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# Form **990**

# **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public

Inspection

7	Α	For the	2009 ca	alendar	year, or tax y	ear beginning	July 1	, 20	09, and end	ding	Jun	e 30	, 20	10	
i	ВС	heck if a	oplicable	Please	C Name of orga	anization BOY	AND GIRLS	CLUBS OF	PUERTO	RICO	INC.	D Emp	oloyer ident	ification n	umber
ĺ	_	ddress		use IRS label or	Doing Busine	ss As						66		032758	4
[	_	lame ch	•	print or	Number and str	reet (or PO box if	mail is not delivered t	to street address	i) Room/	/suite		E Tele	phone num	ber	
[	_	ntial retu	_	type See	P.O. BOX 7				[			( 787	)	268-450	4
[	□т	erminate	ed	Specific Instruc-		state or country									
(		mended	return	tions.		PR 00984-9						<b>G</b> Gros	s receipts \$	5,21	3,606
[		pplication	n pending	F Nan	ne and address	of principal office	er			н	l(a) Isthus	a group re	eturn for affiliati	≋ <sup>7</sup> □Yes	<b>√</b> No
-				<u> </u>						н	l(b) Are a	all affiliate	es included	, ∐Yes	No
-			mpt status	<b>7</b> 5	501(c) ( <b>3</b> ) <b>⊲</b> (in	nsert no)	1947(a)(1) or	] 527					halist (see	nstruction	ns)
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ı			organization		oration L Trust L	Association L	Other ►	L	Year of form	nation	1967	M State	e of legal do	micile P	₹
J	Ρē	rt I	Summ				<del></del>		Ora	anizati	ion wa	creat	ed to pro	mote th	
		1 E	Briefly de	escribe	the organiza	tion's missio	n or most sign and character	ificant activ	* 10.00			<i></i>			
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	ivities & Governance	-	Ciubs ai	ie ioca	ited Within pt	Jone Housing	4 developmen	its of ficeu	iiig coiiiiii	unitico	<b>:</b>	·	<del></del> -	·	
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r.c.	<u> </u>				f∈volunteers (							6			121
_	K			- X-3			om Part VIII, c	olumn (C),	line 12.			7:	a		0
$I^{-}$							om Form 990-		<u> </u>	<u> </u>		. 71	b		0
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]	en e	8	Contribu	tions	nd grants (Pa	art VIII, line 1	n)				4,	435,29	7	5,21	3,606
L_	-				revenue (Pa								<b></b>		
-	<u>(3</u> (						lines 3, 4, and			.	-				
							5, 6d, 8c, 9c,					425 20			2 606
		·					t equal Part VIII		y, iiile 12 )	-	4,	435,29		5,21	3,606
		,					column (A), li		• •				_		
	S	l .	Benefits paid to or for members (Part IX, column (A), line 4)							2.	654,51	4	3.35	51,103	
	ens				•		mn (A), line 116		1163 5-10)				0		
	Expenses				•	•	(D), line 25) ▶	•	128,128						
	_						s 11a-11d, 11f				1,	467,42	3	1,78	31,348
							qual Part IX, c		 line 25)		4,	121,93	7	5,13	32,451
		19_F			penses Subti							313,36	0	8	31,155
	ets or and									Begin	ning of C	urrent Ye	ar E	nd of Yea	ır
	sets	20 7	Total ass	sets (Pa	art X, line 16)				•		1,	431 <u>,39</u>	2	1,78	33,400
,	A P				(Part X, line 2							<u>450,13</u>		72	20,985
7	ŽŽ					Subtract lin	e 21 from line	20	· · · · · · · · · · · · · · · · · · ·	<u> </u>		<u>981,26</u>	0	1,06	<u> 52,415</u>
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	Ма	y the I	IRS disc	uss the	s return with	the preparer	shown above	? (see ınstr	uctions)	<u> </u>			[	Yes	☐ No
	For	Privac	y Act an	nd Pape	rwork Reduct	ion Act Notic	e, see the sepa	rate instruc	tions.	C	at No 1	1282Y		Form <b>99</b> 0	0 (2009)

