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Department of the Treasury Internal Revenue Service

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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

OMB No 1545-0047

Open to Public Inspection

<u>Α Fο</u>	rthe 2	2013 ca	lendar year, or tax year beginning 01-01-2013 , 2013, and ending 12-31-2				
<b>B</b> Che	eck if ap	pplicable	C Name of organization		D Employ	yer idei	ntification number
_	lress char me char	-	Doing Business As		93-05	81470	)
	ıal retur	_	Number and street (sup D.O. hour formal superior delivered to street address). Description				
_	minated		Number and street (or P O box if mail is not delivered to street address) Room/suite 1395 SUMMER ST NE		E Telepho		
┌ Am	ended r	return	City or town, state or province, country, and ZIP or foreign postal code		(503)	581-7	383
Г <sub>Арр</sub>	olication	pending	SALEM, OR 97301		<b>G</b> Gross re	eceıpts \$	5 7,175,441
			F Name and address of principal officer TIMOTHY SINATRA	<b>H(a)</b> Is th		return	
			1395 SUMMER ST NE	subo	rdinates?		ΓYes <b>Γ</b> No
			SALEM,OR 97301	H(b) Are a	all subordıı ded?	nates	☐ Yes ☐ No
I Ta	x-exem	pt status	5			a lıst	(see instructions)
J W	ebsite	: <b>:►</b> W	WW BGC-SALEM ORG	H(c) Grou	ıp exemptı	on nur	mber <b>►</b>
K Forr	n of ora	anızatıo	n		mation 19		State of legal domicile OF
	rt I		nmary			.	
Activities & Governance	- -		PIRE AND ENABLE YOUTH IN GRADES 1-12 WITH A COMPREHENSIV				
উ জ	3 1	Number	of voting members of the governing body (Part VI, line 1a)			з	35
ر ده	l		of independent voting members of the governing body (Part VI, line 1b)			4	35
Ĭ	5 T	Γotal nι	umber of individuals employed in calendar year 2013 (Part V, line 2a) .			5	176
្ន	l		umber of volunteers (estimate if necessary)			6	1,365
	l		elated business revenue from Part VIII, column (C), line 12 elated business taxable income from Form 990-T, line 34			7a	-31,112
	D I	vet um	erated business taxable income nom Form 990-1, line 34		r Year	7b	-31,112 Current Year
	8	Conti	ibutions and grants (Part VIII, line 1h)		3,070,0	96	3,448,394
⋛	9		am service revenue (Part VIII, line 2g)	172,8		164,927	
Revenue	10	Inves	stment income (Part VIII, column (A ), lines 3, 4, and 7d) . . . .	1,8	1,810		
ш.	11		r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		230,9	07	190,858
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line	3,475,6	29 3,805,6		
	13		s and similar amounts paid (Part IX, column (A), lines 1–3)			0	500,000
	14		fits paid to or for members (Part IX, column (A), line 4)			0	0
\$	15	5-10	ies, other compensation, employee benefits (Part IX, column (A), lines )		1,442,0	99	1,505,233
Expenses	16a	Profe	ssional fundraising fees (Part IX, column (A), line 11e) . . . . .		0		
ਡੌ	b		undraising expenses (Part IX, column (D), line 25) ▶180,863				
	17		r expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		796,7	-	1,001,920
	18 19		expenses Add lines 13-17 (must equal Part IX, column (A), line 25) nue less expenses Subtract line 18 from line 12		2,238,8		3,007,153 798,460
Net Assets or Fund Balances					g of Currei ear		End of Year
sset Jafar	20	Total	assets (Part X, line 16)	<u> </u>	4,353,6	75	5,117,165
P. P	21		liabilities (Part X, line 26)		333,3		298,371
	22		ssets or fund balances Subtract line 21 from line 20		4,020,3	34	4,818,794
Unde my kı prepa	nowled irer ha	Ities of	perjury, I declare that I have examined this return, including accompanying belief, it is true, correct, and complete Declaration of preparer (other than knowledge  *** hature of officer	officer) is			
Sign Here			OTHY SINATRA EXECUTIVE DIRECTOR				
		Тур	e or print name and title				
			Print/Type preparer's name Preparer's signature Date JOSHUA MORROW CPA	I CIII	eck if -employed	PTIN P01026	6428
Paid			Firm's name  AKT LLP		n's EIN 🟲 93		
	pare Onl		Firm's address ► 680 HAWTHORNE AVE SE 140	Pho	one no (503)	) 585-77	774
		- 1					

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

✓ Yes ☐ No

Form	990 (2013)					Page 2
Par		<b>nt of Program Serv</b> hedule O contains a res			II	
1	Briefly describe th	ne organization's missior	1			
POT					NEED US MOST, TO REALIZE I THE DEVELOPMENT OF A P	
2	the prior Form 990			ervices during the year	which were not listed on	┌ Yes ┌ No
3		on cease conducting, or		nt changes in how it co	nducts.anv program	
_	services?	= -				┌ Yes ┌ No
	If "Yes," describe	these changes on Sched	lule O			
4	expenses Section		l) organization	s are required to report	ee largest program services, a the amount of grants and alloc	
4a	(Code	) (Expenses \$	2,169,489	including grants of \$	500,000 ) (Revenue \$	9,233 )
	THE CLUB SERVES ON AREAS ACADEMIC SU PROGRAMS OFFERED	/ER 11,900 YOUTH WITH A FOUCCESS, CHARACTER AND CI	OCUS ON A 360 DI TIZENSHIP, AND S WERE PERFORN	EGREE APPROACH, MEETING HEALTHY LIFE STYLES THE 1 1ED ON YOUTH, OVER 76,00	SENSE OF BELONGING, USEFULNESS, 3 ESSENTIAL NEEDS AND IMPACTING Y MPACT OF THE BOYS & GIRLS CLUB O O HEALTHY, LOCALLY SOURCED MEAL	OUTH THROUGH THREE CORE CAN BE SEEN IN THE DIVERSE
	(Code	) (Expenses \$	168,531	including grants of \$	) (Revenue \$	164,973 )
70	•	, , , ,	•	,	YOUTH IN MARION AND POLK COUNT	• •
4c	(Code	) (Expenses \$	206,700	ıncludıng grants of \$	) (Revenue \$	)
	PREPARES HARD TO		NTURY SKILL SET	THAT SUPPORTS AND ALIGN	PLOYMENT PROGRAM THROUGH THE IS ACADEMICS WITH FUTURE CAREER NITIES	
	Other program co	ervices (Describe in Sch	odulo O )			
-ru	(Expenses \$	•	edule O ) luding grants o	of\$	) (Revenue \$	)

