832001 12-31-18

CHANGE OF ACCOUNTING PERIOD

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public.

2018
Open to Public Inspection

Form 990
Department of the Treasury Internal Revenue Service
A For the 2018 calendar

		rtne rreasury nue Service	Go to www.irs.gov/Form990 for instructions and the latest in	nformation.	Inspection				
A F	or the	2018 calend		N 30, 2019	·				
	Check If			D Employer identific	cation number				
а	pplicable	. I	GIRLS CLUBS OF METROPOLITAN						
	Addres	PHOENI	X FOUNDATION						
\vdash	Name change		usiness as	94-28	76537				
一	Initial			E Telephone number					
F	_]return _]Final		BELLEVIEW STREET, BLDG 14	602-95					
L_	return/ termin-			G Gross receipts \$	1,362,550.				
	ated □Amend			H(a) Is this a group return					
\vdash	_}return ∏Applica								
	tion tendin	_ F Name a	nd address of principal officer GLENN PAHNKE	for subordinates					
	SAME AS C ABOVE H(b) Are all subordinates included?								
		e: ► NONE		H(c) Group exemption					
		or garneamont L	X Corporation Trust Association Other ► L Year of	f formation: 1984 N	State of legal domicile: AZ				
Pä	art I	Summary							
a			the organization's mission or most significant activities PROVIDE OPERATIO	NAL SUPPORT FOR					
JLE] 3	THE BOYS A	ND GIRLS CLUBS OF METROPOLITAN PHOENIX.						
Governance	2 (Check this bo	x In the organization discontinued its operations or disposed at more than mambers of the governing body (Rart VI, line 1a)	ban 25% of its net ass	ets				
Š			ing members of the governing body (Fart VI, line Ta)	3					
O.	4 1	Number of Ind	lependent voting members of the governing body (Part VI, line 1b)	S 4					
es (5	Total number	of individuals employed in calendar year 2018 (Part V, line 2a) R MAR $oldsymbol{0}$	5 2020 5	0				
Activities &	6	Total number	of volunteers (estimate if necessary)	<u>ا لا 6</u>	19				
Ćţį	7 a -	Total unrelated	d business revenue from Part VIII, column (C), line 12	N HT 7a	0.				
_	<u>d</u>	Net_unrelated	business taxable income from Form 990-T, line 38	7b					
				Prior Year	Current Year				
Revenue	8 (Contributions	and grants (Part VIII, line 1h)	520,461.	28,108.				
	9 1	Program servi	ce revenue (Part VIII, line 2g)	0.	0.				
eve	10 I	•	come (Part VIII, column (A), lines 3, 4, and 7d)	310,682.	265,691.				
Ě	11 ((Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.				
			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	831,143.	293,799.				
			nilar amounts paid (Part IX, column (A), lines 1-3)	387,032.	394,994.				
			to or for members (Part IX, column (A), line 4)	0,	0.				
**	45 6		compensation, employee benefits (Part IX, column (A), lines 5-10)	84,938.	58,937.				
Expenses	16a F		undraising fees (Part IX, column (A), line 11e)	0,	0.				
)en	h 1		ng expenses (Part IX, column (D), line 25)	<u></u> -					
EX	17 (es (Part IX, column (A), lines 11a·11d, 11f·24e)	74,118.	64,299.				
		•	s Add lines 13-17 (must equal Part IX, column (A), line 25)	546,088.	518,230.				
		•	expenses Subtract line 18 from line 12	285,055.	<224,431.>				
<u></u> ς:	13_	TEVELING 1692	·	inning of Current Year	End of Year				
Net Assets or Fund Balances	20 7	Total access /F	F"	8,099,745.	7,642,765.				
SSE	20 7	•	Part X, line 16) (Part X, line 26)	412,677.	355,537.				
et/	21 7			7,687,068.	7,287,228.				
<u>−</u> ⊒	rt II	Signature	fund balances Subtract line 21 from line 20	,,007,000	7,207,220.				
				to and to the book of min	Impulation and halist A.s.				
			declare that I have examined this return, including accompanying schedules and statement		knowledge and benef, it is				
true,	Correct	, and complete	Declaration of preparer (other than officer) is based on all information of which preparer ha		2612				
_		Sugnatur	e of officer	<u> × 2- ユ-</u> Date	5070				
Sigr	ו	, -		Date					
Her	е		PAHNKE, CHAIR	·					
		Type or p	orint name and title	<u>. </u>	T DTIN				
		Print/Type prep			PTIN				
Paid		AMY A. O'LO	DUGHLIN WWW 1/2 1-	- [7-20 self-employe					
Prep	arer	Firm's name	CBIZ MHM, LLC	Fırm's EIN ▶	34-1884125				
Use	Only	Fırm's address	4722 N 24TH ST, STE 300						
			PHOENIX, AZ 85016	Phone no. 602-	-264-6835				
Mav	the IR	S discuss this	return with the preparer shown above? (see instructions)		X Yes No				

PHOENIX FOUNDATION

AC	DI	10
1,2	94-2876537	Page 3

Part IV Checklist of Required Schedules

			res	_No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	⊢ —
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2	Х	├
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			,,
_	public office? If "Yes," complete Schedule C, Part I	_3_	-	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	١.		,
-	during the tax year? If "Yes," complete Schedule C, Part II	4	 	X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_ ا		x
6	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	_5	<u> </u>	<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			x
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space,	6_		 "
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		
Ŭ	Schedule D, Part III	8		x
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	9	}	x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
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	х	
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		Х
C				
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
q	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		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		x	
125	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	<u> </u>	
120	Schedule D, Parts XI and XII	12a	x	
ь	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
Ū	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	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		х
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		X
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		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	_		
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	_	,	y
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? # "Yes,"	,,		x
20a	complete Schedule G, Part III	19	 	<u></u>
zva b	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts Land II	21	x	
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			γ.	,