Par	Statement of Program Service Accomplishments
1	Briefly describe the organization's mission:  Organization was created to promote the health, social, educational, vocational, and character development of youth living in low income communities. Clubs are located within public housing developments or needing communities.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O  Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O  Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.  Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$2,092,606 including grants of \$2,099,509 ) (Revenue \$)  Public Housing Administration (Project Learn Program):  Project Learn is a comprehensive program that impacted 2,720 participants between the ages of 6 through 21, creating a fun and secured environment for the youth to develop their full potential as productive individuals giving them trainings to increase their knowledge of the alcohol, tobacco and other druds use, abuse and consequences.  For fiscal year 2009-2010, 100% of the work plan presented to PRPHA was accomplished. As a result, 62% of participants increase their general average of their academic grades; and 91% of participants were promoted or graduated. Also, 72% improved their conduct in the classroom.
4b	(Code ) (Expenses \$ 750,013 including grants of \$ 753,502 ) (Revenue \$ ) 21st Century Community Learning Centers: Project Learn is a program which main objective is to improve the academic progress, as well as the technology skills of participants. During fiscal year 2009-2010, 500 participants benefited from the program. Participants' ages fluctuates from 6 to 12 years old. At least 350 participants attented to a tutoring service that lasted 30 days or more. All participants improved their knowledge in alcohol, tobacco and other drugs prevention and in early sexual involvement consequences. 70% of participants improved their academic grades. Program provides positive options for after school hours including sports, recreational and cultural and arts activities. Regarding the communites
	served, 1,250 people benefited of more than 80 hours of educational and prevention activites; and another 1,564 people benefited of more than 20 hours of the same educational and prevention activites.
4c	(Code) (Expenses \$ 67,442 including grants of \$ 61,988 ) (Revenue \$)  OJP Mentorship and Leadership Programs:  Implemented BGCA core programming: Character and Leadership Development; Education and Career Development;  Health and Life Skills. In addition, the Arts and Sports, Fitness and Recreation programs have been established.
4d	Other program services. (Describe in Schedule O.) (Expenses \$ 963,404 including grants of \$ 1,391,179 ) (Revenue \$ )

Par	t 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	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	✓	
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		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		1
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III.	5		
6	Did the organization maintain any donor advised funds or any 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		✓
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		1
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		✓
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		1
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	✓	
•	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.			ĺ
•	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.	- 1 -	~, 	
•	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 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	✓	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  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		1
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<b>*</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		1
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		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	1	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		1
<u>20</u>	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		

Pa	rt 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		<b>✓</b>
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		1
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		/
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 Schedule K If "No," go to line 25	24a		<b>√</b>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<b>✓</b>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		✓
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<b>✓</b>
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		✓
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 Schedule L, Part I	25b		1
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		1
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? If "Yes," complete Schedule L, Part III.	27		<b>√</b>
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):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		<b>√</b>
С	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		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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		<b>✓</b>
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		1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		✓
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i>	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	1	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			<u> </u>	

Par	t 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 -U- if not applicable		- 1	
	Enter the number of Forms W-2G included in line to Enter to in not applicable .			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2a 149			
_	Statements, filed for the calendar year ending with or within the year covered by this return	2b	1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		<b>✓</b>
h	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		✓
h	If "Yes," enter the name of the foreign country: ▶		ŕ	
~	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	-	<b>-</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<b>-</b>
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	5c	i	
_	Prohibited Tax Shelter Transaction?	6a		1
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?			
<b>L</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
D	gifts were not tax deductible?	6b_		L
7	Organizations that may receive deductible contributions under section 170(c).		ı	_
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a 7b		<b>✓</b>
	If "Yes," did the organization notify the donor of the value of the goods or services provided? .	70		<del>                                     </del>
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		<b>✓</b>
	If "Yes," indicate the number of Forms 8282 filed during the year	1		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	ļ	1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<b>/</b>
9	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 required?.	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
Ū	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.		ļ	
а	Did the organization make any taxable distributions under section 4966?	9a		
b		9b	+	-
10	Section 501(c)(7) organizations. Enter:	1	1	
a	initiation lees and capital contributions included on Fart VIII, line 12	1		
b	Cross receipts, included on Form 550, Fart VIII, line 12, for public use of old has included	1		1
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders			
a	diss income non members of statemodes	7		
þ	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.   12b	<u>L.</u>		

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>Sec</u>	tion A. Governing Body and Management			
		- J. W.	Yes	No
1a	Enter the number of voting members of the governing body			1
b	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	2		
_	any other officer, director, trustee, or key employee?	2		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct			
3		3		1
	supervision of officers, directors or trustees, or key employees to a management company or other person?	4		7
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?			<del></del>
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		<del>-</del>
6	Does the organization have members or stockholders?	6		
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			,
	of the governing body?	<u>7a</u>		<u> </u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		<b>√</b>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	1890		and the
	the year by the following:	1	164	
а	The governing body?	8a	✓	
	Each committee with authority to act on behalf of the governing body?	8b	<b>√</b>	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
Ū	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		1
Sec	tion B. Policies (This Section B requests information about policies not required by the Inte			
	enue Code.)	,,,,a,		
11000	chae Odde.j		Yes	No.
		40-	res	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		
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		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11	<b>√</b>	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990	金色。		à tr
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	<b>\</b>	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
_	rise to conflicts?	12b	✓	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	1	
12		13	<u> </u>	7
13	Does the organization have a written whistleblower policy?	14		<del>'</del>
14	Does the organization have a written document retention and destruction policy?	A CONTRACTOR	ad'n.	v
15	Did the process for determining compensation of the following persons include a review and approval by	2.00	25.17	7.8
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	3.0	357	(20.00)
а	The organization's CEO, Executive Director, or top management official	15a	<b>✓</b>	
b	Other officers or key employees of the organization	15b	V	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	· 疾"	1	**
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			17 18
	with a taxable entity during the year?	16a		✓
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	* **C	* N	340
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	1	i i i	[ ]
	the organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	, , , , ,		
17	List the states with which a copy of this Form 990 is required to be filed PR			
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 Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of int	erest	
	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 reco	ords c	f the	
	organization ► Mario Medina - P.O. Box 79526, Carolina PR 00984		· · ·	_

