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Check if Schedule O contains a response to any question in this Part III ☒

OUR MISSION IS TO INSPIRE AND EMPOWER ALL YOUNG PEOPLE, ESPECIALLY THOSE WHO NEED US MOST, TO REALIZE THEIR FULL POTENTIAL AS PRODUCTIVE, RESPONSIBLE AND CARING CITIZENS

If "Yes," describe these new services on Schedule O

If "Yes," describe these changes on Schedule O

4a (Code) (Expenses \$ 18,080,589 including grants of \$ 42,470) (Revenue \$ 1,227,680)

CORE PROGRAM AREAS - THE BOYS & GIRLS CLUBS OF GREATER MILWAUKEE MEETS ITS MISSION BY OFFERING OVER 200 PROGRAMS IN SIX CORE PROGRAM AREAS THE SIX AREAS INCLUDE 1 HEALTH AND LIFE SKILLS - PROGRAMS THAT DEVELOP YOUNG PEOPLE'S CAPACITY TO ENGAGE IN POSITIVE BEHAVIORS THAT NURTURE THEIR OWN WELL-BEING, SET PERSONAL GOALS AND LIVE SUCCESSFULLY AS SELF-SUFFICIENT ADULTS 2 EDUCATION AND CAREER DEVELOPMENT - PROGRAMS THAT ENABLE YOUTH TO BECOME PROFICIENT IN BASIC EDUCATION AND DISCIPLINES, APPLY LEARNING TO EVERYDAY SITUATIONS AND EMBRACE TECHNOLOGY TO ACHIEVE SUCCESS IN A CAREER 3 SPORTS, FITNESS AND RECREATION - PROGRAMS THAT DEVELOP FITNESS, POSITIVE USE OF LEISURE TIME, SKILLS FOR STRESS MANAGEMENT, APPRECIATION FOR THE ENVIRONMENT AND DEVELOPMENT OF SOCIAL SKILLS 4 CHARACTER AND LEADERSHIP DEVELOPMENT - PROGRAMS THAT EMPOWER YOUTH TO SUPPORT AND INFLUENCE THEIR CLUB AND COMMUNITY, SUSTAIN MEANINGFUL RELATIONSHIPS WITH OTHERS, DEVELOP A POSITIVE SELF-IMAGE, PARTICIPATE IN THE DEMOCRATIC PROCESS AND RESPECT THEIR OWN AND OTHER'S CULTURAL IDENTITIES 5 ARTS AND CULTURAL EDUCATION - PROGRAMS THAT ENABLE YOUTH TO DEVELOP THEIR CREATIVITY AND CULTURAL AWARENESS THROUGH KNOWLEDGE AND APPRECIATION OF THE VISUAL ARTS, CRAFTS, PERFORMING ARTS AND CREATIVE WRITING 6 OUTDOOR AND ENVIRONMENTAL EDUCATIONS - PROGRAMS THAT ENABLE YOUTH TO EXPLORE THEIR NATURAL ENVIRONMENT AND DEVELOP AN APPRECIATION FOR THE OUTDOORS IN A HANDS-ON LEARNING ENVIRONMENT 2011 FACTS AND FIGURES THE BOYS & GIRLS CLUBS OF GREATER MILWAUKEE HAS SERVED THE FAMILIES OF MILWAUKEE SINCE 1887 AND IS THE LARGEST NEIGHBORHOOD SITE BASED YOUTH DEVELOPMENT ORGANIZATION IN THE CITY DAILY PROGRAMMING IS OFFERED TO SCHOOL AGE YOUTH 4-18 DURING "OUT OF SCHOOL" HOURS INCLUDING SUMMER, AFTERSCHOOL, AND HOLIDAY BREAKS DURING 2011, MORE THAN 35,000 YOUTH WERE REGISTERED AS MEMBERS OF THE CLUBS WITH MORE THAN 5,200 