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Pai	rt IV Checklist of Required Schedules (continued)			
•			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		1	
		23	x	
04-	Schedule J			
24 a	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	04-		x
	Schedule K If "No," go to line 25a	24a	├──	 ^ -
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	├	—
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c	├──	├ ─
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		⊢ —
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	Ì		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_ X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		х
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 "Yes,"			İ
	complete Schedule L, Part II	26		х
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? If "Yes." complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
20	instructions for applicable filing thresholds, conditions, and exceptions)			
_		28a		х
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		x
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	200		<u> </u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00-		x
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	\vdash	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
	contributions? If "Yes," complete Schedule M	30	\vdash	
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31	 -	Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			l
	Schedule N, Part II	32	<u> </u>	X
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	igsquare	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			1
	Part V, line 1	34	igspace	х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	╙	Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			1
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			1
	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			ĺ
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
•	Note. All Form 990 filers are required to complete Schedule O	38	х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
12	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			1
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			1
C	(gambling) winnings to prize winners?	1c		1
	(gambling) withings to prize withers?		990	(2018)

PHOENIX FOUNDATION

Form	990 (2018) PHOENIX FOUNDATION	94	1-2876537	F	Page 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)				
•				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		_		
	filed for the calendar year ending with or within the year covered by this return	2a	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions		İ	1 _	Í
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule 6)	3b		<u> </u>
	At any time during the calendar year, did the organization have an interest in, or a signature or other a				
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	_4a		Х
ь	if "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	counts (FBAR)		l	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	e organization so	licit		
	any contributions that were not tax deductible as charitable contributions?		6a	<u> </u>	х
b	If "Yes," did the organization include with every solicitation an express statement that such contributi	ons or gifts			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to tl	he payor? 7a	<u>L</u> .	х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	<u> </u>	ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s required			
	to file Form 8282?		7c	<u> </u>	х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontract?	7 <u>e</u>	ļ	х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?	7f		х
9	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 8899 as requ	red? 7g	<u> </u>	<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion file a Form 1	098⋅C? <u>7h</u>	<u> </u>	<u> </u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the			_
	sponsoring organization have excess business holdings at any time during the year?		8	<u> </u>	<u> </u>
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a	ļ	<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		↓
10	Section 501(c)(7) organizations. Enter				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter				
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a	ļ	
b	if "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		}	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			ļ	<u> </u>
а	is the organization licensed to issue qualified health plans in more than one state?		13a	 	ļ
	Note. See the instructions for additional information the organization must report on Schedule O				
b	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	13b			
С	Enter the amount of reserves on hand	13c		₩	ļ.,
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a	₩	Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule		14b	├	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner	ation or		1	
	excess parachute payment(s) during the year?		15	-	X
	If "Yes," see instructions and file Form 4720, Schedule N				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	ıncome?	16	 	X
	If "Yes," complete Form 4720, Schedule O			000	(02:5
			Fori	ո 990	(2018)

			04 20765		_	6
	990 (2018) PHOENIX FOUNDATION		94-28765			age 6
Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 th			"No" re	espons	e
•	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O	See II.	istructions			х
C	Check if Schedule O contains a response or note to any line in this Part VI					Δ,
Sec	tion A. Governing Body and Management				V	
		۱.	و ا		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>	, , , ,	1		,
	If there are material differences in voting rights among members of the governing body, or if the governing	1		1		1
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		8			
b	Enter the number of voting members included in line 1a, above, who are independent	1b	L	1		·
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	any otner	-		- x - '
_	officer, director, trustee, or key employee?		.	2		
3	Did the organization delegate control over management duties customarily performed by or under the	anec	t supervision	,	х	
_	of officers, directors, or trustees, or key employees to a management company or other person?	00	a filad?	4	x	
4	Did the organization make any significant changes to its governing documents since the prior Form 9		s filed?			х
5	Did the organization become aware during the year of a significant diversion of the organization's ass	eis		<u>5</u>		x
6	Did the organization have members or stockholders?	noint i		-		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point	one or	7a		х
	more members of the governing body?	aakha	ldoro or	/a		
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	OCKNO	iders, or	7b		х
	persons other than the governing body?	r by the	following:	10		
0_	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ı uy uu	: lollowing.	8a	т - Х	1
a	The governing body?			8b	x	_
	Each committee with authority to act on behalf of the governing body?	shod a	t tha	- OU		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ileu a	i uie	9		х
Sec	organization's mailing address? If "Yes," provide the names and addresses in Schedule O tion B. Policies (This Section B requests information about policies not required by the Internal Re	V00110	Code			
	tion B. 1 onclos (This Section B requests information about policies not required by the internal ne	verrue	Coue.j		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chi	apters	. affiliates.			
-	and branches to ensure their operations are consistent with the organization's exempt purposes?	•	,	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	befor	e filing the form?	11a	х	
b	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			12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to cont	flicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y					
	in Schedule O how this was done			12c	Х	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	х	
15	Did the process for determining compensation of the following persons include a review and approval	by inc	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			.		
а	The organization's CEO, Executive Director, or top management official			15a		Х
b	Other officers or key employees of the organization			15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements	nent w	ith a		-	
	taxable entity during the year?			16a		<u> </u>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	e its p	articipation			ŧ
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization	zation	ı's	-		
_	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed NONE					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and	990-	T (Section 501(c)(3)s	only) a	avaılab	le
	for public inspection. Indicate how you made these available. Check all that apply					
	Own website Another's website X Upon request Other (explain		•	_		
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, con	flict of	interest policy, and	financi	al	
	statements available to the public during the tax year					
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and	records			
	SWATI WEBB - 602-954-8182					

85008

4309 E BELLEVIEW STREET, BLDG 14, PHOENIX, AZ

Form 990 (2018)