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

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

- 1a Complete this table for all persons required to be listed. 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 did not co		any d	urr		011(0 2)	er, a	irec		/E)	(E)
(A) Name and Title	(B) Average	Posit	on t	•	•	that ap	ndv)	(D) Reportable	(E) Reportable	(F) Estimated
	Average hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	reportable compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Jose A. Campos-Fuste								123,636	o	0
Executive Director				✓	✓	✓		123,030	0	
Eduardo Carrera-Morales Operations Director				<b> </b> ✓	<b>√</b>			104,731	0	0
Mayra Diaz-Torres				<b>'</b>	<b> </b>		<u> </u>			
Program Director					✓		<u> </u>	55,067	0	0
Mario Medina-Vazquez Finance Director					<b>√</b>			71,842	0	0
Tania Perez-Rivera					Ť			40.000		
Human Resources Director					1			48,389	0	0
	-							_		
										<del> </del>

Par	VII Section A. Officers, Directors, Tru	stees, Key	Emp	loy	ees,	an	d Hig	hest	t Compensated	Employees (co	ntınued)
	(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title		Average hours per week	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
		<del></del> -									
		-									
				_							
1b	Total			•				<b>&gt;</b>			
2	Total number of individuals (including but reportable compensation from the organization)		to th	ose	list	ed	above	e) w	ho received m	ore than \$100,0	
3	Did the organization list any <b>former</b> office employee on line 1a? <i>If "Yes," complete S</i>	Schedule J	for s	uch	ınd	lvid	ual	•			Yes No
4	For any individual listed on line 1a, is the sthe organization and related organizations individual	greater tha	an \$1	50,0	000	? If	"Yes,	" co	mplete Sched	ule J for such	4
5	Did any person listed on line 1a receive services rendered to the organization? If "	or accrue	com	per	nsat	ion	from	any	unrelated org	anization for	5 1
Se	ction B. Independent Contractors										
1	Complete this table for your five highest c compensation from the organization.	ompensate	ed ind	dep	end	ent —	contr	acto	ors that receive	ed more than \$1	00,000 of
	(A) Name and business ad	dress					_		(B) Description of	services	(C) Compensation
NO	NE							+			
_								士			
								+			
2	Total number of independent contractors (more than \$100,000 in compensation from					d to	thos	e lıs	ted above) who	received	