ATTENDING DAILY BY PROVIDING OUTCOME DRIVEN PROGRAMMING, YOUTH ARE ACHIEVING ACADEMIC SUCCESS, HEALTHY LIFE STYLES, AND GOOD CHARACTER & CITIZENSHIP THE DAILY PROGRAM IS DESIGNED TO MEET THE NEED OF ALL CHILDREN- ESPECIALLY THOSE WHO NEED US MOST MEMBERS PARTICIPATE IN CUTTING EDGE PROGRAMMING IN THE ARTS, EDUCATION & CAREER DEVELOPMENT, HEALTH & LIFE SKILLS, CHARACTER & LEADERSHIP DEVELOPMENT, AND SPORTS, FITNESS & RECREATION WE FACILITATE IMPACTFUL PROGRAMMING BY MAINTAINING A 1:16 YOUTH TO ADULT RATIO ADULTS ARE CREDENTIALLED, CERTIFIED, AND RECEIVE ONGOING TRAINING WHICH IS CONSTANTLY ASSESSED THROUGH OUR "QUALITY RATING SYSTEM" AGE APPROPRIATE PROGRAMMING ALLOWS THE YOUNGEST MEMBERS TO ENJOY ACTIVITY STATIONS ESPECIALLY DESIGNED FOR THEIR DEVELOPMENT NEEDS ADOLESCENT MEMBERS EXPERIENCE PROGRAMMATIC CHOICE THAT TEACHES DECISION MAKING, NETWORKING, AND PERSONAL ACCOUNTABILITY- INCLUDING A LEADERSHIP PROGRAM ESPECIALLY DESIGNED TO ALLOW YOUTH VOICE! LASTLY, OUR TEEN MEMBERS EXPERIENCE COLLEGE PREPARATION, JOB READINESS, AND HEALTHY RELATIONSHIP TRAINING WHETHER IT IS EXPOSURE TO NEW ART FORMS SUCH LITERARY WORKS OF ART THROUGH THEATER, LEARNING TO SWIM AND BECOMING CERTIFIED AS A DEEP END SWIMMER, OR SIMPLY JOINING OUR NEARLY 200 TEENS EXPERIENCING THEIR FIRST JOB- THE CLUBS KEEPS ITS PROMISE TO THE FAMILIES AND YOUTH WE SERVE GREAT FUTURES, START HERE AT THE BOYS & GIRLS CLUBS OF GREATER MILWAUKEE DURING 2011 - THE CLUBS HAD 35,841 REGISTERED MEMBERS - THE AVERAGE DAILY ATTENDANCE WAS 5,078 - 57% OF MEMBERS SERVED ARE BOYS AND 43% ARE GIRLS - 57% OF MEMBERS SERVED ARE BETWEEN 6-12 YEARS OLD, THE REST BETWEEN 13-18 - 43% OF OUR MEMBERS ARE FROM HOUSEHOLDS EARNING BELOW \$15,000 - 57% OF OUR MEMBERS ARE FROM HOUSEHOLDS EARNING BELOW \$25,000 - 57% OF OUR MEMBERS HAVE A ONE PARENT FAMILY STRUCTURE 2011 PROGRAM ACCOMPLISHMENTS - 700 HIGH SCHOOL STUDENTS COMPLETED COLLEGE SUCCESS TRAINING - 76% OF PARTICIPANTS IN SPARK EARLY LITERACY INITIATIVE ARE READING PROFICIENTLY COMPARED WITH 39% BEFORE SPARK - A 95% IMPROVEMENT - 16,726 YOUTHS ATTENDED CAMP WHITCOMB/MASON'S OUTDOOR AND ENVIRONMENTAL PROGRAMS - 4,000 MEALS WERE SERVED DAILY DURING THE SCHOOL YEAR AND 5,200 MEALS WERE SERVED DAILY DURING THE SUMMER FROM THE BOYS & GIRLS CLUB'S EVENING MEAL INITIATIVE ALTOGETHER, MORE THAN 1 MILLION MEALS WERE SERVED IN 2011 AT 37 CLUBS



















