SPORTS
PROGRAM PROVIDES GRANTS, TRAINING, AND DEVELOPMENT
RESOURCES, COLLABORATION, AND PROGRAMS.
SUMMER SPORTS CAMP - SUMMER SPORTS CAMPS ARE DESIGNED TO
ADVANCE THE SKILLS OF ATHLETE-MEMBERS IN THE OFF-SEASON BY
WAY OF MENTOR-GUIDED PRACTICE, AND GAME PLAY.
SAILING CAMP - THE SAILING CAMP OFFERS A WEEK LONG
RESIDENTIAL PROGRAM FOR BOTH ADVANCED AND BEGINNING
SAILORS, FOR MEMBERS AGES 12-15. MEMBERS RECEIVE GROUP
AND INDIVIDUAL SAILING INSTRUCTION, AS WELL AS TEAM
BUILDING EXERCISES AND LIFE SKILLS.
STUDY HALL FOR ATHLETES - STUDY HALL FOR ATHLETES IS A
REQUIRED AFTER SCHOOL TUTORIAL PROGRAM DESIGNED FOR
MEMBERS WHO PARTICIPATE IN VARIOUS SPORTS TEAMS.
STUDENT-ATHLETE MEMBERS ARE REQUIRED TO LOG-IN AT LEAST 3
DAYS OF TUTORIAL INSTRUCTION PRIOR TO GAME DAY.
JR NBA WNBA FALL/WINTER BASKETBALL LEAGUE - THIS IS AN
INTER-CLUB BASKETBALL LEAGUE FOR BOYS AND GIRLS AGES 12
-13. BOTH PRACTICES AND GAMES ARE HELD TWICE WEEKLY. THE
OBJECTIVE OF THE INTER-CLUB LEAGUE IS TO OFFER FITNESS,
LEADERSHIP AND TEAM PLAY, AS WELL AS ACADEMIC ENRICHMENT.

SPORTS CLUB - SPORTS CLUBS FOCUS ON HEALTHY LIFESTYLES AND LEADERSHIP DEVELOPMENT. THEY HAVE THE UNIQUE RESPONSIBILITY OF DESIGNING PROGRAMS AND ACTIVITIES THAT MEET SPECIFIC NEEDS. AN EFFECTIVE SPORTS CAMP PROGRAM ADDRESSES NOT ONLY THE GROUP'S IMMEDIATE INTERESTS, BUT ITS LONG-TERM GOALS AS WELL.

BOYS AND GIRLS CLUBS FITNESS QUEST - THIS PROGRAM CONSISTS
OF A SET OF VARIOUS CALISTHENICS THAT ALLOW MEMBERS THE
OPPORTUNITY TO DOCUMENT THEIR FITNESS PROGRESS ON A DAILY
BASIS. THE MEMBER'S SUCCESS IS DEPENDENT UPON HIS OR HER
OWN FITNESS IMPROVEMENT, AND SELF-SET GOALS THAT ARE
REACHED.

GAMES ROOM - THIS IS A FRIENDLY, COMPETITIVE PROGRAM THAT SEEKS TO IMPROVE THE MEMBER'S ABILITY TO SOCIALIZE IN A POSITIVE MANNER. THE GAMES ROOM CONSISTS OF A POOL TABLE, PING-PONG TABLE, AIR HOCKEY, AND FOOSBALL. MEMBERS ARE TAUGHT THE FUNDAMENTALS OF THE GAMES, AND ARE ALSO GRANTED THE OPPORTUNITY TO ADVANCE THEIR SKILLS, ULTIMATELY COMPETING IN CLUB AND REGIONAL TOURNAMENTS.

SPORTS SUMMIT - THIS SPRING EVENT THAT OFFERS A WIDE

ARRAY OF SPORTS CLINICS FOR BOYS AND GIRLS AGES 6-18 IS A

UNIQUE COMBINATION OF BOTH ATHLETICS AND COLLEGE

COUNSELING. THE CLINICS ARE ADMINISTERED BY LOCAL HIGH

SCHOOL AND COLLEGE COACHES. THEY CONSIST OF FLAG FOOTBALL,

TENNIS, HANDBALL, RUGBY, BASKETBALL, SOCCER, GIRLS VOLLEY

BALL AND LACROSSE. PARTICIPANTS ARE GIVEN THE OPPORTUNITY

TO MEET WITH COLLEGE ADMISSIONS OFFICERS, AND

FINANCIAL-AID COUNSELORS TO DISCUSS COLLEGE PLANNING.

TRIPLE PLAY SPORTS TRIVIA COMPETITION - THIS IS A ONE-DAY SPORTS TRIVIA COMPETITION, ORGANIZED AND IMPLEMENTED BY

VARIOUS NIKE SWOOSH CLUBS. MEMBER'S KNOWLEDGE AND

APPRECIATION OF SPORTS HISTORY ARE CONSIDERABLY BROADENED.