Part	Part	VIII	Statement of Revenue					
Business Code   Business Code   Business Code   Business Code   Business Code   Code						Related or exempt function	Unrelated business	Revenue excluded from tax under sections
Business Code   Business Code   Business Code   Business Code   Business Code   Code	, grants mounts	b	Membership dues	23,607				
Business Code   Business Code   Business Code   Business Code   Business Code   Code	ıs, gifts imılar a	d	Related organizations . 1d					
Business Code   Business Code   Business Code   Business Code   Business Code   Code	ontribution od other s	f	All other contributions, gifts, grants, and similar amounts not included above					
2a b b de	<u> </u>	h	Total. Add lines 1a-1f		5,213,606			
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties  6a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss)  7a Gross amount from sales of assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)  8 Gross income from fundraising events (not including \$	e e			Business Code				
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties  6a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss)  7a Gross amount from sales of assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)  8 Gross income from fundraising events (not including \$	e Rever	١.	•••••					
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties  6a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss)  7a Gross amount from sales of assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)  8 Gross income from fundraising events (not including \$	2	С		i I			<del></del>	
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties  6a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss)  7a Gross amount from sales of assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)  8 Gross income from fundraising events (not including \$	Š	d	***************************************	1				
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties  6a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss)  7a Gross amount from sales of assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)  8 Gross income from fundraising events (not including \$	Program		All other program service revenue .					
(i) Real   (ii) Personal		3	Investment income (including dividend other similar amounts)	ds, interest, and				
b Less: rental expenses c Rental income or (loss) d Net rental income or (loss)  7a Gross amount from sales of assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) d Net gain or (loss)  8a Gross income from fundraising events (not including \$ a b Less: direct expenses b c Net income or (loss) from fundraising events.   9a Gross income from gaming activities. See Part IV, line 18 a b Less. direct expenses b c Net income or (loss) from gaming activities. See Part IV, line 19 a b Less. direct expenses b c Net income or (loss) from gaming activities.  10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory b miscellaneous Revenue Business Code  11a b a b Less code of line 11a -11d b b a least code of line revenue e Total. Add lines 11a -11d b		5		(ii) Personal				
7a Gross amount from sales of assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)  8a Gross income from fundraising events (not including \$		b	Less: rental expenses Rental income or (loss)					
Page 10		d		<del></del>				<del> </del> -
and sales expenses .  c Gain or (loss) d Net gain or (loss) .  Ba Gross income from fundraising events (not including \$		7a	Gross amount from sales of	(ii) Other				
of contributions reported on line 1c) See Part IV, line 18		С	and sales expenses . Gain or (loss) .					
9a Gross income from gaming activities. See Part IV, line 19 a b Less. direct expenses . b c Net income or (loss) from gaming activities . ▶  10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory . ▶  Miscellaneous Revenue Business Code  11a b c d All other revenue e Total. Add lines 11a-11d ▶	enne/	8a	events (not including \$					
9a Gross income from gaming activities. See Part IV, line 19 a b Less. direct expenses . b c Net income or (loss) from gaming activities . ▶  10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory . ▶  Miscellaneous Revenue Business Code  11a b c d All other revenue e Total. Add lines 11a-11d ▶	er Rev		See Part IV, line 18					
9a Gross income from gaming activities. See Part IV, line 19 a b Less. direct expenses . b c Net income or (loss) from gaming activities . ▶  10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory . ▶  Miscellaneous Revenue Business Code  11a b c d All other revenue e Total. Add lines 11a-11d ▶	듔							
b Less direct expenses . b c Net income or (loss) from gaming activities . ▶  10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold . b c Net income or (loss) from sales of inventory . ▶  Miscellaneous Revenue Business Code  11a			Gross income from garning activities.					
returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory   Miscellaneous Revenue Business Code  11a b c d All other revenue e Total. Add lines 11a–11d			Less. direct expenses	b				
c Net income or (loss) from sales of inventory			returns and allowances	a				
Miscellaneous Revenue								
11a		ြင				<u> </u>		<u></u>
b		-			<del></del>	<del></del>		-
d All other revenue e Total. Add lines 11a–11d		1 .		1	<del>  -</del>		-	<u> </u>
d All other revenue		ם ב						<del> </del>
			All other revenue					
					5.213 606	<u> </u>	<u> </u>	0

## Part IX Statement of Functional Expenses

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

	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				
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	<del></del>	<u> </u>		<u> </u>
5	Compensation of current officers, directors, trustees, and key employees			-	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,909,159	2,101,019	737,320	70,820
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits		205.000	07.000	
10	Payroll taxes	441,944	335,906	95,828	10,210
11	Fees for services (non-employees)	450		450	
	Management	450 16,563		450 16,563	
	Legal	7.000	7,000	10,303	
_	Accounting	7,000	1,000		
d	Lobbying				
_	Professional fundraising services See Part IV, line 17		一下 一大大大 一	TO SEE TO SEE THE PROPERTY OF	<del></del>
f	Investment management fees Other	115,658	92,275	15,383	8,000
12	Advertising and promotion	33,454	<del></del>	3,850	16,818
13	Office expenses	373,330		48,127	8,293
14	Information technology	42,394	24,038	14,277	4,079
15	Royalties				
16	Occupancy				
17	Travel	48,807	21,820	25,569	1,418
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .		ļ		
20	Interest	34,903	26,009	8,894	· · · · · · · · · · · · · · · · · · ·
21	Payments to affiliates	404 470	442 205	47.704	<del></del>
22	Depreciation, depletion, and amortization.	191,179 47,483			
23	Insurance	47,403	31,014	15,669	
24	Other expenses. Itemize expenses not				
	covered above. (Expenses grouped together and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below )				
а	Cultural and Recreational Activities	169,595	167,040	1,055	1,500
b	Contracted Services	37,493	<del></del>		704
c	Rent Expense	469,820	<del>                                     </del>		
d	Educational Supplies	20,644			
e	Miscellaneous Expenses	172,575	120,421	45,868	6,286
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	5,132,451	3,873,465	1,130,858	128,128
26	Joint costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	91,845	1	227,638
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	645,474	3	891,086
	4	Accounts receivable, net		4	
1	5	Receivables from current and former officers, directors, trustees, key			
	3	employees, and highest compensated employees. Complete Part II of		l	
ľ		Schedule L		5	
l	6	Receivables from other disqualified persons (as defined under section			
	Ü	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
ı		Part II of Schedule L		6	
<b>6</b>	_			7	
Assets	7	Notes and loans receivable, net		8	
Š	8	Inventories for sale or use	40,325		40,482
`	9	Prepaid expenses and deferred charges	40,323	-	
	10a	Land, buildings, and equipment cost or 10a 1,891,022			
		other basis. Complete Part VI of Schedule D	CE2 740	10-	624 104
	b	Less: accumulated depreciation 10b 1,266,828	653,748		624,194
	11	Investments—publicly traded securities		11	<del></del>
ł	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
ightharpoonup	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,431,392		1,783,400
İ	17	Accounts payable and accrued expenses	200,267	17	379,705
	18	Grants payable	·	18	
	19	Deferred revenue	54,865	19	76,780
	20	Tax-exempt bond liabilities		20	
Se	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key			
ig		employees, highest compensated employees, and disqualified			
۳		persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	195,000	24	264,500
	25	Other liabilities Complete Part X of Schedule D	· · · · · · · · · · · · · · · · · · ·	25	
	26	Total liabilities. Add lines 17 through 25	450,132	26	720,985
Ses		Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
ğ	27	Unrestricted net assets	429,852	27	479,268
3al	28	Temporarily restricted net assets	551,408	28	583,147
P	29			29	
5	29	•			
or Fund Balance		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
its (	30	Capital stock or trust principal, or current funds		30	
sse	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net Assets	33	Total net assets or fund balances	981,260	33	1,062,415
~	34	Total liabilities and net assets/fund balances	1,431,392		1,783,400