PHOENIX FOUNDATION

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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A)	(B)			(C Pos	C)			(D)	(E)	(F)
Name and Title	Average	(do	not c				one	Reportable	Reportable	Estimated
	hours per week	box	, unle cer ar	ss pe	rson I	s bot)	n an	compensation from	compensation from related	amount of other
	(list any	ē						the	organizations	compensation
	hours for	ğ.				8	į	organization	(W-2/1099-MISC)	from the
	related	tee o	nstee		١	ensat		(W·2/1099·MISC)		organization
	organizations	al trus	nal tr		loyee	E CO				and related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) ROBERT BURGESS	line)	트	SE.	ē	ş.	主旨	요			
	2.00	١.,							0.	,
TRUSTEE (2) MARCIA MINTZ	10.00	Х	_	<u> </u>		_	<u> </u>	0.	· · · · · · · · · · · · · · · · · · ·	0
TRUSTEE/CEO	10.00	x		х				326 047	0.	22 504
(3) DONNA TANNATT	2.00	^		^		\vdash	┝	326,947.	- 0.	22,504
TRUSTEE	2.00	x						0.	0.	0
(4) PETER GUILD	2.00	┢	\vdash	\vdash		-	-	0.	0.	
TRUSTEE	2.00	x		i				0.	0.	0
(5) JOHN KEANE	2.00	 ^	\vdash							
SECRETARY/TREASURER		x		х				0.	0.	0
(6) GLENN PAHNKE	10.00	 -				-				
CHAIR		x		x				0.	0.	0
(7) KEVIN MCHOLLAND	2.00	<u> </u>		<u> </u>				<u> </u>		
TRUSTEE		x						0.	0.	0
(8) JEFF NEWMAN	2.00									
VICE CHAIR		x		х				0.	0.	0
(9) KARRIN TAYLOR ROBSON	2.00									
TRUSTEE		х						0.	0.	0
(10) DALE WANEK	10.00									
CHIEF FINANCIAL OFFICER				X				155,493.	0.	20,419
]	,	
		<u> </u>								••
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Form 990 (2018)

Form 990 (2018)

PHOENIX FOUNDATION

Par	t VII Section A. Officers, Directors, Trus	tees, Key Em	oloy	<u>ees,</u>	and	High t	ghes	t C	ompensated Employee	s (continued)			
•	(A)	(B)	<u> </u>				(D)	(E)		(F)		
	Name and title	Average	Position (do not check more than one					200	Reportable	Reportable		Estimated	
		hours per	ю́ох	unle	ss pe	rson I	s both	an	compensation	compensation	amount		nt of
		week	⊢	cer an	dad	recto	or/trus	tee)	from	from related		oth	
		(list any	director						the	organizations		compen	
		hours for related	5 5	a			ated		organization	(W-2/1099-MISC)	'	from	
		organizations	Individual trustee or	Institutional trustee		, a	Highest compensated employee		(W-2/1099-MISC)			organiz and re	
		below	ual tr	ional		ploye	20.00	l _				organiz	
		line)	pinipi	ıstıtu	Officer	Кеу етрюуее	af eller	Former				Organiz	4110110
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		<u> </u>					<u> </u>	_	482,440.		. 	4	2,923.
	Sub-total								0.		0.		0.
	Total from continuation sheets to Part VI	I, Section A							482,440.		0.		2,923.
	Total (add lines 1b and 1c)				-1 - 1		V da		<u> </u>		٠.۱		2,323.
2	Total number of individuals (including but n	ot limited to th	ose	liste	d ac	ove) wn	o re	eceived more than \$100,	JUU of reportable			0
	compensation from the organization	-										Ye	<u> </u>
_	- · · · · · · · · · · · · · · · · · · ·								hh		Г		+ 10
3	Did the organization list any former officer,		istee	е, ке	y en	npio	yee,	or i	nignest compensated en	ipioyee on			x
	line 1a? If "Yes," complete Schedule J for s										⊢	3	+
4	For any individual listed on line 1a, is the su									ne organization		4 X	
_	and related organizations greater than \$150										⊢	4 ^	+-
5	Did any person listed on line 1a receive or a							elate	ed organization or individ	ual for services		5 X	
	rendered to the organization? If "Yes." com	iplete Schedule	e J fo	or su	ch t	oers	on					5 X	
	tion B. Independent Contractors									100,000 -4			
1	Complete this table for your five highest co										Satio	III IIOM	
	the organization Report compensation for	the calendar ye	ear e	nain	ig w	itn c	or wi	<u>inin</u>		ar		(C)	
	(A) Name and business	address	NO	UF.					(B) Description of s	ervices	Со	(C) mpensat	ion
	Traine and business		110										
													
		<u> </u>	_			-		\dashv					
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_	Tatal a make of male and a star star star star star star star st	a ali i dima a la cata	A 1	n.+ c =	1 +		n 1		about who received	ro than		-	
2	Total number of independent contractors (ii		ノレルカ	med	ונטו		se IIS O	ıea	above) who received mo	ric lilati			
	\$100,000 of compensation from the organic	zation										orm 99 0	(2019)
											F	OIIII JAC	• (∠UIB)

94-2876537 Page 9 PHOENIX FOUNDATION Form 990 (2018) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections 512 - 514 (B) (C) Unrelated Related or Total revenue exempt function business revenue revenue 1a 1 a Federated campaigns 1b **b** Membership dues c Fundraising events 1c 1d d Related organizations Government grants (contributions) All other contributions, gifts, grants, and 28,108 similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 28,108, h Total. Add lines 1a-1f Business Code 2 a Program Service f All other program service revenue Total. Add lines 2a-2f Investment income (including dividends, interest, and 330,843. 330,843. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other 1,003,599. assets other than inventory b Less cost or other basis 1,068,751 and sales expenses <65,152.> c Gain or (loss) <65,152.> <65,152.> d Net gain or (loss) 8 a Gross income from fundraising events (not Revenue including \$ contributions reported on line 1c) See Part IV, line 18 Other b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 11 a