4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e	Total program service expenses	\$ 18,080,589
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Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2	Yes
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	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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	No
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	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
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	No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	Yes
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 	11a	Yes
b	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. 	11b	No
c	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. 	11c	No
d	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. 	11d	No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 	11e	Yes
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X. 	11f	Yes
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12a	Yes
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 	12b	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b	No
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 U S? If "Yes," complete Schedule F, Part II and IV	15	No
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 U S? If "Yes," complete Schedule F, Part III and IV	16	No
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	Yes
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	Yes
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	No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b	

Part IV

Checklist of Required Schedules (continued)

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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a		No
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 to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
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? <i>If "Yes," complete Schedule L, Part II</i>	26		No
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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
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	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
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		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance			Yes	No
Check if Schedule O contains a response to any question in this Part V <input type="checkbox"/>				
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	1a177		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return. .	2a1,157		
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 (see instructions).	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	Yes	
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 or securities account)?	4a		No
b	If "Yes," enter the name of the foreign country: _____ See instructions for 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		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
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?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	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	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
a	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		
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders.	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b		
c	Enter the aggregate amount of reserves on hand.	13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

Part VI

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1a	82		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	79
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	Yes
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed <input checked="" type="checkbox"/> WI
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization. <input checked="" type="checkbox"/> KENNETH ROBERTSON 1558 NORTH 6TH STREET MILWAUKEE, WI 53212 (414) 267-8100

Check if Schedule O contains a response to any question in this Part VII

☐ Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee

Form **990** (2011)

Part VII

1b	Sub-Total	▼			
c	Total from continuation sheets to Part VII, Section A	▼			
d	Total (add lines 1b and 1c)	▼	833,205	0	200,307

2 Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. ▶6

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►0

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a1,322,155					
	b	Membership dues	1b					
	c	Fundraising events	1c514,778					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e7,721,349					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f9,521,242					
	g	Noncash contributions included in lines 1a-1f \$ 757,827						
	h	Total. Add lines 1a-1f						
Program Service Revenue			Business Code					
	2a	SERVICE REVENUE	900099	655,378	649,730	5,648		
	b	MEMBERSHIP DUES	900099	12,882	12,882			
	c	CAMP FEES	900099	6,110	6,110			
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f			674,370			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)						
				380,571			380,571	
	4	Income from investment of tax-exempt bond proceeds . .						
	5	Royalties						
	6a	(i) Real						
		558,958						
		(ii) Personal						
	b	Less rental expenses						
	c	Rental income or (loss)						
		558,958						
	d	Net rental income or (loss)			558,958	558,958		
	7a	(i) Securities						
		5,992,890						
		(ii) Other						
	b	Less cost or other basis and sales expenses						
	c	Gain or (loss)						
		1,246,039						
	d	Net gain or (loss)			1,246,039		1,246,039	
	8a	Gross income from fundraising events (not including \$ 514,778 of contributions reported on line 1c) See Part IV, line 18						
		a	8,609					
b		146,359						
b	Less direct expenses							
c	Net income or (loss) from fundraising events . .			-137,750		-137,750		
9a	Gross income from gaming activities See Part IV, line 19							
	a							
	b							
b	Less direct expenses							
c	Net income or (loss) from gaming activities . .							
10a	Gross sales of inventory, less returns and allowances							
	a							
	b							
b	Less cost of goods sold							
c	Net income or (loss) from sales of inventory . .							
Miscellaneous Revenue		Business Code						
11a	MISCELLANEOUS	900099	300			300		
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d			300				
12	Total revenue. See Instructions			21,802,012	1,227,680	5,648	1,489,160	