2,544,720

Total program service expenses ►

Part IV Checklist of Required Schedule
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	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	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule D, Part I</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 for escrow or custodial account liability, 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 $IV^{\square}$	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 $V^{\bullet}$	10		Νo
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			
а	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		No
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 and XII	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 and XII 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, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts 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 other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts 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 (see instructions)	17		No
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	Yes	
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or 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		No
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? <i>If "Yes," complete Schedule J.</i>	23		No
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 25a	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	<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		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? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			1
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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 direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		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? If "Yes," complete Schedule R, Part I	33		Νo
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		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? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

<b>G</b>	Statements Regarding Other 1RS Fillings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	• •	 Yes	. J No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   27		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
1	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			
	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	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	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		N
	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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
	2. 105, to the 50 of 55, and the organization meriorin 0000 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	5с		
ı	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 as charitable contributions?	6а		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	ı		
	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		N
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			IN
	11 Yes, indicate the number of Forms 8282 med during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Yes	
	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		
	Sponsoring organizations maintaining donor advised funds.			
		9a		
	Did the organization make any taxable distributions under section 4966?			
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against 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			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. See the instructions for additional information the organization must report on Schedule O	13a		L
)	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		_	
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes" has it filed a Form 720 to report these payments? If "No" provide an explanation in Schedule 0	14h		

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 or note to any line in this Part V	Ι.							. \to

	ection 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			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
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			
а	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
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	ایما		
b		10a		Νo
	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?	10a 10b		No
11a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,		Yes	N o
	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10b	Yes	No
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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes	No
b 12a	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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		No
b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a	Yes	No
b 12a b c	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes Yes	No
b 12a b c	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes Yes Yes	No
b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 12a b c 13 14	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 12a b c 13 14 15	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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  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?	10b  11a  12a  12b  12c  13  14	Yes Yes Yes Yes	No
b 12a b c 13 14 15	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
b 12a b c 13 14 15 a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
b 12a b c 13 14 15 a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b  11a  12a  12b  12c  13  14  15a  15b	Yes Yes Yes Yes Yes Yes	
b 12a b c 13 14 15 a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	

- List the States with which a copy of this Form 990 is required to be filed ►OR
- 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
  - ☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)
- 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 during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
  ▶BOYS & GIRLS CLUB OF SALEM 1935 SUMMER ST NE
  SALEM,OR 97301 (503)581-7383

Form 990	(2013	
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#### Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII . . . . . .

#### 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

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, if any 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, or 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 neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(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

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D Repor compen from organizat	table isation the tion (W-	<b>(E)</b> Reportable compensation from related organizations (W	.   -			
		Individual trustee or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	2/1099-	-MISC)	2/1099-MISC)		ganızatı relate organıza	ed	
1b	Sub-Total			•				<u> </u>						
c d	Total from continuation sheet Total (add lines 1b and 1c) .	ts to Part VII, S	ection A	١.	•	•	•	<b>*</b>		183,056		0		12,873
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	l ho receive					<u> </u>
											-		Yes	No
3	Did the organization list any <b>f</b> oon line 1a? <i>If "Yes," complete S</i>					key •	emplo	yee	or highest,	t compen	sated employee	3		No
4	For any individual listed on lin- organization and related organ													
5	Individual	a receive or acc	rue cor	npen	• satir	• on fr	om an	• ע טחי	related org	• • • anızatıon	or individual for	4		No
_	services rendered to the organ											5		No
Se	ection B. Independent Co	ntractors												
1	Complete this table for your five compensation from the organization												ax year	
		(A) Name and business									(B) cription of services		(C) Compen	<del></del>
												$\pm$		
												$\pm$		
												Т		

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  $\blacktriangleright 0$ 

ants unts	1a b
fts, Gr r Amo	c C
ns, Git Simila	e
Contributions, Giffs, Grants and Other Similar Amounts	b c d e f g h
Conti and (	h
venue	2a
исе Ве	С
rogram Serwice Revenue	d e
Progra	2a b c d e f g
	3
	4 5
	6a b
	c d
	7a
	Ь
	c
	d 8a
venue	
ther Re	Ь
₽	c 9a
	ь с 10а
	100
	b c
	11a
	b c
	d e 12
	12

<b>/++</b> 1	Statement o		onse or note to any li	ne in this Part VIII			Г
	Check ii Schedi	ne O contains a resp	onse or note to any n	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a	Federated cam	paigns 1	.a 41,813				
b	Membership du	es 1	<b>.b</b> 17,914				
c	Fundraising eve	ents :	Lc 505,536				
d	Related organiz	ations 1	.d 250,000				
e	Government grants	s (contributions)	.e				
f	All other contribution	ons, gifts, grants, and :	2,633,131				
g	Noncash contribution 1a-1f \$	ons included in lines	70,352				
h	Total. Add lines	s 1a-1f		3,448,394			
			Business Code				
2a	PROGAM FEES		900099	164,927	164,927		
Ь							
C							
d							
e	A.II						
f	All other progra	ım service revenue					
g	Total. Add lines	s 2a – 2f		164,927			
3	and other simila	ome (including divide ar amounts) tment of tax-exempt bor	🟲	952			952
4   5							
	Royalties	(ı) Real	(II) Personal				
6a	Gross rents	113,710	(.,,				
ь	Less rental	109,877					
c c	expenses Rental income	3,833					
d	or (loss) Net rental incoi	l me or (loss)		3,833			3,833
		(ı) Securities	(II) O ther				
7a	Gross amount from sales of assets other	482					
ь	than inventory Less cost or other basis and	0					
_	sales expenses Gain or (loss)	482					
C d	Net gain or (los			482			482
8a	Gross income f events (not inc	rom fundraising					
	\$505	<u>,536</u> reported on line 1c)					
	Jee rait IV, IIII		a 236,524				
ь	Less direct ex	penses	<b>b</b> 162,505				
c	Net income or (	loss) from fundraisin	g events 🛌	74,019			74,019
9a	Gross income f See Part IV, lin						
ь	Loca direction		3,192,389				
c		penses [loss] from gaming ac	3,097,446	94,943		-31,112	126,055
	Gross sales of	inventory, less					
	returns and allo	wances .	0.370				
 	loca cost of "	a ands sold <b>b</b>	9,279				
b c		oods sold <b>b</b> (loss) from sales of ir	0 oventory	9,279	9,279		
	Miscellaneous		Business Code	·			
11a	MISCELLANEC	)US REVENUE	900099	8,784			8,784
ь							
С							
d	All other reven	ne					
e	Total. Add lines	s 11a-11d		8,784			
12	Total revenue.	See Instructions .		3,805,613	174,206	-31,112	214,125

# Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all (

ection 501(c)(3) and 501(c)(4) o	raanizations must com	plete all columns All other o	rganizations must complete colu	ımn (A )