832009 12-31-18

265,691. Form **990** (2018)

293,799.

d All other revenue e Total. Add lines 11a-11d

Total revenue See instructions

PHOENIX FOUNDATION

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising (C) Do not include amounts reported on lines 6b, Total expenses Program service Management and 7b, 8b, 9b, and 10b of Part VIII general expenses expenses expenses Grants and other assistance to domestic organizations 394,994 394,994. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 55,939, 55,939 7 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 1,187 1,187. Other employee benefits 1,811, 1,811. 10 Payroll taxes Fees for services (non-employees) 11 Management b Legal 13,200, 13,200, Accounting C d Lobbying Professional fundraising services. See Part IV, line 17 13,756, 13,756, Investment management fees Other (If line 11g amount exceeds 10% of line 25, 4,467 4,467. column (A) amount, list line 11g expenses on Sch O.) 12 Advertising and promotion 475. 475. Office expenses 13 14 Information technology 15 Royalties 4,603. 4,603 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 1,096. 1,096. 19 Conferences, conventions, and meetings 20 Interest Payments to affiliates 21 22 Depreciation, depletion, and amortization 19,752. 19,752 23 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.) EQUIPMENT/MAINTENANCE 5,553. 5,553 1,152. TELEPHONE 1,152 PRINTING/PUBLICATIONS 208, 208 37, COMMISSIONS AND TRADING 37. d e All other expenses 518,230. 394,994. 123,236, 0. Total functional expenses Add lines 1 through 24e 25 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)

Form 990 (2018)

``	rt X	Check if Schedule O contains a response or not	e to any line in this Part X			
		One of the original of the original of the original of the original of the original of the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original or the original original original original original original original original original original original		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1	
	2	Savings and temporary cash investments		827.	2	4,647.
	3	Pledges and grants receivable, net		189,361.	3	10,122.
	4	Accounts receivable, net	0.	4	393,169.	
	5	Loans and other receivables from current and fo	rmer officers, directors,			
		trustees, key employees, and highest compensa				
		Part II of Schedule L	, , , ,		5	
	6	Loans and other receivables from other disqualit	fied persons (as defined under	, 		
		section 4958(f)(1)), persons described in section	i			
		employers and sponsoring organizations of sect	,		_	
G		employees' beneficiary organizations (see instr)			6	
Assets	7	Notes and loans receivable, net			7	
As	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other	1			
		basis Complete Part VI of Schedule D	10a 405,242.			
	ь	Less accumulated depreciation	10b	405,242.	10c	405,242.
	11	Investments - publicly traded securities		6,958,645.	11	6,679,677.
	12	Investments - other securities See Part IV, line 1	1	402,629.	12	341.
	13	Investments - program-related See Part IV, line	11		13	<u></u>
	14	Intangible assets			14_	
	15	Other assets See Part IV, line 11		143,041.	15	149,567.
	16	Total assets. Add lines 1 through 15 (must equal	al line 34)	8,099,745.	16	7,642,765.
	17	Accounts payable and accrued expenses		25,645.	17	123,511.
	18	Grants payable		387,032.	18	232,026.
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete I	Part IV of Schedule D		21	
Ş	22	Loans and other payables to current and former	officers, directors, trustees,			
ij		key employees, highest compensated employee	s, and disqualified persons			
Labilities		Complete Part II of Schedule L	-		22	
j	23	Secured mortgages and notes payable to unrela	ted third parties		23	
	24	Unsecured notes and loans payable to unrelated	d third parties		24_	
	25	Other liabilities (including federal income tax, pa				
		parties, and other liabilities not included on lines	17-24) Complete Part X of			
		Schedule D	-	410.677	25	255 527
	26	Total liabilities. Add lines 17 through 25		412,677.	26	355,537.
		Organizations that follow SFAS 117 (ASC 958				
es		complete lines 27 through 29, and lines 33 an	d 34.	4 205 229		3,889,888.
S C	27	Unrestricted net assets	-	4,295,228.	27	3,009,000.
Bal	28	Temporarily restricted net assets	-	3,391,840.	28	3,397,340.
둳	29	Permanently restricted net assets	· _ · ·	3,391,040.	_29_	3,397,340.
Ē		Organizations that do not follow SFAS 117 (A				
ō		and complete lines 30 through 34.	-	- 00		
iets	30	Capital stock or trust principal, or current funds		30		
Ass	31	Paid-in or capital surplus, or land, building, or ed			31 32	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	come, or other tunds	7,687,068.	33	7,287,228.
~	33	Total net assets or fund balances	ŀ	8,099,745.		7,642,765.
	34	Total liabilities and net assets/fund balances		0,033,143.	34	1,042,703.

Form **990** (2018)

BOYS & GIRLS CLUBS OF METROPOLITAN

	n 990 (2018) PHOENIX FOUNDATION	94-287653	7	Pa	<u>ıge</u> 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				Х
1	Total revenue (must equal Part VIII, column (A), line 12)	1		293	,799.
2	Total expenses (must equal Part IX, column (A), line 25)	2		518	,230.
3	Revenue less expenses Subtract line 2 from line 1	3	<	224,4	131.>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7	,687	068.
5	Net unrealized gains (losses) on investments	5	<	181,9	35.>
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		6	526.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	1			
	column (B))	10	7	, 287	228.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
		,		Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule ()			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				}
b	Were the organization's financial statements audited by an independent accountant?	Ĺ	2b	Х	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis	Ĭ			ĺ
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	Ĺ	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sched	fule O	ł		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	le Audit			
	Act and OMB Circular A-133?	L	_3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2018)

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SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047

Open to Public Inspection

Name of the organization BOYS & GIRLS CLUBS OF METROPOLITAN Employer identification number PHOENIX FOUNDATION 94-2876537 Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 12, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(ıv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). X 12 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV. Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization 1 Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the organization listed (I) Name of supported (II) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document (described on lines 1.10 organization support (see instructions) support (see instructions) Yes above (see instructions)) BGC METRO PHX 86-0107639 7 Х 394 994

Total

11200116 143399 178915

0.