MEMBERS ARE ENCOURAGED TO LEARN ABOUT SPORTS HISTORY WITH

THE GOAL

OF WINNING \$500.00 THAT WILL UNDERWRITE THE COST OF

ATTENDING THE NIKE SPORTS LEADERSHIP CAMP.

TRIPLE PLAY LEADERSHIP CAMP - TRIPLE PLAY LEADERSHIP CAMPS

ARE ANNUAL FUN-FILLED SKILL AND LEADERSHIP DEVELOPMENT

EVENTS HELD REGIONALLY ON COLLEGE CAMPUSES FOR NIKE SWOOSH

CLUB MEMBERS AND THEIR ADVISERS.

arts

FINE ARTS EXHIBIT PROGRAM - THIS PROGRAM ENCOURAGES

CREATIVITY THROUGH A VARIETY OF MEDIA, AND IS MADE UP OF

LOCAL, REGIONAL, AND NATIONAL EXHIBITS. YOUNG PEOPLE ARE

ENCOURAGED TO CREATE ARTWORK IN ANY OF THE FOLLOWING

CATEGORIES: MONOCHROMATIC DRAWING, MULTICOLORED DRAWING,
PASTELS, WATER COLOR, OIL OR ACRYLIC, PRINT MAKING, MIXED

MEDIA, COLLAGE AND SCULPTURE. THE MOST OUTSTANDING WORKS

ARE SENT ON FOR REGIONAL JUDGING; SELECTED REGIONAL

ARTWORK GOES ON FOR NATIONAL JUDGING. ARTWORK SELECTED BY

NATIONAL JUDGES IS DISPLAYED AT BEGCA'S ANNUAL NATIONAL

CONFERENCE.

NATIONAL PHOTOGRAPHY CONTEST - THIS ANNUAL CONTEST

ENCOURAGES BOYS AND GIRLS TO LEARN AND PRACTICE

PHOTOGRAPHY, EXPRESSING THEM IN CREATIVE AND UNUSUAL WAYS.

THE PROGRAM PROVIDES BOTH LOCAL RECOGNITION AND NATIONAL

AWARDS. WINNING PHOTOS ARE DISPLAYED AT B&GCA'S ANNUAL

NATIONAL CONFERENCE.

DANCE PROGRAM - THIS PROGRAM IS DESIGNED FOR FEMALE

MEMBERS, AGES 6-18. OVER A SEVENTEEN-WEEK PERIOD, MEMBERS

LEARN VARIOUS FORMS OF DANCE, INCLUDING BALLET, TAP,

AFRICAN, JAZZ, AND MODERN. EACH OF THE FIVE GROUPS HAVE A

DANCE GROUP, AND AT THE END OF THE PROGRAM, MEMBERS FROM

ALL THE GROUPS COMBINE THEIR SKILLS TO COMPOSE A

PERFORMANCE THAT THE COMMUNITY IS INVITED TO WATCH AND

ENJOY.

ART YOUTH SUMMIT - THIS PROGRAM IS A ONE-DAY CONCENTRATION
ON MANY DIFFERENT AREAS OF ARTISTIC EXPRESSION. MEMBERS
WILL EXPLORE THE WORLD OF ART AND EXPRESSION THROUGH
WORKSHOPS AND ONE-ON-ONE CONVERSATIONS WITH LOCAL ARTISTS
AND PERFORMERS.

HEALTH AND LIFE SKILLS

SMART MOVES - THE SMART MOVES (SKILLS MASTERY AND RESISTANCE TRAINING) PREVENTION/EDUCATION PROGRAM ADDRESSES THE PROBLEMS OF DRUG AND ALCOHOL USE AND PREMATURE SEXUAL ACTIVITY. BASED ON PROVEN TECHNIQUES, THE PROGRAM USES A TEAM APPROACH INVOLVING CLUB STAFF, PEER LEADERS, PARENTS AND COMMUNITY REPRESENTATIVES. MORE THAN SIMPLY EMPHASIZING A "SAY NO" MESSAGE, THE PROGRAM TEACHES YOUNG PEOPLE AGES 6-15 HOW TO SAY NO BY INVOLVING THEM IN DISCUSSION AND ROLE-PLAYING, PRACTICING RESISTANCE AND

REFUSAL SKILLS, DEVELOPING ASSERTIVENESS, STRENGTHENING
DECISION-MAKING SKILLS AND ANALYZING MEDIA AND PEER
INFLUENCE. THE ULTIMATE GOAL: TO PROMOTE ABSTINENCE FROM
SUBSTANCE ABUSE AND ADOLESCENT SEXUAL INVOLVEMENT THROUGH
THE PRACTICE OF RESPONSIBLE BEHAVIOR.