0000	on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All	other organizat	ions must comp	olete column (A )	
	Check if Schedule O contains a response or note to any line in this	Part IX	<u> </u>		<u> </u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations				_
	in the United States See Part IV, line 21	500,000	500,000		
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	195,929	152,053	24,155	19,721
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	1,114,794	869,540	133,775	111,479
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	49,813	35,865	8,468	5,480
9	Other employee benefits	46,681	33,610	7,936	5,135
10	Payroll taxes	98,016	76,452	11,762	9,802
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	20,250	9,113	10,125	1,012
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	19,639	8,837	9,820	982
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	163,602	150,514	8,180	4,908
17	Travel	12,423	9,939	1,863	621
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	12,123	3,333	1,005	<u> </u>
19	Conferences, conventions, and meetings	17,346	13,877	2,602	867
20	Interest	<u> </u>	<u> </u>	<u> </u>	
21	Payments to affiliates				-
22	Depreciation, depletion, and amortization	206,152	179,314	20,645	6,193
23	Insurance	93,621	86,131	4,681	2,809
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	SUPPLIES	185,414	161,311	18,541	5,562
b	AWARDS AND GRANTS	127,570	127,570		
c	MISCELLANEOUS EXPENSES	90,753	80,568	9,259	926
d	TELEPHONE	18,963	13,274	3,793	1,896
e	All other expenses	46,187	36,752	5,965	3,470
25	Total functional expenses. Add lines 1 through 24e	3,007,153	2,544,720	281,570	180,863
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this P		(A) Beginning of year		( <b>B)</b> End of year
	1	Cash-non-interest-bearing		1,946,766	1	539,015
	2	Savings and temporary cash investments			2	599,151
	3	Pledges and grants receivable, net		51,358	3	1,454,086
	4	Accounts receivable, net		82,323	4	41,152
	5	Loans and other receivables from current and former officers, director employees, and highest compensated employees. Complete Part II of Schedule L	of		5	· ·
4ssets	6	Loans and other receivables from other disqualified persons (as define 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributed and sponsoring organizations of section $501(c)(9)$ voluntary employ organizations (see instructions) Complete Part II of Schedule L	buting employers		6	
Š	7	Notes and loans receivable, net			7	
⋖	8	Inventories for sale or use		11,971	8	8,161
	9	Prepaid expenses and deferred charges		0	9	7,741
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  10a	4.700.000		_	<u> </u>
	ь	Less accumulated depreciation 10b	2,339,538	2,243,783	10c	2,450,385
	11	Investments—publicly traded securities	·		11	
	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		17,474	15	17,474
	16	Total assets. Add lines 1 through 15 (must equal line 34)		4,353,675	16	5,117,165
	17	Accounts payable and accrued expenses		194,554	17	261,037
	18	Grants payable		·	18	<u> </u>
	19	Deferred revenue		25,895	19	37,334
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule	D		21	
lities	22	Loans and other payables to current and former officers, directors, tr key employees, highest compensated employees, and disqualified				
Liabili		persons Complete Part II of Schedule L			22	
Ξ	23	Secured mortgages and notes payable to unrelated third parties .		112,892	23	0
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related th and other liabilities not included on lines 17-24) Complete Part X of	ırd partıes, f Schedule			
		D			25	
	26	Total liabilities. Add lines 17 through 25		333,341	26	298,371
S O		Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and lines 27 through 29, and lines 33 and 34.	l complete			
<u>8</u>	27	Unrestricted net assets		3,659,406	27	3,244,607
n n	28	Temporarily restricted net assets		360,928	28	1,574,187
2	29	Permanently restricted net assets			29	
Assets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ complete lines 30 through 34.	┌─ and			
<u>.</u>	30	Capital stock or trust principal, or current funds			30	
Ϋ́ Φ	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		4,020,334	33	4,818,794
_	34	Total liabilities and net assets/fund balances		4,353,675	34	5,117,165

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,8	305,613
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,0	007,153
3	Revenue less expenses Subtract line 2 from line 1	3			798,460
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				
5	Net unrealized gains (losses) on investments	5		4,0	020,334
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		4,8	318,794
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. 区
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	e <b>2c</b>	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain i Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

Software ID: **Software Version:** 

**EIN:** 93-0581470

Name: BOYS & GIRLS CLUB OF SALEM MARION & POLK COUNTIES

Form 990, Part VII - Compensa Compensated Employees, and	ition of Officers, Independent Cor	Direct	ors, ors	Tru	ste	es, k	(ey	Employees, Higl	hest	
(A) Name and Title	(B) A verage hours per week (list any hours	Posit more th perso and a	ion ( han o n is b	ne b oth ctor,	ox, u an of /trus	nless ficer tee)		(D)  Reportable compensation from the organization (W-	(E)  Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
MARK BURNHAM	1 00	х		×		_		0	0	0
PRESIDENT ALEX CASEBEER	1 00									
BOARD MEMBER		Х						0	0	0
BRENT CULVER BOARD MEMBER	1 00	×						0	0	0
MIKE DELK	1 00	х						0	0	0
BOARD MEMBER  JIM EYRE MD DMD	1 00	x						0	0	0
BOARD MEMBER TERRI MERRITT - WORDEN	1 00									
BOARD MEMBER		Х						0	0	0
DAN JOHNSON BOARD MEMBER	1 00	×						0	0	0
MIKE HART	1 00	х						0	0	0
BOARD MEMBER  DAVE HILGEMANN	1 00	×						0	0	0
BOARD MEMBER JIM GRIGGS	1 00									
BOARD MEMBER DON LULAY		×						0	0	0
BOARD MEMBER	1 00	×						0	0	0
RIC MCNALL BOARD MEMBER	1 00	х						0	0	0
MARLA RAE	1 00	Х						0	0	0
BOARD MEMBER JOHN POLLINO	1 00	.,								
BOARD MEMBER BRETT ROBERSON	1 00	X						0	0	0
BOARD MEMBER		Х						0	0	0
ELISA SCHOFIELD  BOARD MEMBER	1 00	×						0	0	0
DAVID TOWRY SR	1 00	х						0	0	0
BOARD MEMBER  JEFFREY THOMAS	1 00	х						0	0	0
BOARD MEMBER DEWEY WHITTON	1 00									0
BOARD MEMBER		Х						0	0	0
ERIC TEMPLETON  VICE PRESIDENT	1 00	×		x				0	0	0
JUSTIN MARTIN	1 00	х		х				0	0	0
VICE PRESIDENT KIMBERLY ZAHR	1 00	х						0	0	0
BOARD MEMBER BOB MARTINSSON	1 00									
TREASURER DAM DOAGU		Х		Х				0	0	0
DAN ROACH SECRETARY	1 00	х		x				0	0	0
MARY EASTRIDGE	1 00	х		х				0	0	0
MEMBER AT LARGE			1	<u> </u>			<u> </u>			<u> </u>