394 994

(f) Total

BOYS & GIRLS CLUBS OF METROPOLITAN Schedule A (Form 990 or 990-EZ) 2018 PHOENIX FOUNDATION 94-2876537 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 (d) 2017 (e) 201<u>/8</u> Calendar year (or fiscal year beginning in) (a) 2014 (c) 2016 (b) 2015 1 Gifts, grants, contributions, and membership fees received (Do not 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

Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4

Section B. Total Support

Calenda	r year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 An	nounts from line 4						
8 Gr	oss income from interest,						
dıv	ridends, payments received on		/				
se	curities loans, rents, royalties,		/				
an	d income from similar sources			_			
9 Ne	et income from unrelated business						
act	tivities, whether or not the						
bu	siness is regularly carried on						
10 Ot	her income Do not include gain						
or	loss from the sale of capital						
200	sets (Evoluin in Part VI)	/					

Total support. Add lines 7 through 10 Gross receipts from related activities, etc (see instructions)

First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)

Section C. Computation of Public Support Percentage	

14	Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	<u> </u>	
15	Public support percentage from 2017 Schedule A, Part II, line 14	15_		9/
16a	33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or m	ore, o	check this box and	

stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box

and stop here. The organization qualifies as a publicly supported organization

17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets, the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10%/-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the ofganization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2018

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BOYS & GIRLS CLUBS OF METROPOLITAN Schedule A (Form 990 or 990-EZ) 2018 PHOENIX FOUNDATION 94-2876537 Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 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 (c) 2016(d) 2017 (e) 2018 (f) Total (a) 2014 (b) 2015 Calendar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b 8 Public support. (Subtract line 7c from line 6) Section B. Total Support (a) 2014 **(b)** 2015 (e) 2018 (f) Total (c) 2016(d) 2017 Calendar year (or fiscal year beginning in) 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b. whether or not the business is regularly carried on 12 Other income Do not include gair, or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop/here Section C. Computation of Public Support Percentage % Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 15 16 % Public support percentage from 2017 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) % 17 18 Investment income percentage from 2017 Schedule A, Part III, line 17 % 19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more, than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. 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

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Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A. D. and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and If you checked 12a or 12b in Part I, answer (b) and (c) below
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?
 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	- · 1	x	
	2		
	3a		
	_3b		- *
	3с_	_ `	
	- 4a		X
	4b		_ ,
	40		1
	4c	-	زا
	5a		<u> </u>
	5b 5c		
	6		x
	7		X -
	 8		х .
	<u> </u>		
	9a	~	X
	9b		<u>x</u>
	- 9c		<u>x</u>
	-		x 1
ŀ	10a		
99	10b 90 or 99	<u>-</u> - 0-EZ)	2018

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Pa	rt IV Supporting Organizations (continued)			,
•			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		,	_
	below, the governing body of a supported organization?	11a		Х
b	A family member of a person described in (a) above?	11b		Х
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		Х
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			_
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	ľ		
	Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated,		,	
	supervised, or controlled the supporting organization.	2	[-
Sec	tion C. Type II Supporting Organizations	1		
	don't i typo ii cuppo tinig o igamento.		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1	- ~-	
Sec	tion D. All Type III Supporting Organizations			
000	All Type III dupporting digunizations		Yes	No
4	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
1	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
		1	- X	
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	<u> </u>		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		x -	
_	the organization maintained a close and continuous working relationship with the supported organization(s)			Η.
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			٠
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	3	x	- '
800	supported organizations played in this regard. Ition E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see insti	uctions).		
a	The organization satisfied the Activities Test. Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below		1	
C	The organization supported a governmental entity Describe in Part VI how you supported a government entity	(see instructions)	Yes	No
2	Activities Test Answer (a) and (b) below.		162	140
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			·
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	-		
	that these activities constituted substantially all of its activities	2a		<u> </u>
b	··]		
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			'
	reasons for the organization's position that its supported organization(s) would have engaged in these		-	
	activities but for the organization's involvement	2b	 	
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		-	
	trustees of each of the supported organizations? Provide details in Part VI.	3a	ļ	<u> </u>
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		~	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (B) Current Year (A) Prior Year Section A - Adjusted Net Income (optional) 0. 0. 1 Net short-term capital gain 0. 2 2 Recoveries of prior-year distributions 330.843, 270,741. 3 Other gross income (see instructions) 3 330,843. 270 741 4 Add lines 1 through 3 4 0. 5 Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or 159,056. 123,236. maintenance of property held for production of income (see instructions) 6 Other expenses (see instructions) 7 111,685. 207,607. Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year (A) Prior Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) 7,440,279 5,852,467. a Average monthly value of securities 1a 20,566. 34,092. 1b b Average monthly cash balances 1,140,273. 795,637. 1c c Fair market value of other non-exempt-use assets 8,601,118, 6,682,196. 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI) n ٥ 2 Acquisition indebtedness applicable to non-exempt-use assets 6,682,196. 8,601,118. 3 3 Subtract line 2 from line 1d Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, 129,017 100,233. 6,581,963. 5 8,472,101, Net value of non-exempt-use assets (subtract line 4 from line 3) 296,524. 230,369. 6 6 Multiply line 5 by 035 0 . 0. 7 Recoveries of prior-year distributions 230,369. 296,524 Minimum Asset Amount (add line 7 to line 6) 8 **Current Year** Section C - Distributable Amount 111,685. 1 Adjusted net income for prior year (from Section A, line 8, Column A) 94,932. 2 Enter 85% of line 1 296,524. 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 296,524. 4 Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 5 Distributable Amount. Subtract line 5 from line 4, unless subject to 296,524. emergency temporary reduction (see instructions) _ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