Part IX 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)
Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 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 United States See Part IV, line 21	42,470	42,470		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	507,223		507,223	
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	12,164,526	10,360,904	1,046,914	756,708
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	576,547	467,899	79,750	28,898
9	Other employee benefits	1,120,953	851,426	181,549	87,978
10	Payroll taxes	1,413,911	1,203,712	131,979	78,220
11	Fees for services (non-employees)				
a	Management				
b	Legal	30,565		30,565	
c	Accounting	106,794		106,794	
d	Lobbying				
e	Professional fundraising See Part IV, line 17	63,438			63,438
f	Investment management fees				
g	Other	1,228,883	930,757	222,615	75,511
12	Advertising and promotion	4,489	3,199	1,290	
13	Office expenses	570,838	257,965	161,998	150,875
14	Information technology	62,062	35,962	18,305	7,795
15	Royalties				
16	Occupancy	975,375	859,639	114,973	763
17	Travel	264,060	250,634	8,195	5,231
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	197,754	141,997	31,776	23,981
20	Interest	22,019	669	21,350	
21	Payments to affiliates	79,005	58,469	13,700	6,836
22	Depreciation, depletion, and amortization	690,589	503,252	186,030	1,307
23	Insurance	95,285	35,875	59,164	246
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	SCHOLARSHIPS AND CLIENT	713,267	713,267		
b	ACTIVITY SUPPLIES	480,793	480,693	56	44
c	FOOD, BEV, & KITCHEN	422,020	405,750	13,286	2,984
d	UNIFORMS & APPAREL	94,941	94,315	243	383
e					
f	All other expenses	469,367	381,735	6,022	81,610
25	Total functional expenses. Add lines 1 through 24f	22,397,174	18,080,589	2,943,777	1,372,808
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			100,796	1	94,131
	2	Savings and temporary cash investments			7,731,261	2	8,608,080
	3	Pledges and grants receivable, net			17,826,456	3	14,673,592
	4	Accounts receivable, net			495,166	4	1,174,531
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			52,247	9	54,179
	10a	Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D	10a	20,148,423			
	b	Less: accumulated depreciation	10b	12,712,541	7,646,108	10c	7,435,882
	11	Investments—publicly traded securities			21,328,134	11	20,683,279
	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			1,433,537	15	1,488,605
	16	Total assets. Add lines 1 through 15 (must equal line 34)			56,613,705	16	54,212,279
Liabilities	17	Accounts payable and accrued expenses			1,371,116	17	1,444,229
	18	Grants payable				18	
	19	Deferred revenue			853,577	19	643,688
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 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				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			406,849	25	457,235
	26	Total liabilities. Add lines 17 through 25			2,631,542	26	2,545,152
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			17,639,537	27	17,199,394
	28	Temporarily restricted net assets			33,166,593	28	31,291,700
	29	Permanently restricted net assets			3,176,033	29	3,176,033
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			53,982,163	33	51,667,127
	34	Total liabilities and net assets/fund balances			56,613,705	34	54,212,279

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	21,802,012
2	Total expenses (must equal Part IX, column (A), line 25)	2	22,397,174
3	Revenue less expenses Subtract line 2 from line 1	3	-595,162
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	53,982,163
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-1,719,874
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	51,667,127

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII ☒

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
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 separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a	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?	Yes	
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	Yes	

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization BOYS & GIRLS CLUBS OF GREATER MILWAUKEE INC	Employer identification number 39-0806292
---	--

Part I

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 **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

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
- 5

☐

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)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

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)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety Se**section 509(a)(4).**
- 11

☐

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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other
- 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)
- f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(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 the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?
- h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	27,792,807	21,817,223	17,837,790	22,463,141	18,564,746	108,475,707
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		1,171,315	1,171,315	1,171,340	1,171,340	4,685,310
4 Total. Add lines 1 through 3	27,792,807	22,988,538	19,009,105	23,634,481	19,736,086	113,161,017
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						113,161,017

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	27,792,807	22,988,538	19,009,105	23,634,481	19,736,086	113,161,017
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	386,956	567,629	405,724	416,545	380,571	2,157,425
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						115,318,442

12 Gross receipts from related activities, etc (See instructions)

124,151,554

13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14	98 130 %
15 Public Support Percentage for 2010 Schedule A, Part II, line 14	15	97 850 %

16a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test—2010. If the organization did not check the 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—2011. 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

b 10%-facts-and-circumstances test—2010. 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

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

Part IIIPart III

Support Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12.)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage		
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
Attach to Form 990. See separate instructions.

Name of the organization
BOYS & GIRLS CLUBS OF GREATER MILWAUKEE INC

Employer identification number
39-0806292

Part I

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
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or pleasure) ☐ Preservation of an historically importantly land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
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

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, 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 conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 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

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 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

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance	21,328,134	19,732,476	17,855,238	28,367,749
b	Contributions	613,033	304,795	311,994	275,500
c	Investment earnings or losses	-148,444	2,550,062	3,462,388	-9,296,605
d	Grants or scholarships				
e	Other expenditures for facilities and programs	994,758	1,156,548	1,789,497	1,283,349
f	Administrative expenses	114,686	102,651	107,647	208,057
g	End of year balance	20,683,279	21,328,134	19,732,476	17,855,238

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 56 690 %

b

Permanent endowment ▶ 14 430 %

c

Term endowment ▶ 28 880 %

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,992,981		1,992,981
b Buildings		12,205,680	7,670,731	4,534,949
c Leasehold improvements		2,620,799	2,541,309	79,490
d Equipment		2,835,451	2,381,532	453,919
e Other		493,512	118,969	374,543
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				7,435,882