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations	more the person and a	Position (do not check more than one box, unless person is both an officer and a director/trustee)  Officer linguistical officer or directory that the control of the contr					(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
	below dotted line)	Individual trustee or director	Institutional Trustee	ICEI	) employee	Highest compensated employee	mer			organizations
SHERRI PARTRIDGE MEMBER AT LARGE	1 00	x		х				0	0	0
PETE DEMUNIZ	1 00									
BOARD MEMBER		X						0	0	0
LETTIE PRICE	1 00									
BOARD MEMBER		×						0	0	0
CURT ARTHUR	1 00			· ·						0
FOUNDATION CHAIR		Х		Х				0	0	0
ELLIOT GROENEVELD	1 00	х						0	0	0
BOARD MEMBER MATT LOKAN	1.00									
BOARD MEMBER	1 00	х						0	0	0
MIKE LONG	1 00									
BOARD MEMBER	1 00	х						0	0	0
LUKE REESE	1 00									
BOARD MEMBER		Х						0	0	0
GREG OLSON	1 00	х		х				0	0	0
PAST PRESIDENT										
TAD TRUAX	1 00	x						0	0	0
BOARD MEMBER										
CHELSEA ARMSTRONG	1 00	x						0	0	0
BOARD MEMBER TIMOTHY SINATRA	40 00									
	40 00			Х				112,148	0	7,995
EXECUTIVE DIRECTOR  DONNA CARVER	40 00									
DIRECTOR OF FINANCE	40 00			Х				70,908	0	4,878
	<b>.</b>				•					

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DLN: 93493318092334

# OMB No 1545-0047

#### 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.

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Name of the organization
BOYS & GIRLS CLUB OF SALEM MARION & POLK COUNTIES

The organization is not a private foundation because it is (For lines 1 through 11, check only one box )

Employer identification number

93-0581470

3 4	<u>'</u>			perative hospital se						11/41/	iii) Enta	r+ba	
4	,			n organization operat ty, and state	.ea in conjun	iction with a	nospital des	cribed in <b>se</b>	ection 170(b)(	1)(A)(	= mue	er the	
5	Γ			erated for the benefit	t of a college	or universi	ty owned or o	perated by	a governmen	tal unıt	describ	ed ın	
		sect ion	170(b)(1)(	A)(iv). (Complete P	art II )								
6	Γ	A feder	al, state, or	local government or	government	tal unit desc	cribed in <b>sect</b>	ion 170(b)(	1)(A)(v).				
7	굣	_		at normally receives			support from	a governm	ental unit or f	rom the	e genera	public	:
8	Г			on 170(b)(1)(A)(vi). described in <b>section</b>	•	•	mplete Part I	Ι)					
9	Ĺ.	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross											
	•	_		ities related to its ex					•	-		_	
		ıts sup	port from gr	oss investment inco	me and unre	lated busine	ess taxable ır	come (less	section 511	tax) fro	om busın	esses	
		acquire	d by the org	janızatıon after June	30,1975 S	ee <b>section</b>	<b>509(a)(2).</b> (C	omplete Pa	rt III )				
10	Γ	An orga	anızatıon orç	ganızed and operated	dexclusively	to test for	public safety	See <b>sectio</b>	n 509(a)(4).				
e f g	Γ	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											
h		Provide	the following	ng information about	the supporte	ed organizat	ion(s)						
S	) Nam suppor ganiza	rted	(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 US?			(vii) A mount of monetary support	
				macractions,)	Yes	No	Yes	No	Yes	No			
T	1												
Total	1												

Schedule A (Form 990 or 990-EZ) 2013 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I 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 (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 1,339,385 1,817,316 1,889,833 3,070,096 3,448,394 11,565,024 include any "unusual grants ") 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 1,339,385 1,817,316 1,889,833 3,070,096 3,448,394 11,565,024 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 2,761,616 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column Public support. Subtract line 5 8,803,408 from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 **(e)** 2013 (f) Total beginning in) 🟲 11,565,024 1,339,385 1,817,316 1,889,833 3,070,096 3,448,394 Amounts from line 4 Gross income from interest, dividends, payments received on 194,011 190,248 191,982 118,124 114,662 809,027 securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 4 897 6.450 70.746 9 794 90.877 11 12 13 15 16a b 17a

capital assets (Explain in Part	4,897	6,450	70,746	8,78	90,877
Total support (Add lines 7 through 10)					12,464,928
Gross receipts from related activit	ies, etc (see instructi	ons)		12	20,514,907
First five years. If the Form 990 is this box and stop here	<u> </u>	<u> </u>			· —
Section C. Computation of Pul					
Public support percentage for 2013	14	70 630 %			
Public support percentage for 201:	2 Schedule A, Part II,	line 14		15	75 940 %
box and stop here. The organization  10%-facts-and-circumstances test is 10% or more, and if the organization me organization  10%-facts-and-circumstances test 15 is 10% or more, and if the organization in Part IV how the organization Explain in Part IV how the organization Private foundation. If the organizations	:— <b>2013.</b> If the organiza ation meets the "facts-ets the "facts-and-circets the "facts-and-circets the "facts-ation meets the "facts-ation meets the "facts-	tion did not check a beand-circumstances" cumstances" test The tion did not check a bects-and-circumstances"	box on line 13, 16a, or 16b test, check this box and <b>st</b> e organization qualifies as box on line 13, 16a, 16b, or es" test, check this box and test. The organization qual	op here. Expland publicly super 17a, and line distop here. Infess as a publicle.	oported •
			Schedu	ıle A (Form 9	90 or 990-EZ) 2013

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Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I 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

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total					
1	Gifts, grants, contributions, and											
	membership fees received (Do not											
2	include any "unusual grants ") 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											
4	business under section 513 Tax revenues levied for the											
•	organization's benefit and either											
	paid to or expended on its											
_	behalf The value of services or facilities						<u> </u>					
5	furnished by a governmental unit to											
	the organization without charge											
6	<b>Total.</b> Add lines 1 through 5											
7a	A mounts included on lines 1, 2,											
	and 3 received from disqualified persons											
ь	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 (2) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total											
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total					
	in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(4) 2012	(-,	(-,					
9	in) ► A mounts from line 6	(a) 2009	( <b>B)</b> 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	<b>(B)</b> 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)					
9	in) ► A mounts from line 6	(a) 2009	<b>(b)</b> 2010	(6) 2011	(4) 2012	(5,232						
9	in)  A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	<b>(b)</b> 2010	(6) 2011	(4) 2322							
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322							
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012							
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322							
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322							
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012							
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012							
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322							
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322							
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include	(a) 2009	( <b>b)</b> 2010	(6) 2011								
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of	(a) 2009	( <b>b)</b> 2010	(c) 2011								
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	( <b>b)</b> 2010	(6) 2011								
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	( <b>b)</b> 2010	(c) 2011								
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)											
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second									
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,					
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (	on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,					
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here  ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,					
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,					
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization  ic Support Performance (line 8, column ( 2 Schedule A, Paragraphic Performance)  colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or  13, column (f))  ge by line 13, colum	fifth tax year as a	15 16	nization,					
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the state of the sta	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or  13, column (f)) <b>ge</b> by line 13, column	fifth tax year as a	15 16	nization,					