Page	1	2

' Form 990 (2009)

Pai	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990.   Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
22	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		✓
	Were the organization's financial statements audited by an independent accountant?	2b	_ ✓	
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	✓	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both.			
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			-
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	✓_	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b	1	

Form **990** (2009)

#### 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 Open to Public

Department of the Treasury Inspection Internal Revenue Service Employer identification number Name of the organization 0327584 Boys and Girls Clubs of Puerto Rico Inc Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) ☐ An organization that normally receives: (1) more than 33⅓ % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 33/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III-Functionally integrated a Type I **b** Type II e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (III) below, the governing body of the supported organization? 11g(i) 11g(ii) (ii) A family member of a person described in (i) above? 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . Provide the following information about the supported organization(s). h (vi) Is the (ii) EIN (III) Type of organization (iv) Is the organization (v) Did you notify (vii) Amount of (i) Name of supported organization (described on lines 1-9 in col (i) listed in your the organization in organization in col support above or IRC section governing document? col (i) of your (i) organized in the (see instructions)) support? US? Yes Yes

Par	t II Support Schedule for Org					and 170(b)(1	)(A)(vi)
	(Complete only if you check	ced the box of	on line 5, 7, c	or 8 of Part I.	)		
	tion A. Public Support			( ) 0007			<u> </u>
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	2,044,592	2,382,274	3,671,921	4,435,297	5,213,606	17,747,690
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	2,044,592	2,382,274	3,671,921	4,435,297	5,213,606	17,747,690
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						708,471
6	shown on line 11, column (f)						17,039,219
6	Public support. Subtract line 5 from line 4						17,039,219
	tion B. Total Support lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	· · · · · · · · · · · · · · · · · · ·	2,044,592	2,382,274	3,671,921	4,435,297	5,213,606	17,747,690
7	Amounts from line 4	2,044,352	2,362,214	3,071,321	4,433,237	3,213,000	17,747,030
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)			-			
11	Total support. Add lines 7 through 10 .					. <u> </u>	17,747,690
12	Gross receipts from related activities, etc.	. (see instructio	ns) .		l	12	
13 Soc	First five years. If the Form 990 is for organization, check this box and stop hertion C. Computation of Public Sup	re	<u> </u>	d, third, fourth			n 501(c)(3) ► □
				l column (fl)		14	96.00 %
14	Public support percentage for 2009 (line 6		•	, column (i))		15	95.42 %
15	Public support percentage from 2008 Sch						70
юа	33\% % support test - 2009. If the organia and stop here. The organization qualifies				line 14 is 33/3 %	% or more, cned	K this box ► 🗾
<b>L</b>		· ·	_		and line 15 is 1		
D	33\% % support test—2008. If the organization qua						
17a	10%-facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 organization meets the "facts-and-circumstances" and the organization meets the organization meets the "facts-and-circumstances" and the organization meets the org	09. If the organiacts-and-circun	ization did not onstances" test,	check a box on check this box	line 13, 16a, or and <b>stop here.</b>	16b, and line 14 Explain in Part	is 10% or IV how the
b 18	10%-facts-and-circumstances test—2008 more, and if the organization meets the "facts-and-circumstance organization meets the "facts-and-circumstance organization did organizati	acts-and-circum inces" test The	stances" test, c organization qua	theck this box a difies as a public	and <b>stop here.</b> cly supported or	Explain in Part ganization	IV how the