Schedule D (Form 990) 2011

Part XI

Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	21,802,012
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	22,397,174
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-595,162
4	Net unrealized gains (losses) on investments	4	-1,778,522
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	58,648
9	Total adjustments (net) Add lines 4 - 8	9	-1,719,874
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-2,315,036

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	21,253,478
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-1,778,522
b	Donated services and use of facilities	2b	1,171,340
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	58,648
e	Add lines 2a through 2d	2e	-548,534
3	Subtract line 2e from line 1	3	21,802,012
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	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	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	21,802,012

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	23,568,514
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	1,171,340
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	1,171,340
3	Subtract line 2e from line 1	3	22,397,174
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	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	22,397,174

Part XIV

Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	TO CONTINUE OUR MISSION IN FUTURE YEARS
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	BGCGM IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE EFFECTIVE JANUARY 1, 2009. BGCGM HAS IMPLEMENTED ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES IN ACCORDANCE WITH ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA. THIS STANDARD DESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN AND ALSO PROVIDES GUIDANCE ON VARIOUS RELATED MATTERS SUCH AS DERECOGNIZING, INTEREST, PENALTIES AND DISCLOSURE REQUIRED. MANAGEMENT OF THE ORGANIZATION EVALUATES THE UNCERTAIN TAX POSITIONS TAKEN, IF ANY, AND CONSULTS WITH OUTSIDE COUNSEL AS DEEMED NECESSARY. THE ORGANIZATION RECOGNIZES INTEREST AND PENALTIES, IF ANY, RELATED TO UNRECOGNIZED TAX LIABILITIES IN INCOME TAX EXPENSE.
PART XI, LINE 8 - OTHER ADJUSTMENTS		INCREASE IN INTEREST IN FUNDS HELD 58,648
PART XII, LINE 2D - OTHER ADJUSTMENTS		INCREASE IN INTEREST IN FUNDS HELD IN TRUST 58,648

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

2011

Open to Public
Inspection

Name of the organization
BOYS & GIRLS CLUBS OF GREATER MILWAUKEE INC

Employer identification number
39-0806292

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☒

Mail solicitations

e

☒

Solicitation of non-government grants

b

☒

Internet and e-mail solicitations

f

☒

Solicitation of government grants

c

☐

Phone solicitations

g

☒

Special fundraising events

d

☒

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?

☐ Yes ☒ No

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. Form 990-EZ filers are not required to complete this table.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(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 organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

WI

Part II Fundraising Events.

Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events	
		<u>MVP DINNER</u> (event type)	<u>JAMES CLARK FARWELL</u> (event type)	<u>6</u> (total number)	(Add col (a) through col (c))	
Revenue	1	Gross receipts	306,321	97,656	119,410	523,387
	2	Less Charitable contributions	306,321	97,656	110,801	514,778
	3	Gross income (line 1 minus line 2)			8,609	8,609
Direct Expenses	4	Cash prizes				
	5	Non-cash prizes		274	11,285	11,559
	6	Rent/facility costs	3,135		990	4,125
	7	Food and beverages	29,837	24,998	15,366	70,201
	8	Entertainment	150			150
	9	Other direct expenses	9,603	18,527	32,194	60,324
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶				(146,359)
	11	Net income summary Combine lines 3 and 10 in column (d). ▶				-137,750

Part III Gaming.

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			()
	8	Net gaming income summary Combine lines 1 and 7 in column (d) ▶			

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain _____

- 11

Does the organization operate gaming activities with nonmembers?

☐ Yes ☐ No
- 12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ 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 and records

Name

Address

- 15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ Yes ☐ No
- 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

Name

Address

16

Gaming manager information

Name

Gaming manager compensation \$

Description of services provided

☐ Director/officer

☐ Employee

☐ Independent contractor

- 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?