33 1/3% support tests—2012. 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 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. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).								
	Facts And Circumstances Test								
Retu	ırn Reference	Explanation							
		Schodulo A / Form 000 o	000 E7) 201						

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493318092334

OMB No 1545-0047

**SCHEDULE D** 

(Form 990)

Department of the Treasury

### **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

terria	Ticveniue ocivide			Hispeedion
	me of the organization 'S & GIRLS CLUB OF SALEM MARION & POLK COUNTIES			loyer identification number
				0581470
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990	, Part IV, line 6.		·
		(a) Donor advised funds	_	(b) Funds and other accounts
L	Total number at end of year		_	
2	Aggregate contributions to (during year)		_	
3	Aggregate grants from (during year)			
ŀ	Aggregate value at end of year			
5	Did the organization inform all donors and donor advis funds are the organization's property, subject to the o	<del>-</del>	onor advi	sed Yes No
5	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the bene			
22	conferring impermissible private benefit?	the organization answered "Ves"	to Forn	
	rt II Conservation Easements. Complete if		to Form	1 990, Part IV, lille 7.
L	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation		an histor	cally important land area
	Protection of natural habitat			d historic structure
	Preservation of open space	,		
2	Complete lines 2a through 2d if the organization held	a qualified conservation contribution ir	n the forn	n of a conservation
	easement on the last day of the tax year			Hald at the Find of the Warn
_	Total number of conservation easements		2-	Held at the End of the Year
a L			2a	
Ь	Total acreage restricted by conservation easements	orio otriiotiiro ingliidad in (a)	2b	
c	Number of conservation easements on a certified history	• •	2c	
d	Number of conservation easements included in (c) acc historic structure listed in the National Register	quired after 8/17/06, and not on a	2d	
3	Number of conservation easements modified, transfer	red, released, extinguished, or termina	ted by th	e organization during
	the tax year 🛌			
1	Number of states where property subject to conservat	ion easement is located 🛌		
5	Does the organization have a written policy regarding		—— ındlına of	violations, and
	enforcement of the conservation easements it holds?	, , ,	J	√ Yes
5	Staff and volunteer hours devoted to monitoring, inspe	ecting, and enforcing conservation eas	ements o	uring the year
	<b>&gt;</b>			
7	Amount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easemer	nts during	g the year
	<b>▶</b> \$			
3	Does each conservation easement reported on line 2( and section $170(h)(4)(B)(H)$ ?	d) above satisfy the requirements of s	ection 17	70(h)(4)(B)(I)
•	In Part XIII, describe how the organization reports co balance sheet, and include, if applicable, the text of th	e footnote to the organization's financi		
Par	the organization's accounting for conservation easements  Organizations Maintaining Collection	s of Art, Historical Treasures	, or Ot	ner Similar Assets.
	Complete if the organization answered "Y	• • • • • • • • • • • • • • • • • • • •		
La	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote	ets held for public exhibition, education	n, or rese	arch ın furtherance of publıc
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide the following amounts relating to thes	ets held for public exhibition, education		
	(i) Revenues included in Form 990, Part VIII, line 1			<b>▶</b> -\$
	(ii) Assets included in Form 990, Part X			<b>▶</b> \$
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS			
а	Revenues included in Form 990, Part VIII, line 1			<b>-</b> \$

**b** Assets included in Form 990, Part X

Part	Organizations Maintaining Co	<u>llections of Art</u>	<u>, His</u>	tori	cal Ti	<u>reasu</u>	res, or Ot	:hei	<u>' Similar Ass</u>	ets (co	<u>ontinued)</u>
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other record	ds, ch	neck	any of	the follo	owing that a	re a	significant use o	of its	
а	Public exhibition		d	Γ	Loan	or excl	hange progra	ams			
b	Scholarly research		e	Γ	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ın hov	w the	y furth	er the o	organization'	s ex	empt purpose ın		
5	During the year, did the organization solicit of									_	_
Do-	assets to be sold to raise funds rather than t								· ·	Yes	l No
Раг	Escrow and Custodial Arrang Part IV, line 9, or reported an an						i answered	1 1	es to Form 95	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						or other asse	ets r	ot	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	ving t	table						
									Amo	ount	
C	Beginning balance						<u> </u>	1c			
d	Additions during the year						<u>_</u> :	1d			
e	Distributions during the year						_ :	1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	e 21?						Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expl	anatı	on has	been p	rovided in P	art )	<iii< td=""><td></td><td>Γ</td></iii<>		Γ
Pai											
		(a)Current year	(b	<b>)</b> Prior	year	<b>b</b> (c)Tv	wo years back	(d)⊺	hree years back (	<b>e)</b> Four y	ears back
1a	Beginning of year balance										
b	Contributions										
C	Net investment earnings, gains, and losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curi	rent year end balanc	e (lın	e 1g	, colum	nn (a)) ł	held as				
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment ►										
c	Temporarily restricted endowment ▶										
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%									
За	Are there endowment funds not in the posses	ssion of the organiza	ation	that	are hel	d and a	dmınıstered	for	the		
	organization by								- c	Yes	No
	(i) unrelated organizations			•				•	3a(i)		<del>                                     </del>
ь	(ii) related organizations							٠	3b	<del>'                                       </del>	<u> </u> 
4	Describe in Part XIII the intended uses of the							-			<u> </u>
Par	t VI Land, Buildings, and Equipme	nt. Complete if t	he o	rgar	nizatio	n ansv	vered 'Yes'	to	Form 990, Par	t IV, lı	ne
	11a. See Form 990, Part X, line	10.									
	Description of property				) Cost or sis (inves		( <b>b)</b> Cost or ot basis (other		(c) Accumulated depreciation	( <b>d)</b> Bo	ook value
1a L	and						349,	730			349,730
b E	Buildings						3,435,	869	1,826,043		1,609,826
<b>c</b> l	easehold improvements						246,	588	151,184		95,404
d E	Equipment		•				757,	736	362,311		395,425
Total	. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part >	K, colu	ımn (	B), line	10(c).)			▶		2,450,385

See Form 990, Part X, line 12.  (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(2)2001. Turus	Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>F</b>	
Part VIII Investments—Program Related. C	omplete ıf the organızatı	ion answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13.  (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<b>+</b>	
Part IX Other Assets. Complete if the organization		
(a) Descr	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
<b>Part X Other Liabilities.</b> Complete if the organization of the organization of the property	anization answered 'Yes'	to Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
		-
	1	4
	+	-
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>	†
Total (Column (b) mast equal form 330, fart A, coll b) mic 23 /		