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instructions)

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	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nizations (continued)	-	
Sect	ion D - Distributions	Current \	Year		
1	Amounts paid to supported organizations to accomplish exer	mpt purposes			394,994.
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity				
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations			
4	Amounts paid to acquire exempt-use assets				
5	Qualified set-aside amounts (prior IRS approval required)				
6	Other distributions (describe in Part VI) See instructions				
7	Total annual distributions. Add lines 1 through 6				394,994.
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
_	(provide details in Part VI) See instructions	,			394,994.
9	Distributable amount for 2018 from Section C, line 6				296,524.
10	Line 8 amount divided by line 9 amount				100%
	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distribut Amount fo	
1	Distributable amount for 2018 from Section C, line 6		<u> </u>		296,524.
2	Underdistributions, if any, for years prior to 2018 (reason-				
_	able cause required- explain in Part VI). See instructions				
3	Excess distributions carryover, if any, to 2018				
	From 2013				
	From 2014				
	From 2015				1
	From 2016 259,172.				
	From 2017 387,032.				
f	Total of lines 3a through e	646,204.			
a	Applied to underdistributions of prior years				
	Applied to 2018 distributable amount				296,524.
	Carryover from 2013 not applied (see instructions)				
	Remainder Subtract lines 3g, 3h, and 3i from 3f	349,680.			
4	Distributions for 2018 from Section D,				
	line 7 \$ 394,994.				
а	Applied to underdistributions of prior years				
b	Applied to 2018 distributable amount				
	Remainder Subtract lines 4a and 4b from 4	394,994.			
5	Remaining underdistributions for years prior to 2018, if				
	any Subtract lines 3g and 4a from line 2 For result greater				
	than zero, explain in Part VI. See instructions				
6	Remaining underdistributions for 2018 Subtract lines 3h				
	and 4b from line 1 For result greater than zero, explain in				
	Part VI See instructions				
7	Excess distributions carryover to 2019. Add lines 3j				
_	and 4c	744,674.			
8_	Breakdown of line 7				
а	Excess from 2014				
_ b	Excess from 2015				
	Excess from 2016				
	Excess from 2017 349,680.				
е	Excess from 2018 394,994.			<u> </u>	
	·		0	/F 000 000	ET 0040

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018 PHOENIX FOUNDATION

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information (See instructions.) PART IV, SECTION D, LINE 2: THE BOARD OF DIRECTORS SHALL CONSIST OF NOT LESS THAN 3 OR MORE THAN 9 PERSONS. UNTIL CHANGED, THE BOARD OF DIRECTORS SHALL CONSIST OF 9 DIRECTORS, 3 OF WHOM AT ALL TIMES SHALL CONSIST OF THE THEN CURRENT PRESIDENT CHAIRPERSON OF THE BOARD AND TREASURER OF THE BOYS & GIRLS CLUBS OF METROPOLITAN PHOENIX, INC., THE SUPPORTED ORGANIZATION. THIS RELATIONSHIP PROVIDES FOR A CLOSE AND CONTINUOUS WORKING RELATIONSHIP WITH THE SUPPORTED ORGANIZATION. PART V, SECTION D, LINE 3 THE FOUNDATION WAS ESTABLISHED IN 1984 WITH THE PRIMARY PRINCIPLES GOALS, ASPIRATIONS AND INTERESTS TO BE CONSISTENT WITH THOSE OF THE BOYS & GIRLS CLUBS OF METROPOLITAN PHOENIX, INC. AND RELATED ORGANIZATIONS AND THE CONSTITUENCY OF CHILDREN THEY SERVE. DISTRIBUTIONS MADE BY THE FOUNDATION SHALL BE LIMITED TO THOSE TO OR FOR THE BENEFIT OF THE BOYS & GIRLS CLUBS OF METROPOLITAN PHOENIX, INC. THE FOUNDATION SHALL MAKE AGGREGATE ANNUAL DISTRIBUTIONS TO THE BOYS & GIRLS CLUBS OF METROPOLITAN PHOENIX, INC. IN AN AMOUNT EQUAL TO 5.25% OF THE 36-MONTH ROLLING AVERAGE OF THE FOUNDATION'S CORPUS. IF AND TO THE EXTENT THE BOYS & GIRLS CLUBS OF METROPOLITAN PHOENIX, INC. DISCLAIMS SUCH DISTRIBUTION IN ANY GIVEN YEAR, SUCH DISTRIBUTION SHALL BE RETAINED BY THE FOUNDATION, THE FOUNDATION HAS HAD A CLOSE AND CONTINUOUS RELATIONSHIP WITH THE BOYS & GIRLS CLUBS OF METROPOLITAN PHOENIX SINCE ITS INCEPTION. OVERLAPPING BOARD MEMBERS BETWEEN THE CLUB AND THE FOUNDATION PROVIDE THE SUPPORTED ORGANIZATION WITH A SIGNIFICANT VOICE IN THE SELECTION OF THE GRANT RECIPIENT AND INDIRECTLY WITH THE USE OF THE INCOME AND

ASSETS OF THE FOUNDATION.