☐ Yes ☐ No
- b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$

Part IV

Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
------------	-----------------	-------------

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

2011

Open to Public Inspection

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

Employer identification number
39-0806292

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II **Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

[illegible]

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table _____
- 3** Enter total number of other organizations listed in the line 1 table _____

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 AN INITIAL GRANT BUDGET IS PREPARED AND MODIFIED UNTIL ACCEPTED BY THE GRANTOR EXPENSES INCURRED MUST QUALIFY UNDER THE GRANT RESTRICTIONS OUTLINED IN THE BUDGET AND GRANT CONTRACT IF APPLICABLE TO ENSURE COMPLIANCE, DIRECTOR APPROVAL IS REQUIRED PRIOR TO SUBMITTING EXPENSES TO ACCOUNTS PAYABLE ADDITIONALLY A GRANT ACCOUNTANT REVIEWS ALL CHARGES BEFORE THESE ARE RECORDED TO A GRANT ACCOUNT IN THE GENERAL LEDGER A REPORT IS THEN PREPARED IN THE ACCOUNTING DEPARTMENT BASED ON THE EXPENSES RECORDED IN THE GENERAL LEDGER ACCORDING TO THE GRANTORS SPECIFICATIONS GRANT SPECIFIC APPROVALS/SIGNATURES ARE OBTAINED AND THEN THE REPORT IS SUBMITTED TO THE GRANTOR FOR REIMBURSEMENT ONLY GRANTOR APPROVED EXPENSES ARE REIMBURSED TO THE CLUBS

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization

BOYS & GIRLS CLUBS OF GREATER MILWAUKEE INC

Employer identification number

39-0806292

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
	<div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
	<div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a	Receive a severance payment or change-of-control payment?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	The organization?	5a	Yes
b	Any related organization?	5b	No
	If "Yes," to line 5a or 5b, describe in Part III		
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	6a	No
b	Any related organization?	6b	No
	If "Yes," to line 6a or 6b, describe in Part III		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

[illegible]

Part III **Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
	PART I, LINE 5	THE VP DEVELOPMENT RECEIVES A BONUS BASED UPON CAMPAIGN RESULTS

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons
▶ Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V lines 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047
2011
Open to Public Inspection

Name of the organization
BOYS & GIRLS CLUBS OF GREATER MILWAUKEE INC

Employer identification number
39-0806292

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c)Original principal amount	(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g)Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total ▶ \$ _____										

Part III Grants or Assistance Benefitting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b)Relationship between interested person and the organization	(c)Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) KRISTINE RAPPE	MEMBER OF BOARD OF TRUSTEES	261,042	KRISTINE RAPPE IS A SENIOR VICE PRESIDENT FOR WE ENERGIES, WHICH IS THE SUPPLIER OF GAS AND ELECTRICITY FOR THE BOYS AND GIRLS CLUBS		No
(2) CHARLES JAMES	MEMBER OF BOARD OF TRUSTEES	115,655	CHARLES JAMES IS AN OWNER OF FITZGERALD, CLAYTON, JAMES & KASTEN, WHICH PROVIDES INSURANCE SERVICES FOR THE BOYS AND GIRLS CLUBS		No
(3) DAVID RADTKE	MEMBER OF BOARD OF TRUSTEES	125,785	DAVID RADTKE IS EMPLOYED BY RBC WEALTH MANAGEMENT, WHICH IS THE INVESTMENT COMPANY FOR THE BOYS AND GIRLS CLUB		No

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation
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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

►Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
BOYS & GIRLS CLUBS OF GREATER MILWAUKEE INC

Employer identification number
39-0806292

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	13	562,033	SALES PRICE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (<u>MARKETING</u>) CELL	X	1	80,404	FMV
26 Other ► (<u>PHONES</u>)	X	1	51,595	FMV
27 Other ► (<u>DEVELOPMENT</u>)	X	3	37,754	FMV
28 Other ► (<u>SUPPLIES</u>)	X	3	26,041	FMV
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement				29

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		No
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	Yes	
b If "Yes," describe in Part II		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part III

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
THIRD PARTY USE	PART I, LINE 32B	WE USE ROBERT W BAIRD & CO TO SELL DONATED SECURITIES

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization
BOYS & GIRLS CLUBS OF GREATER MILWAUKEE INC