Pari	XI	Reconciliation of Re						ts Wit	th Re	evenu	ie pe	er R	<b>leturn</b> Complete if
1	Tota	l revenue, gains, and other										1	4,069,04
2	A mo	unts included on line 1 but	not on Form 990, I	Part VIII, lın	e 12								
а	Net	unrealized gains on investr	nents			.	2a						
b	Dona	ated services and use of fa	cilities				2b			280,2	221		
c	Reco	veries of prior year grants					2c						
d	Othe	er (Describe in Part XIII )				. [	2d			28,3	324		
e	Add	lines <b>2a</b> through <b>2d .</b>				. –					$\overline{\cdot}$	2e	308,54
3	Subt	ract line <b>2e</b> from line <b>1</b> .									. [	3	3,760,49
4	A mo	unts included on Form 990	, Part VIII, line 12	, but not on l	ıne <b>1</b>								
а	Inve	stment expenses not ınclu	ded on Form 990, F	Part VIII, lin	e 7b .		4a						
b	Othe	er (Describe in Part XIII )					4b			45,1	14		
C	Add	lines <b>4a</b> and <b>4b</b>				. –					. [	4c	45,11
5	Tota	l revenue Add lines <b>3</b> and	<b>4c.</b> (This must equa	al Form 990,	Part I, lı	ne 1	2)					5	3,805,61
Part	XII	Reconciliation of Ex if the organization ans						nts W	ith E	xpen	ses	per	Return. Complete
1	Tota	expenses and losses per										1	3,271,53
2	A mo	unts included on line 1 but	not on Form 990, F	Part IX, line 2	25						Ī		
а	Dona	ited services and use of fa	cilities			.	2a			280,	221		
b	Prior	year adjustments				.	2b						
С	Othe	rlosses					2c						
d	Othe	r (Describe in Part XIII )				. [	2d			28,	619		
е	Add	lines <b>2a</b> through <b>2d</b>				. '					$\overline{\cdot}$	2e	308,84
3	Subt	ract line <b>2e</b> from line <b>1</b> .									. [	3	2,962,69
4	A mo	unts included on Form 990	, Part IX, line 25, b	out not on line	e <b>1</b> :								
а	Inve	stment expenses not ınclu	ded on Form 990, F	art VIII, line	e 7b .	.	4a						
b	Othe	r (Describe in Part XIII )				. [	4b			44,	456		
c	Add	lines <b>4a</b> and <b>4b</b>										<b>4</b> c	44,45
5	Tota	l expenses Add lines <b>3</b> and	d <b>4c.</b> (This must eq	ual Form 990	, Part I,	line	18)				. [	5	3,007,15
Part	XIII	Supplemental Info	rmation										•
Part		descriptions required for F 4, Part X, line 2, Part XI,											de any additional
	R	eturn Reference		Ext	olanation								
PART	X, LIN		THE CLUB FOLLO STATES OF AMER THESE STANDAR RECOGNITION, M REQUIRES AN EN POSITION WHEN	RICA RELAT DS PROVID MEASUREME ITITY TO RE	ED TO T E DETAI NT, AND COGNIZ	HE F LED DIS	RECO GUII SCLO HE FI	GNITIO DANCE SURE O NANCI	ON O FOR OF UN ALS	F UNC FINAN ICERT TATEM	ERTA NCIAI AIN 1 1ENT	IN T L ST TAX IMP	TAX POSITIONS ATEMENT POSITIONS IT PACT OF A TAX

	Schedule D (Form 990) 2013
PART XII, LINE 4B - OTHER ADJUSTMENTS	FUNDRAISING EXPENSES NETTED WITH REVENUE ON FINANCIAL STATEMENT 44,456
PART XII, LINE 2D - OTHER ADJUSTMENTS	IN-KIND EXPENSES NETTED WITH SPECIAL EVENT REVENUE 28,324 PY DISPOSAL OF ASSETS DIFFERENCE 295
PART XI, LINE 4B - OTHER ADJUSTMENTS	FUNDRAISING EXPENSES NETTED WITH REVENUE ON FINANCIAL STATEMENT 44,456 PY DISPOSAL OF ASSETS DIFFERENCE 658
PART XI, LINE 2D - OTHER ADJUSTMENTS	IN-KIND EXPENSES NETTED WITH SPECIAL EVENT REVENUE 28,324
	RECOGNITION, MEASUREMENT, AND DISCLOSURE OF UNCERTAIN TAX POSITIONS IT REQUIRES AN ENTITY TO RECOGNIZE THE FINANCIAL STATEMENT IMPACT OF A TAX POSITION WHEN IT IS MORE LIKELY THAN NOT THAT THE POSITION WOULD NOT BE SUSTAINED IF EXAMINED BY A TAXING AUTHORITY MANAGEMENT HAS DETERMINED THAT THE CLUB HAS NO UNCERTAIN TAX POSITIONS AS OF DECEMBER 31, 2013 OR 2012

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

DLN: 93493318092334

OMB No 1545-0047

**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.

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Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

**SCHEDULE G** 

Name of the organization	out Schedule G (Form 990 of 990-	•		ntification number
BOYS & GIRLS CLUB OF SALEM MARION &	POLK COUNTIES		93-0581470	
Part I Fundraising Activities. Co Form 990-EZ filers are not re	mplete if the organizati	on answered "Yes" to part.	to Form 990, Part IV	, line 17.
Indicate whether the organization raised	d funds through any of the t	following activities Che	eck all that apply	
a Mail solicitations	e	Solicitation of non	-government grants	
<b>b</b> Internet and email solicitations	f	Solicitation of gov	ernment grants	
c  Phone solicitations	g	Special fundraisin	g events	
<b>d</b>				
2a Did the organization have a written or or or key employees listed in Form 990, Pa				Г Yes Г No
<b>b</b> If "Yes," list the ten highest paid individed to be compensated at least \$5,000 by to		rs) pursuant to agreem	ents under which the fu	ndraiser is
(i) Name and address of (ii) Action individual or entity (fundraiser)	vity (iii) Did fundraiser have custody or control of contributions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
	Yes No			
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
3 List all states in which the organization registration or licensing	is registered or licensed to	o solicit contributions o	r has been notified it is	exempt from

Cat No 50083H

hedule G	dule G (Form 990 or 990-EZ) 2013 Page 2											
Part II	Fundraising Events. Comp more than \$15,000 of fundra events with gross receipts gr	ising event contribution										
		(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through							