_	dule A (Form 990 or 990-EZ) 2009				\(\alpha\)		Page 3
Par	t III Support Schedule for Organ (Complete only if you checke				ı)(2) 		· 
	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	<b>(b)</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 6	The value of services or facilities furnished by a governmental unit to the organization without charge						
	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						
С	Add lines 7a and 7b					_	
8	Public support (Subtract line 7c from line 6.)					*	
	tion B. Total Support	(-) 2005	(h) 2006	(-) 0007	(d) 2008	(-) 0000	(f) Total
	ellendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009	(i) Total
9 10a	Amounts from line 6 .  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 11	Add lines 10a and 10b  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 organization, check this box and stop	here	<u> </u>	nd, third, fourt		year as a secti	
Sec	tion C. Computation of Public Su	· · · · · · · · · · · · · · · · · · ·				<del>                                      </del>	
15 16	Public support percentage for 2009 (lin Public support percentage from 2008 S	Schedule A, P	art III, line 15	ne 13, column		15 16	<u>%</u> %
	tion D. Computation of Investmen	_ · -				17	0/
17 10	Investment income percentage for 200			•	column (t)) .	17	<u> %</u> %
18 19a	Investment income percentage from 20 33% % support tests—2009. If the org. 17 is not more than 33% %, check this b	anızatıon dıd r	not check the b	oox on line 14,		more than 331/3	%, and line
b	33% % support tests – 2008. If the organ line 18 is not more than 33% %, check this	nization did not	check a box o	n line 14 or line	19a, and line	16 is more than	331/3 %, and _

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

Schedule A (F	Form 990 or 990-EZ) 2009	Page 4
Part IV		by Part II, line 10; See instructions.
•		
		·
		•••••
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#### SCHEDULE D (Form 990)

## **Supplemental Financial Statements**

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Cat No 52283D

Schedule D (Form 990) 2009

2009

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service  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.

Employer identification number Name of the organization Boys and Girls Clubs of PR Inc 66 : 0327584 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990. Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year . . . . 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year . . . 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised Yes No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) Preservation of a certified historic structure Protection of natural habitat ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a a Total number of conservation easements . . . . . 2b **b** Total acreage restricted by conservation easements . 2¢ c Number of conservation easements on a certified historic structure included in (a) . d Number of conservation easements included in (c) acquired after 8/17/06 . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ ..... Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 . . . . . . (iii) Assets included in Form 990, Part X . . . . . . . . . . . . . \$ ........ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: Revenues included in Form 990, Part VIII, line 1 . . . . . Assets included in Form 990, Part X . . . .

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

	t III Organizations Maintaining	Collections of A	rt. Historica	I Treasures, or	Other Similar A	ssets (continued)
3	Using the organization's acquisition, a collection items (check all that apply).					
a b c	Public exhibition Scholarly research Preservation for future generation	ie.		oan or exchange Other	programs	
4	Provide a description of the organization Part XIV.		d explain hov	v they further the	organization's exe	empt purpose in
5	During the year, did the organization sol assets to be sold to raise funds rather the	nan to be maintained	as part of th	e organization's co	illection?	Yes No
Par	Escrow and Custodial Arr. IV, line 9, or reported an arr				ered "Yes" to Fo	rm 990, Part
	Is the organization an agent, trustee, oncluded on Form 990, Part X? $$ .				or other assets no	t 🗌 Yes 🗌 No
b	If "Yes," explain the arrangement in Pa	art XIV and comple	te the follows	ng table <sup>.</sup>		mount
^	Beginning balance			<u> </u>	lc C	mount
d	Additions during the year				ld	
e	Distributions during the year				le	
f	~				lf	
2a b	Did the organization include an amount of "Yes," explain the arrangement in P	nt on Form 990, Pa art XIV	art X, line 21?			Yes No
Par	t V Endowment Funds. Com	olete if the organi	zation answ			
	<u> </u>	(a) Current year	(b) Prior year	(c) Two years back		(e) Four years back
1a	Beginning of year balance					
b	Contributions				3	<b> </b>
С	Net investment earnings, gains, and losses					
d	Grants or scholarships	<del></del>				
	Other expenditures for facilities and programs					
f g	Administrative expenses End of year balance					
2	Provide the estimated percentage of t	-				
а	Board designated or quasi-endowmer		)			
b	Permanent endowment ▶	. %				
C	Term endowment ▶%					
3a	Are there endowment funds not in the porganization by.	oossession of the o	rganization the	at are nelo ano ao	iministered for the	Yes No
	(i) unrelated organizations					3a(i)
	(ii) related organizations .		•			3a(ii)
b	If "Yes" to 3a(II), are the related organ					3b
4	Describe in Part XIV the intended uses					
Par	t VI Investments—Land, Build					
	Description of investment	(a) Cost or other to (investment)		ost or other (d	Accumulated depreciation	(d) Book value
1a	Land		_	7913		
þ	Buildings		<del></del>			
С	Leasehold improvements	<del></del>		107,350	30,409	76,941
d	Equipment			1,629,441	1,174,233	455,208
<u>e</u> Tota	Other	ist equal Form 990	Part X. column	154,231 (B) line 10(c)	<u>62,186</u>	92,045
, J.	Add lines to through te (Column (a) the	ior equal i Olili 930, i	art A, Coldilli	(L), III ( 10(C) ) .	· · · · · · · · · · · · · · · · · · ·	624,194