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

BOYS & GIRLS CLUBS OF METROPOLITAN

PHOENIX FOUNDATION

Employer identification number 94-2876537

Pa	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the					
	organization answered "Yes" on Form 990, Part IV, line 6					
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advise	ed funds			
	are the organization's property, subject to the organization's	_	Yes No			
6	Did the organization inform all grantees, donors, and donor a	_	used only			
	for charitable purposes and not for the benefit of the donor o		-			
	impermissible private benefit?	, , , ,	Yes No			
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, F				
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)				
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of a histo	oncally important land area			
	Protection of natural habitat		ified historic structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form of	of a conservation easement on the last			
	day of the tax year		Held at the End of the Tax Year			
а	Total number of conservation easements					
b	Total acreage restricted by conservation easements		2b			
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c			
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic structur	re			
	listed in the National Register		2d			
3	Number of conservation easements modified, transferred, rela	eased, extinguished, or terminated by the	organization during the tax			
	year ▶					
4	Number of states where property subject to conservation eas	ement is located >				
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling of				
	violations, and enforcement of the conservation easements it	holds?	Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	ervation easements during the year			
						
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservat	ion easements during the year			
	▶ \$					
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h	n)(4)(B)(ı)			
	and section 170(h)(4)(B)(ii)?		Yes No			
9	In Part XIII, describe how the organization reports conservation	•				
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes t	he organization's accounting for			
D-	conservation easements	Art Historical Transcriptor on Oth	an Cimilan Assats			
Pai	t III Organizations Maintaining Collections of		ner Similar Assets.			
	Complete if the organization answered "Yes" on Form	· · · · · · · · · · · · · · · · · · ·				
1a	If the organization elected, as permitted under SFAS 116 (AS	•				
	historical treasures, or other similar assets held for public exh		ice of public service, provide, in Part XIII,			
	the text of the footnote to its financial statements that describ					
b	If the organization elected, as permitted under SFAS 116 (AS					
	treasures, or other similar assets held for public exhibition, ed	lucation, or research in furtherance of pub	lic service, provide the following amounts			
	relating to these items					
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$			
	(ii) Assets included in Form 990, Part X		> \$			
2	If the organization received or held works of art, historical treat		gaın, provide			
	the following amounts required to be reported under SFAS 11	16 (ASC 958) relating to these items				
а	Revenue included on Form 990, Part VIII, line 1		▶ \$			
b	Assets included in Form 990, Part X		\$			

Schedule D (Form 990) 2018

BOYS & GIRLS CLUBS OF METROPOLITAN 94-2876537 PHOENIX FOUNDATION Page 2 Schedule D (Form 990) 2018 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply) Loan or exchange programs Public exhibition а Scholarly research Other b Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? No Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included No Yes on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and complete the following table **Amount** 1c c Beginning balance Additions during the year 10 Distributions during the year 1e 1f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10 (d) Three years back (a) Current year (b) Prior year (c) Two years back (e) Four years back 3,059,857. 3,060,840. 2,905,632. 3,391,840 3,361,564. 1a Beginning of year balance 50,000. 83,019. 5,500. 30,276. 228,145, Contributions b 30,887. 230,533. 329,261. 105,208. <149,092.> Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities 88,152. 230,533. 256,682. 30,887 and programs Administrative expenses 3,397,340. 3,391,840. 3,361,564. 3,060,840 2,905,632. End of year balance

_	•			
2	Provide the estimated	percentage of the current year end balance (line 1g.	column (a)) held as

a Board designated or quasi-endowment

100,00 **b** Permanent endowment ▶

Temporarily restricted endowment

The percentages on lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization

by

(i) unrelated organizations

(ii) related organizations

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

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

	Yes	No
3a(i)		X
3a(ii)		X
3b		

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	405,242.			405,242.
b Buildings				
c Leasehold improvements				
d Equipment		,		
e Other			<u> </u>	
Total. Add lines 1a through 1e (Column (d) mus	at equal Form 990. Part X. colum	nn (B), line 10c.)		405,242.

Schedule D (Form 990) 2018

	(a) Description	(b) Book value
(1		
(2		
(3		
(4		
(5)	
(6)	
(7		
(8		
(9		
Total	(Column (b) must equal Form 990. Part X. col. (B) line 15.)	

Part X Other Liabilities.

(b) Book value (a) Description of liability 1. (1)Federal income taxes (2)(3)(4) (5)(6)

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25

(9) Total. (Column (b) must equal Form 990. Part X. col. (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2018

(7)(8)

Page 4

PHOENIX FOUNDATION

Pai	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	evenue per ne	turn.	
1	Total revenue, gains, and other support per audited financial statements		1	104,634.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		<u> </u>	
~ a	Net unrealized gains (losses) on investments	<181,935.>		
b	Donated services and use of facilities 2b	·	1	
c	Recoveries of prior year grants 2c		1 1	
d	Other (Describe in Part XIII)	6,526.	1	
e	Add lines 2a through 2d		2e	<175,409.>
3	Subtract line 2e from line 1		3	280,043.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	13,756.		
b	Other (Describe in Part XIII)]	
c	Add lines 4a and 4b	-	4c	13,756.
_5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	293,799.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With E	xpenses per F	Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a		, ,	504 474
1	Total expenses and losses per audited financial statements		1	504,474.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities 2a			
Ь	Prior year adjustments 2b			
C	Other losses 2c			
đ	Other (Describe in Part XIII)			0.
e	5		2e	504,474.
3 4	Subtract line 2e from line 1		3	
•	Amounts included on Form 990, Part IX, line 25, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b 4a	13,756.		
a b	Other (Describe in Part XIII)			
	Add lines 4a and 4b		4c	13,756.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	518,230.
Pai	t XIII Supplemental Information.			
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional informat		, Part X, Im	e 2, Part XI,
PART	II, LINE 5:			
THE	INTENDED USE OF THE ENDOWMENT IS TO PROVIDE STEADY, ONGOING, RELIABLE			
FINA	NCIAL SUPPORT TO THE CLUBS.			
PART	x, LINE 2:			
THE	FOUNDATION QUALIFIES AS A TAX-EXEMPT ORGANIZATION UNDER SECTION 501			
(0)(3) OF THE INTERNAL REVENUE CODE ("IRC") AND, ACCORDINGLY, THERE IS NO			
PROV	ISION FOR INCOME TAXES. IN ADDITION, THE FOUNDATION QUALIFIES FOR THE			
CHAR	ITABLE CONTRIBUTION DEDUCTION UNDER SECTION 170 OF THE IRC AND HAS			
BEEN	CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION.			
INCO	ME DETERMINED TO BE UNRELATED BUSINESS TAXABLE INCOME ("UBTI") WOULD			
BE T	AXABLE. THE FOUNDATION EVALUATES ITS UNCERTAIN TAX POSITIONS, IF ANY,			
832054	10-29-18	;	Schedule I	D (Form 990) 2018