			(a) Event #1	<b>(b)</b> Event #2	(c) O ther events	(d) Total events (add col (a) through
			CIVIL WAR DINNER	CORPORATE SHOOT	3	col (c))
			& AUCTION (event type)	OUT (event type)	(total number)	
Revenue	1	Gross receipts	484,497		160,702	742,060
ф А	2	Less Contributions	328,682	75,468	101,386	505,536
œ	3	Gross income (line 1 minus line 2)	155,81!	21,393	59,316	236,524
	4	Cash prizes		850	)	850
	5	Noncash prizes	3,600	2,066	2,154	7,820
nse	6	Rent/facility costs	1,646	5	13,988	15,634
Expenses	7	Food and beverages .	20,344	4,485	2,921	27,750
Direct	8	Entertainment	1,494	10,900	4,000	16,394
à	9	Other direct expenses .	41,987	7 16,818	35,252	94,057
	10	Direct expense summary Add lir	ies 4 through 9 in columr	n (d)		(162,505)
	11	Net income summary Subtract li	ne 10 from line 3, columi	n (d)	•	74,019
Par	t II	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>₩</u>	1	Gross revenue	2,903,460		288,929	3,192,389
ses	2	Cash prizes	2,127,093		134,830	2,261,923
ben	3	Non-cash prizes	39,699			39,699
Direct Expenses	4	Rent/facility costs	70,695		17,649	88,344
₽ E	5	Other direct expenses	539,918		167,562	707,480
	6	Volunteer labor	✓ Yes	Г Yes% Г No	<ul><li>✓ Yes</li></ul>	
	7	Direct expense summary Add line	s 2 through 5 in column (	(d)		3,097,446
	8	Net gaming income summary Sub	tract line 7 from line 1, co	olumn (d)		94,943
9 a		ter the state(s) in which the organiza the organization licensed to operate		·		. ▼ Yes 「No
b		No," explain				
10a b		re any of the organization's gaming 'Yes," explain	licenses revoked, suspei	nded or terminated during	the tax year?	· · 「Yes 「No

Sche	edule G (Form	990 or 990-EZ) 2013					Page <b>3</b>
							11
Does	s the organiza	tion operate gaming act	ıvıtıes with nonmember	rs?		F	Yes T No
12	Is the organ	nızatıon a grantor, benefi	cıary or trustee of a tru	ust or a member of a	partnership or other en	tıty	
	formed to ac	dminister charitable gam	ning?				┌ Yes ┌ No
13	Indicate the	e percentage of gaming a	ctivity operated in				
а	The organiza	ation's facility				. 13a	100 000 %
b	An outside f	facility				. 13b	%
14	Enter the na	ame and address of the p	erson who prepares the	e organızatıon's gaı	nıng/specıal events boo	ks and records	
	Name 🟲	CATHERINE STUTZN	1 A N 				
	Address 🟲	1395 SUMMER ST N	F				
15a	Does the or	ganızatıon have a contra	ict with a third party fro	om whom the organi	zation receives gaming		
	revenue? .						┌ Yes ┌ No
b	If "Yes," ent	ter the amount of gamin	g revenue received by t	the organization 🟲 s	\$	and the	
	amount of g	amıng revenue retaıned	by the third party 🟲 🖇 _				
C	If "Yes," ent	ter name and address of	the third party				
	Name 🟲						
	Hume P						
	Address 🟲						
16	Gamıng mar	nager information					
	Name 🟲	CATHERINE STUTZM	A N 				
	Gamıng mar	nager compensation 🟲 \$					
	J						
	Description	of services provided 🟲					
				ENERAL LEDGERS	, ADVERTISES, AND O	THER DUTIES	AS ASSIGNED
	☐ Director	officer	<b>▼</b> Employee	Γır	dependent contractor		
17	Mandatory o	distributions					
а	Is the organ	nization required under s	tate law to make charit	able distributions f	rom the gaming proceed	s to	
		tate gaming license? .					┌ Yes ┌ No
b		mount of distributions re			exempt organizations o	rspent	
		ization's own exempt ac			11 5		<u> </u>
Pa		plemental Informa III, lines 9, 9b, 10b,					
		tional information (se		, s, as applicable	. Also complete tills p	zare to provid	io arry
	Retu	ırn Reference			Explanation		
					_		

Schedule I (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

DLN: 93493318092334

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lame of the organization						Employer identi	fication number
BOYS & GIRLS CLUB OF SALE	M MARION & POLK C	OUNTIES				93-0581470	
Part I General Inform	nation on Grants	and Assistance				<b>'</b>	
	to award the grants og ganization's procedure ner Assistance to	rassistance?	e of grant funds in the l Organizations in			ganization answere	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) BOYS & GIRLS CLUB OF SALEM MARION & POLK COUNTIES FOUNDATION 1395 SUMMER ST NE SALEM, OR 97301	93-1038306	501(C)(3)	500,000	0			TO ENABLE CONTINUED YOUTH DEVELOPMENT THROUGH AFTER SCHOOL PROGRAMS IN THE GREATER SALEM AREA
2 Enter total number of sect	:ion 501(c)(3) and gov	ernment organizations	listed in the line 1 table	e		<b>▶</b>	1

П	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990,	Part IV, line 22.
	Part III can be duplicated if additional space is needed.	

(a)Type of grant or assistance	<b>(b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Part IV Supplemental Inform	ation. Provide the inf	ormation required in Pa	art I, line 2, Part III, col	umn (b), and any other a	dditional information.
Return Reference Expla	nation				
				B OF SALEM, MARION AND ANY REQUESTED REPORTS	POLK COUNTIES FOUNDATION

DLN: 93493318092334

OMB No 1545-0047

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**SCHEDULE M** (Form 990)

Department of the Treasury

Internal Revenue Service

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

**Noncash Contributions** 

► Attach to Form 990.

▶Information about Schedule M (Form 990) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>. Name of the organization BOYS & GIRLS CLUB OF SALEM MARION & POLK COUNTIES

**Employer identification number** 

De	rt T. Types of Drenerty			93	-0581470			
Ра	rt I Types of Property	(a) Check If applicable	(b) Number of contributions or items contributed	(c)  Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash contr		-	nts
1	Art—Works of art			19				
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications	Х		84				
5	Clothing and household goods							
	Cars and other vehicles							
7	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .							
	Securities—Closely held stock .							
	Securities—Partnership, LLC, or trust interests							
	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							
	Scientific specimens							
	Archeological artifacts							
	Other►( PLIES - PR)	X	31	23,114				
EQU	Other►( IPMENT AND )	X	4	21,014				
	Other►( FORMANCET)	X	8	6,623	COST			
	Other►(	X	10	2,748	COST			
	Other►( RTS SUPPLI)	Х	11	1,760	COST			
	Other► ( ICE SUPPLI )	Х	7	1,295	COST			
29	Number of Forms 8283 received by th for which the organization completed F				9			
	- ·	,			•	Ι,	Yes	No
30a	During the year, did the organization	receive by (	contribution any property r	eported in Part I, lines 1	through 28, that			
	ıt must hold for at least three years fr	om the date	e of the initial contribution,	, and which is not required	d to be used		- 1	
	for exempt purposes for the entire ho	ldıng period	?			30a		No
b	If "Yes," describe the arrangement in	Part II						
31	Does the organization have a gift acc	eptance po	licy that requires the revie	w of any non-standard co	ntributions?	31		No
32a	Does the organization hire or use thir contributions?	d parties or	related organizations to s	olicit, process, or sell no	ncash 	32a		No
ь	If "Yes," describe in Part II						$\neg$	
	If the organization did not report an a	mount in co	olumn (c) for a type of prop	erty for which column (a)	ıs checked,			

describe in Part II

Part II

Supplemental Information. Provide the information required by Part I, lines 30b,

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference Explanation

Schedule M (Form 990) (2013)

efile GRAPHIC print - DO NOT PROCESS

**SCHEDULE 0** 

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493318092334

OMB No 1545-0047

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# 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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization BOYS & GIRLS CLUB OF SALEM MARION & POLK COUNTIES **Employer identification number** 