Schedule D (Form 990) 2009		1 40	
Part VII Investments—Other Securities	See Form 990, Part X,	line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year mai	ation rket value
Financial derivatives			
Closely-held equity interests			
Other			
		_	
		-	
		-	
		-	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			
	d Sac Form 000 Part V	line 12	
			<del></del>
(a) Description of investment type	(b) Book value	(c) Method of value Cost or end-of-year ma	
-			
	~		
		-	
			<del></del>
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	<del>                                     </del>		
Part IX Other Assets. See Form 990, Pa	art X line 15	I	
Part IX Other Assets. See Form 350, 12	(a) Description		(b) Book value
	(a) Description	·-·	(4,
			<u> </u>
			ļ <u></u>
Total. (Column (b) must equal Form 990, Part X, col		<u> </u>	1
Part X Other Liabilities. See Form 990	, Part X, line 25.		
1. (a) Description of liability	(b) Amount		
Federal income taxes			
		7	
		7	
	<del> </del>		
	<del> </del>		
	<del> </del>		•
	<del> </del>	$\dashv$	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25 ) ▶	<u> </u>		

Page	4

Jone	300 C (1 0 m 300) 2000	<del></del>	
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial S	<u>statements</u>	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	5,213,606
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	5,132,451
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	81,155
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	0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	81,155
Pa	t XII Reconciliation of Revenue per Audited Financial Statements With Revenu	T T	
1	Total revenue, gains, and other support per audited financial statements	. 1	5,213,606
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities	<b>-</b>   1	
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV.)	<u> </u>	
е	Add lines 2a through 2d	.   2e	0
3	Subtract line 2e from line 1	. 3	5,213,606
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	<u> </u>	
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV.)		
C	Add lines <b>4a</b> and <b>4b</b>	. 4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	. 5	5,213,606
Pa	t XIII Reconciliation of Expenses per Audited Financial Statements With Expen	ses per R	
1	Total expenses and losses per audited financial statements	. 1	5,132,451
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	5 x 1/5	
a	Donated services and use of facilities		
b	Prior year adjustments	🔨 ,	
c	Other losses 2c	- 20	
d	Other (Describe in Part XIV)	12	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	5,132,451
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b		•
b	Other (Describe in Part XIV.)	☐ · [	
	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	. 5	5,132,451
Pa	t XIV Supplemental Information		
and	aplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a 2b; Part V, line 4, Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d apart to provide any additional information.		
••••		•••••	

Schedule D (Form	Schedule D (Form 990) 2009 Page <b>5</b>						
Part XIV	Supplemental Information (continued)						
		••					
		/					
	***************************************						
		•					
		-					
		<b>.</b>					

### **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

Boys and Girls Clubs of Puerto R	ico Inc				66	0327584
Part I Fundraising Activity Form 990-EZ filers a	ies. Complete	if the orga	inization a	answered "Yes" part	to Form 990, Par	
Indicate whether the organizate     A Mail solicitations     Internet and email solicitate     Phone solicitations     In-person solicitations     Did the organization have a write	ions	e ✓ f ✓ g ✓	Solicitati Solicitati Special	on of non-governr on of government fundraising events	nent grants grants	
or key employees listed in Ford  b if "Yes," list the ten highest p to be compensated at least \$:	m 990, Part VII) ( aid individuals c	or entity in our or entities (f	connection	with professional	fundraising service	s? ∐ Yes 🗸 No
(i) Name of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have ir control of outlons?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total .  3 List all states in which the organized registration or licensing	anization is regi	stered or li	. ► censed to	solicit funds or h	as been notified if	is exempt from
	***				********	
				· <b></b>		