Employer identification number

39-0806292

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	REILLY, PENNER & BENTON, LLP USES OUR AUDITED FINANCIAL STATEMENTS AND ADDITIONAL INFORMATION PROVIDED BY BGCGM TO PREPARE THE 990 THE BGCBM ACCOUNTING DEPARTMENT REVIEWS THE 990 AND REMITS ANY NECESSARY CHANGES TO THE AUDITORS AFTER THE DRAFT IS APPROVED BY THE BGCGM CEO AND CFO, THE DRAFT IS SENT TO THE CHAIRS OF THE FINANCE AND AUDIT COMMITTEES FOR FINAL APPROVAL IN ADDITION, THE 990 IS REVIEWED AND APPROVED BY THE AUDIT COMMITTEE PRIOR TO SUBMISSION TO THE IRS
	FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION OBTAINS A CONFLICT OF INTEREST STATEMENT FROM ALL TRUSTEES WHICH DISCLOSES SUCH RELATIONSHIPS ALL SUCH RELATIONSHIPS HAVE BEEN REVIEWED BY THE BOARD OF TRUSTEES AND MUST BE AT ARMS LENGTH
	FORM 990, PART VI, SECTION B, LINE 15	ANY CHANGES TO THE CEO'S SALARY MUST BE APPROVED BY BOTH THE CHAIR OF THE BOARD AND THE PERSONNEL COMMITTEE THE BOARD UTILIZES COMPARABLE DATA IN THE PROCESS OF DETERMINING AN APPROPRIATE SALARY DISCUSSIONS PERTAINING TO DETERMINING COMPENSATION ARE RECORDED IN THE MINUTES
	FORM 990, PART VI, SECTION C, LINE 19	UPON REQUEST OF THESE DOCUMENTS BGCGM WILL MAKE AVAILABLE WITH THE APPROVAL OF MANAGEMENT
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -1,778,522 INCREASE IN INTEREST IN FUNDS HELD 58,648 TOTAL TO FORM 990, PART XI, LINE 5 -1,719,874
	FORM 990, PART XII, LINE 2C	THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR

Additional Data

Software ID:

Software Version:

EIN: 39-0806292

Name: BOYS & GIRLS CLUBS OF GREATER MILWAUKEE INC

Form 990, Special Condition Description:

Special Condition Description

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHRISTOPHER S ABELE TRUSTEE	10 00	X						0	0	0
BARRY K ALLEN TRUSTEE	10 00	X						0	0	0
BEVAN K BAKER TRUSTEE	10 00	X						0	0	0
JAMES T BARRY III CCIM TRUSTEE	10 00	X						0	0	0
DAVID A BAUMGARTEN TRUSTEE	10 00	X						0	0	0
DAVID L BECHTHOLD TRUSTEE	10 00	X						0	0	0
THOMAS H BENTLEY III TRUSTEE	10 00	X						0	0	0
WILLIAM R BERTHA TRUSTEE	10 00	X						0	0	0
THOMAS M BOLGER TRUSTEE	10 00	X						0	0	0
ELIZABETH BETSY BRENNER TRUSTEE	10 00	X						0	0	0
TONY BUCCINA TRUSTEE	10 00	X						0	0	0
KEITH R BURNS TRUSTEE	10 00	X						0	0	0
TONIT CALAWAY TRUSTEE	10 00	X						0	0	0
TINA M CHANG TRUSTEE	10 00	X						0	0	0
HONORABLE G SPENCER COGGS TRUSTEE	10 00	X						0	0	0
JUDGE PEDRO COLON TRUSTEE	10 00	X						0	0	0
CURT S CULVER TRUSTEE	10 00	X						0	0	0
BARBARA B DAMM TRUSTEE	10 00	X						0	0	0
BISHOP SEDGWICK DANIELS TRUSTEE	10 00	X						0	0	0
RUSSELL M DARROW JR TRUSTEE	10 00	X						0	0	0
SUE ELA TRUSTEE	10 00	X						0	0	0
EDWARD FLYNN TRUSTEE	10 00	X						0	0	0
WILLIAM FITZHUGH FOX VICE CHAIR	10 00	X		X				0	0	0
ALEXANDER P FRASER TRUSTEE	10 00	X						0	0	0
JOHN GALANIS TRUSTEE	10 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
THOMAS E GORIS JR TRUSTEE	10 00	X						0	0	0
CHARLES B GROESCHELL TRUSTEE	10 00	X						0	0	0
WILLIAM C HANSEN TRUSTEE	10 00	X						0	0	0
THOMAS J HAUSKE JR TRUSTEE	10 00	X						0	0	0
JACK HERBERT TRUSTEE	10 00	X						0	0	0
RENEE HERZING TRUSTEE	10 00	X						0	0	0
KATHERINE HUST TRUSTEE	10 00	X						0	0	0
CHARLES V JAMES TRUSTEE	10 00	X						0	0	0
PAUL W JONES VICE CHAIR	10 00	X		X				0	0	0
SARAH WRIGHT KIMBALL TRUSTEE	10 00	X						0	0	0
STEVEN L LAUGHLIN TRUSTEE	10 00	X						0	0	0
N THOMPSON LONG TRUSTEE	10 00	X						0	0	0
KEITH MARDAK TRUSTEE	10 00	X						0	0	0
MARC J MAROTTA TRUSTEE	10 00	X						0	0	0
MAUREEN A MCGINNITY TRUSTEE	10 00	X						0	0	0
DANIEL F JACK MCKEITHAN JR TRUSTEE	10 00	X						0	0	0
ROBERT LANE MIKULAY TRUSTEE	10 00	X						0	0	0
BRIAN MORELLO TRUSTEE	10 00	X						0	0	0
MICHAEL L MORGAN TRUSTEE	10 00	X						0	0	0
CORY L NETTLES TRUSTEE	10 00	X						0	0	0
ALBERT O NICHOLAS CFA TRUSTEE	10 00	X						0	0	0
KEITH D NOSBUSCH TRUSTEE	10 00	X						0	0	0
WAYNE C OLDENBURG TRUSTEE	10 00	X						0	0	0
THOMAS J O'NEILL TRUSTEE	10 00	X						0	0	0
GUY A OSBORN TRUSTEE	10 00	X						0	0	0