93-0581470

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	
FORM 990, PART VI, SECTION B, LINE 11	THE TAX RETURN IS REVIEWED BY THE EXECUTIVE DIRECTOR AND DIRECTOR OF FINANCE. THE DIRECTOR OF FINANCE THEN EMAILS A COPY OF THE RETURN TO EACH OF THE BOARD MEMBERS FOR THEM TO REVIEW AND PROVIDE ANY COMMENTS PRIOR TO FILING
FORM 990, PART VI, SECTION B, LINE 12C	THE BOARD IS ASKED TO REVIEW CONFLICT OF INTEREST POLICY AND MAKE ANY DISCLOSURES AT BOARD MEETINGS ANNUALLY
FORM 990, PART VI, SECTION B, LINE 15	EXECUTIVE COMMITTEE COMPARED COMPENSATION FOR DIRECTORS IN CLUBS ACROSS THE NATION, AND LO OKED AT SALARIES AND COST OF LIVING IN THE SALEM AREA TO DETERMINE COMPENSATION KEY EMPLO YEE SALARIES ARE SET BY THE EXECUTIVE DIRECTOR WITH THE USE OF A RANGE SET BY THE ADMINIST RATIVE PLAN FROM THE BOYS & GIRLS OF AMERICA
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST
FORM 990, PART XII, LINE 2C	THERE HAVE NOT BEEN ANY CHANGES FROM THE PREVIOUS YEAR
FORM 990, PART 1, LINE 1	THE BOYS & GIRLS CLUB OF SALEM, MARION AND POLK COUNTIES EXISTS TO INSPIRE, ENABLE, SUPPOR T, UPLIFT, MOTIVATE, TEACH, AND MENTOR YOUTH IN ORDER TO HELP THEM REACH THEIR FULL POTENT IAL WHATEVER CHALLENGES YOUTH MAY FACE, WE ARE THERE TO HELP THEM SURMOUNT BARRIERS TO SU CCESS AND START GREAT FUTURES OUR PROGRAMS TARGET DISADVANTAGED YOUTH, AND ARE AVAILABLE TO YOUTH OF ALL BACKGROUNDS IN GRADES 1-12 AT SEVEN YOUTH CENTERS, A HEALTH AND DENTAL SER VICES CENTER, AND THROUGH COMMUNITY ATHLETIC LEAGUES

DLN: 93493318092334

2013

OMB No 1545-0047

Open to Public Inspection

**Employer identification number** 

93-0581470

**Related Organizations and Unrelated Partnerships** 

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization

BOYS & GIRLS CLUB OF SALEM MARION & POLK COUNTIES

(Form 990)

**SCHEDULE R** 

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

art I Identification of Disregarded Entities Comple	ete if the organization a	inswered "Yes" on	Form 990, Part	t IV, line 33.				
<b>(a)</b> Name, address, and EIN (ıf applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income E	<b>(e)</b> End-of-year assets	D	(f) Direct controlling entity		
Identification of Related Tax-Exempt Organi or more related tax-exempt organizations during t	<b>zations</b> Complete if the tax year.	ne organization ans	swered "Yes" o	n Form 990, P	art IV,	line 34 because it	had or	ne
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity (if section 50)		<b>(f)</b> Direct controlling entity	Section (13) co ent	tity?
) BOYS & GIRLS CLUB OF SALEM MARION & POLK COUNTIES FOUNDATION 95 SUMMER ST NE LEM, OR 97301 -1038306	ADMINISTER FUNDS AND PROPERTY FOR CHARITABLE AND EDUCATIONAL PURPOSES	OR	501(C)(3)	11A		N/A	Yes	No No
r Paperwork Reduction Act Notice, see the Instructions for Form 990		Cat No 5013	5V			Schedule R (Forn	2 000) 3	013

<b>(a)</b> Name, address, and EIN of related organization		<b>(b)</b> Primary activit	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	<b>(f)</b> Share of total income	(g) Share of end-of-year assets		prtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	<b>j)</b> eral or aging ener?	(k) Percentag ownersh
					J14)			Yes	No	]	Yes	No	
V Identification of Related Org								swere	d "Yes	" on Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)		<b>(d)</b> Direct controllin entity	(e) Type of entit (C corp, S corp, or trust)	y Share of to	total Share	(g) e of end -year ssets		(h) ercentage ownership	Section (b) cont	i) on 512 (13) rolled tity?	!
						<u> </u>			_		Yes		No
									_				+

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No					
<b>1</b> D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related	d organizations lis	ted in Parts II-IV?									
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				<b>1</b> a		No					
b	<b>b</b> Gift, grant, or capital contribution to related organization(s)											
C	c Gift, grant, or capital contribution from related organization(s)											
d	Loans or loan guarantees to or for related organization(s)				1d		No					
e	Loans or loan guarantees by related organization(s)				1e		No					
f	Dividends from related organization(s)				1f		No					
g	Sale of assets to related organization(s)				<b>1</b> g		No					
h	Purchase of assets from related organization(s)				1h 1i		No					
i	i Exchange of assets with related organization(s)											
j	j Lease of facilities, equipment, or other assets to related organization(s)											
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No					
1	Performance of services or membership or fundraising solicitations for related organization(s)				11		No					
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m		No					
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No					
0	Sharing of paid employees with related organization(s)				<b>1</b> 0		No					
р	Reimbursement paid to related organization(s) for expenses				1р		No					
q	Reimbursement paid by related organization(s) for expenses				1q	Yes						
r	O ther transfer of cash or property to related organization(s)				1r		No					
s	Other transfer of cash or property from related organization(s)				1s		No					
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this li											
		<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	<b>(d)</b> Method of determining amo	ount II	nvolved						

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

revenue) that was not a related organization. See instructions i													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	( <b>h)</b> Disproprtiona allocations <sup>7</sup>	_	(i) Code V <sup>2</sup> UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
													_
			<u> </u>				l					<u> </u>	

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#### Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

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