Schedule G (Form 990 or 990-EZ) 2009

		G (FOITH 990 OF 990-EZ) 2009						rage z
Pa	art (	Fundraising Events. Comore than \$15,000 on F					r reporte	d 
			(a) Event #1 Wine & Cheese	(b) Event #2	(c) Other events	(add co	otal events of (a) throug	ıh
o)			(event type)	(event type)	(total number)		col (c))	
Revenue	1	Gross receipts	9,671					9,671
Œ	2	Less: Charitable contributions .						
	3	Gross income (line 1 minus line 2)	9,671					9,671
	4	Cash prizes				-		
	5	Noncash prizes				+		
nses	6	Rent/facility costs	,ш-ш			-		
Expe	7	Food and beverages	1,967			-		1,967
Direct Expenses	8	Entertainment .				-		
	9	Other direct expenses .				<del> </del>	<u></u>	
	10 11	Direct expense summary Ad Net income summary. Comb	ine line 3, column (d), a	nd line 10		(	7	,967) 7,704
Pa	ırt l	Gaming. Complete if than \$15,000 on Form	the organization ansv 990-EZ, line 6a.	vered "Yes" to Form	990, Part IV, line 19	, or rep	orted mo	ore
			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming		otal gaming ( through col	
Revenue	1	Gross revenue						
ses	2	Cash prizes						
Expen	3	Noncash prizes				<del> </del>		
Direct Expenses	4	Rent/facility costs .						
_	5	Other direct expenses .						
	6	Volunteer labor	☐ Yes% ☐ No	☐ Yes% ☐ No	☐ Yes% ☐ No			
	7	Direct expense summary. Ac	dd lines 2 through 5 in c	olumn (d)		(		)
	8	Net gaming income summar	y. Combine line 1, colur	nn d, and line 7				
							Yes	No Tankara
9 a	l Is	nter the state(s) in which the c the organization licensed to c	•	-	es?		9a	
b		"No," explain:						
10a		ere any of the organization's	gaming licenses revoke	d, suspended or termir	nated during the tax ye	ear?	10a	\$ 7. Y.
b	) If 	"Yes," explain.						
11		oes the organization operate of					11	
12	ls	the organization a grantor, be	eneficiary or trustee of	a trust or a member of	a partnership or othe	r entity		

	-
Page	3

Schedule	_	/F	000		000 E3	2000
Scriedule	u	(FOIIII	330	OI	330-62	2009

			Yes	No
13	Indicate the percentage of gaming activity operated in:	· Sign	180,00	**
а	The organization's facility		*	
b	An outside facility		5 **	ray vi
14	Enter the name and address of the person who prepares the organization's gaming/special events books		12m2	`s:
	and records:	.,7		ا ، ا
		4.5"	. 1.5.1	330
	Name ▶	, ,		
	Address ▶	. "	, X	. * :
				N 4
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		
h	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$	~ **		
U	amount of gaming revenue retained by the third party > \$		43	, »,
С	If "Yes," enter name and address of the third party:	-864	<b>在光教</b>	1
	Name ▶	KC 1	: 1	
	Address ▶			)
16	Gaming manager information		17	٠,,٠
		3.	H ()	;
	Name ▶	70.3	. 25	
		, %		Start Sec
	Gaming manager compensation ▶ \$	· ·		
			ि स् <sub>र</sub> ूर १	
	Description of services provided ▶	~	S (2)	3.0
		30.		.
	☐ Director/officer ☐ Employee ☐ Independent contractor	ľ.,	<i>j</i>	
17	Mandatory distributions	, ·	***	( 1 × 2 4)
	Is the organization required under state law to make charitable distributions from the gaming proceeds to	Et.	ئىسەد '	المساسمة ا
	retain the state gaming license?	17a		
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations			
	or spent in the organization's own exempt activities during the tax year ▶ \$	3.4	865	

Schedule G (Form 990 or 990-EZ) 2009

# SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

## **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
Open to Public Inspection

Employer identification number

0327584 Boys and Girls Clubs of Puerto Rico Inc. 66 Page 2, Part III, Line 4d: Other Program Services: \$963,404 The Organization provides other program services funded through Private Foundations and Federated Campaigns. The Organization provides drug prevention and family support programs through local government grants; provides prevention support activities funded by Federated Campaigns funds and provides job training and help youth in obtaining jobs. Page 6, Part VI, Section B, Line 11A: Revision of Form 990 Once Form 990 is completed, accounting personnel verified that amounts included on the return are in agreement with amounts included within audited financial statements and accounting records. They also verified that answers provided to information questions are answered to the best of their knowledge and belief. Any contributors information included is verified for correctness and finally it is ascertained that the same is signed and dated by a responsible official. Page 6, Part VI, Section B, Line 15: Compensation Determination Compensation plans are evaluated every two years. In establishing compensation, a benchmark from Boys and Girls Clubs of America and from Puerto Rico Employment and Human Resources Department is used. These are revised by Finance Department and Human Resources Department and the responsibilities of each position is measure against the Organization's employment structure. Final compensation is approved by Board of Directors. Page 6, Part VI, Section C, Line 19: Documents Availability to Public The governing documents, financial statements and Form 990 are available to the public for inspection upon request. Once a written request is made for inspection, coordination is made between the Organization and the requesting party to facilitate the inspection process.