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(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RICHARD R PIEPER SR TRUSTEE	10 00	X						0	0	0
GARY POLINER TRUSTEE	10 00	X						0	0	0
JAMES R POPP TRUSTEE	10 00	X						0	0	0
AUSTIN M RAMIREZ TRUSTEE	10 00	X						0	0	0
DAVID F RADTKE CHAIR	10 00	X		X				0	0	0
WILLIAM L RANDALL TRUSTEE	10 00	X		X				0	0	0
KRISTINE A RAPPE VICE CHAIR	10 00	X		X				0	0	0
TODD M REARDON TRUSTEE	10 00	X						0	0	0
TIMOTHY RIGSBY TRUSTEE	10 00	X						0	0	0
STEPHEN A ROELL TRUSTEE	10 00	X						0	0	0
MARK SABLJAK TRUSTEE	10 00	X						0	0	0
RICHARD R SCHLESINGER TRUSTEE	10 00	X						0	0	0
ALLAN H SELIG TRUSTEE	10 00	X						0	0	0
JOHN S SHIELY TRUSTEE	10 00	X						0	0	0
GUY W SMITH TRUSTEE	10 00	X						0	0	0
THOMAS L SPERO TRUSTEE	10 00	X						0	0	0
JOHN W SPLUDE TRUSTEE	10 00	X						0	0	0
MARY ELLEN STANEK TRUSTEE	10 00	X						0	0	0
MARA SWAN TRUSTEE	10 00	X						0	0	0
ALFONZO THURMAN TRUSTEE	10 00	X						0	0	0
HARRIS TURER TRUSTEE	10 00	X						0	0	0
RONALD L WALTER SECRETARY	10 00	X		X				0	0	0
GORDON J WEBER TREASURER	10 00	X		X				0	0	0
DAVID C WESTGATE TRUSTEE	10 00	X						0	0	0
ARTHUR W WIGCHERS TRUSTEE	10 00	X						0	0	0

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(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JAMES B WIGDALE TRUSTEE	10 00	X						0	0	0
MADONNA WILLIAMS TRUSTEE	10 00	X						0	0	0
SCOTT A WROBBEL TRUSTEE	10 00	X						0	0	0
JAMES L ZIEMER TRUSTEE	10 00	X						0	0	0
ANNE ZIZZO TRUSTEE	10 00	X						0	0	0
DIANE ZORE TRUSTEE	10 00	X						0	0	0
JAMES L CLARK PRESIDENT / CEO	50 00	X		X				237,314	0	119,717
KENNETH ROBERTSON VP FINANCE / CFO	50 00			X				140,689	0	9,503
DENISHA N TATE VP OPERATIONS	50 00					X		119,513	0	11,777
SAMUEL WILLIAMS SR VP COMMUNITY RELATIONS	50 00					X		119,794	0	17,655
DAVID KNUTSON VP GOVERNMENT AFFAIRS	50 00					X		110,460	0	33,816
ERIC P TILLICH VP OF DEVELOPMENT	50 00					X		105,435	0	7,839