SMART GIRLS - AN OUTGROWTH OF THE POPULAR AND EFFECTIVE
SMART MOVES PROGRAM, SMART GIRLS IS A HEALTH, FITNESS,
PREVENTION/EDUCATION AND SELF-ESTEEM ENHANCEMENT PROGRAM
FOR GIRLS AGES 10-15. THE PROGRAM IS DESIGNED TO ENCOURAGE
HEALTHY ATTITUDES AND LIFESTYLES THAT WILL ENABLE EARLY
ADOLESCENT GIRLS TO DEVELOP TO THEIR FULL POTENTIAL. THE
BRISTOL-MYERS SQUIBB FOUNDATION, INC SPONSORS THE SMART
GIRLS PROGRAM.

ACT SMART - DEVELOPED AS A JOINT PROJECT BETWEEN BOYS & GIRLS CLUBS OF AMERICA AND THE AMERICAN RED CROSS, ACT SMART IS AN HIV/AIDS PREVENTION PROGRAM DESIGNED FOR CLUB MEMBER'S AGES 6-17.

KIDS IN CONTROL - KIDS IN CONTROL IS A 15-SESSION SAFETY
AWARENESS PROGRAM DESIGNED TO HELP CLUB MEMBERS AGES 8-10
DEVELOP THE PERSONAL SAFETY HABITS AND PRACTICAL SKILLS
NEEDED TO BE SAFE AT THE CLUB, AT HOME AND IN THE
NEIGHBORHOOD. THE PROGRAM OFFERS INTERACTIVE APPROACHES TO
BUILDING CLUB MEMBERS' CRIME PREVENTION AND PERSONAL
SAFETY SKILLS THROUGH ROLE-PLAYING, GAMES AND OTHER
PARTICIPATORY ACTIVITIES. KIDS IN CONTROL ARE SPONSORED BY
BRINK'S HOME SECURITY, INC.

STREET SMART - BOYS & GIRLS CLUB OF AMERICA'S STREET SMART

AGES

INITIATIVE, FUNDED BY THE ALLSTATE FOUNDATION, CONSISTS OF THREE COMPONENTS DESIGNED TO HELP YOUNG PEOPLE AGES 11-13

EFFECTIVELY RESIST GANGS AND VIOLENCE, RESOLVE CONFLICTS,

AND BE POSITIVE PEER HELPERS IN THEIR COMMUNITIES. IT ALSO

ALLOWS THEM THE OPPORTUNITY TO HOLD ANNUAL EVENTS THAT

CELEBRATE ANTI-GANG, ANTI-VIOLENCE THEMES. STREET SMART

SERVES AS THE NATIONAL PROJECT FOR TORCH CLUBS ANNUALLY,

AND IS AVAILABLE FOR ALL BOYS & GIRLS CLUBS TO USE.

QUICK SMART - THIS IS A PREVENTATIVE PROGRAM FOR TEENS

13-18 TO REFUSE STEROIDS, TOBACCO, ALCOHOL, AND OTHER
DRUGS AND PREMATURE SEXUAL INVOLVEMENT. THIS PROGRAM ALSO
DEALS WITH HIV/AIDS PREVENTION.

TODAY'S YOUTH CULTURE NEWS LETTER - THIS IS A QUARTERLY NEWSLETTER THAT IS WRITTEN, EDITED, AND FORMATTED BY MEMBERS. THE NEWSLETTER IS AN INFORMATIONAL HEALTH PUBLICATION THAT KEEPS THE MEMBERS INFORMED OF ISSUES DEALING WITH STEROIDS, TOBACCO, ALCOHOL, OTHER DRUGS, AND PREMATURE SEXUAL INVOLVEMENT. THIS PUBLICATION GIVES MEMBERS THE OPPORTUNITY TO IMPROVE AND ENHANCE THEIR WRITING, EDITING, AND TIME-MANAGEMENT SKILLS.

HEALTH AND LIFE SKILLS SUMMIT - THIS IS A ONE- DAY HEALTH SUMMIT HELD TO ADDRESS VARIOUS HEALTH ISSUES THAT AFFECT OUR COMMUNITIES ON A DAILY BASIS. WORKSHOPS FOCUS ON AREAS SUCH AS TEEN SMOKING, TEEN PREGNANCY, HIV/AIDS, AND THE NEGATIVE EFFECTS OF DRUGS. THIS PROGRAM'S AIM IS TO EDUCATE MEMBERS SO THAT THEY MAY HAVE THE ABILITY TO MAKE

POSITIVE, INFORMED DECISIONS.

KIDS CAFÉ PROGRAM - THIS PROGRAM TAKES A UNIQUE APPROACH
TO EDUCATING MEMBERS ON THE ISSUES OF DINING ETIQUETTE,
NUTRITION AND SOCIAL INTERACTION. ITS PARTICIPANTS RANGE
FROM THE AGES OF 6-13, AND INTERACTIVE SEMINARS ARE HELD
TWICE MONTHLY. THIS PROGRAM PARTNERS WITH THE EMPLOYEES OF
IIT RESEARCH WHO PRODUCE AN EMPLOYEE COOKBOOK WHICH INTERN
CHILDREN SELECT VARIOUS MEALS TO PREPARE, WITH THE HELP OF
THE EMPLOYEES.

EDUCATION

GOALS FOR GROWTH - THIS PROGRAM TEACHES YOUNG PEOPLE AGES 8-12 SKILLS FOR SETTING AND ACHIEVING THEIR OWN PERSONAL, EDUCATION AND CAREER GOALS. THE GOALS FOR GROWTH PROGRAM IS SPONSORED BY BEST BUY'S CHILDREN'S FOUNDATION.

PROJECT LEARN - PROJECT LEARN REINFORCES AND ENHANCES THE SKILLS AND KNOWLEDGE YOUNG PEOPLE LEARN AT SCHOOL THROUGH "HIGH-YIELD" LEARNING ACTIVITIES AT THE CLUB AND IN THE HOME. BASED ON DR. REGINALD CLARK'S RESEARCH THAT SHOWS FUN, BUT ACADEMICALLY BENEFICIAL ACTIVITIES INCREASE ACADEMIC PERFORMANCE, THESE ACTIVITIES INCLUDE LEISURE READING, WRITING ACTIVITIES, HOMEWORK HELP, AND GAMES LIKE SCRABBLE WHICH DEVELOP YOUNG PEOPLE'S COGNITIVE SKILLS.

PROJECT LEARN EMPHASIZES COLLABORATIONS BETWEEN CLUB

FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM 990 NO REVIEW WAS OR WILL BE CONDUCTED.

BOYS & GIRLS CLUB OF ANNAPOLIS

Employer Identification number 52-1736346

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

THE POLICY IS DISCUSSED WITH AND SIGNED BY NEW MEMBERS, AND MONITORED BY

STRUCTURED COMMITTEE INVOLVEMENT.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL ANNUAL REVIEW OF EXECUTIVE DIRECTOR CONDUCTED BY THE PRESIDENT, VICE-PRESIDENT AND HUMAN RESOURCE CHAIRPERSON.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE INFORMATION WILL BE AVAILABLE UPON REQUEST AND ON OUR WEBSITE
WWW.BGCAA.COM BEGINNING IN 2009.

Forms	Moi	rtgages and Oth	ner Notes Payable		2009
00,87 000-11	For calendar year 2009,	or tax vear beginning	07/01/09 , and ending	06/30/10	2005
Name	<u> </u>			Employer Identific	ation Number
	CLUB OF ANNAPO	DLIS			
AND ANNE ARUN	DEL COUNTY, IN	ic.	· · · · · · · · · · · · · · · · · · ·	52-17363	16
50514 000 515					
FORM 990, PAR	RT X, LINE 23 -	- ADDITIONAL	INFORMATION		
	Name of lender		Relationship	o disqualified person	
1) ARUNDEL COM	MUNITY DEVELOR	MENT SERVIC	Treatonship i	o disqualined person	
2)					
3)					
4)					
5)					
6)					
7)			 		
8)					
9)			 		
10)					a dayan g
		A STATE OF THE PROPERTY OF THE PERSON OF THE	A STATE OF THE PROPERTY OF THE		A-AA
Original amount borrowed	Date of loan	Maturity date	Repayment terr	ns	Interest rate
1) 2,150,0		03/01/11	SEMI-ANN. INTRS		4.000
2)					
3)					
4)					
5)		ļ			-
6)					
7)		 			
8)			 		
9)		 	 		+
NO THE RESERVE AND ADDRESS OF THE RESERVE AND AD			MARKET AND THE PARTY.	Application of the control	1. 583 L - San
The state of the s	ligad all Clieb in Survey and resource of the Military has been and seems	and the little of the second second section to the second			11. 1 S. F
S	ecunty provided by borrower		Purp	ose of loan	
1)					
2)					
3)					·
(4)				 	
5)	 		· · · · · · · · · · · · · · · · · · ·		
6)					
(7)			 		
(8) (9)			 		
(10)					
COMPANY OF THE PARTY OF			The state of the s		المراجعة ا المراجعة المراجعة ا
			Balance due at	Balanc	e due at
Conside	eration furnished by lender		beginning of year	end e	of year
(1)			920,000		353,701

920,000

353,701

(2) (3) (4) (5) (6) (7) (8) (9) (10)

Totals