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BOYS & GIRLS CLUBS OF METROPOLITAN

Schedule D (Form 990) 2018 PHOENIX FOUNDATION	94-2876537	Page 5
Part XIII Supplemental Information (continued)		
ON A CONTINUAL BASIS THROUGH REVIEW OF ITS POLICIES AND PROCEDURES, REVIEW		
OF ITS REGULAR TAX FILINGS, AND DISCUSSIONS WITH OUTSIDE EXPERTS. THE		
FOUNDATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS		
TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE		
MATERIAL TO THE FINANCIAL STATEMENTS.		
THE FOUNDATION'S FEDERAL RETURN OF ORGANIZATIONS EXEMPT FROM INCOME TAX		
(FORM 990) FOR FISCAL 2016, 2017 AND 2018 ARE SUBJECT TO EXAMINATION BY		
THE INTERNAL REVENUE SERVICE ("IRS"), GENERALLY FOR THREE YEARS AFTER THEY		
WERE FILED.	<u>_</u>	
PART XI, LINE 2D - OTHER ADJUSTMENTS:		
CHANGE IN CASH SURRENDER VALUE OF LIFE INSURANCE 6,526.		
		<u></u>
	<u> </u>	
		·
		

SCHEDULE I (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Parti

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

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

► Go to www.irs.gov/Form990 for the latest information. ► Attach to Form 990.

OMB No 1545-0047	2018	Open to Public	Inspection

Employer identification number 94-2876537 BOYS & GIRLS CLUBS OF METROPOLITAN General Information on Grants and Assistance PHOENIX FOUNDATION

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection

criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	stance? ocedures for monit	oring the use of grant f	funds in the United	States			X Yes No
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	Domestic Organis	zations and Domestic be duplicated if addition	Governments. Conal space is neede	omplete if the orga	nization answered "Y	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUBS OF METROPOLITAN PHOENIX - 4309 E BELLEVIEW STREET - PHOENIX, AZ 85008	86-0107639	501(C)(3)	394,994.	0			OPERATIONS
	,						
 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table 	nd government or	ganizations listed in the	e line 1 table				1-

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

Schedule I (Form 990) (2018)

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

PHOENIX FOUNDATION

Schedule I (Form 990) (2018)

Part III

(f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information (d) Amount of non-cash assistance (c) Amount of cash grant FOUNDATION'S BOARD MEETINGS AND REPORT HOW THE FOUNDATION'S GRANTS ARE SPENT, GRANTEE MONTHLY FINANCIAL STATEMENTS ARE ALSO MONITORED FOR MANAGEMENT OF THE BOYS AND GIRLS CLUB OF METRO PHOENIX ATTEND THE (b) Number of recipients (a) Type of grant or assistance COMPLIANCE WITH GRANT PROVISIONS, PART I, LINE 2: Part IV

Schedule I (Form 990) (2018)

SCHEDULE J (Form 990)

Compensation Information

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

BOYS & GIRLS CLUBS OF METROPOLITAN

Questions Regarding Compensation

Employer identification number 94-2876537 PHOENIX FOUNDATION

Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items Housing allowance or residence for personal use First-class or charter travel Payments for business use of personal residence Travel for companions Tax indemnification and gross-up payments Health or social club dues or initiation fees Personal services (such as maid, chauffeur, chef) Discretionary spending account b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, 2 trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Written employment contract Compensation committee Compensation survey or study Independent compensation consultant Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization X 4a a Receive a severance payment or change-of-control payment? Х 4b b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Х **4**c c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a·c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of X 5a a The organization? Х 5b b Any related organization? If "Yes" on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of X **6**a a The organization? х 6b b Any related organization? If "Yes" on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments X 7 not described on lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the Х 8 initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in 9 Regulations section 53 4958-6(c)?

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Schedule J (Form 990) 2018

· Page 2

PHOENIX FOUNDATION

Schedule J (Form 990) 2018

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

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

94-2876537

Note: The sum of columns (B)(i) (iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation			in column (B) reported as deferred on prior Form 990
(1) MARCIA MINTZ	Ξ	233,073.	60,750.	33,124.	0	22,504.	349,451.	0
TRUSTEE/CEO	: E	0	0.	0.	0.	0.	0.	0.
(2) DALE WANEK	Ξ	139,230.	14,679.	1,584.	7,398.	13,021.	175,912.	• 0
CHIEF FINANCIAL OFFICER	<u>(E)</u>	0.	0.	0.	0	0.	0	.0
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Schedule J (Form 990) 2018

Schedule J (Form 990) 2018

, Page 3

94-2876537

COMPENSATION FOR MARCIA MINTZ AND DALE WANEK WAS PAID BY BOYS & GIRLS CLUBS OF METROPOLITAN PHOENIX, AN UNRELATED ORGANIZATION. SCHEDULE J, PART II

Schedule J (Form 990) 2018

832113 10-26-18

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Go to www irs gov/Form990 for the latest information

Open to Public Inspection

OM8 No 1545-0047

Department of the Treasury Internal Revunue Service Name of the organization

BOYS & GIRLS CLUBS OF METROPOLITAN

Employer identification number

PHOENIX POUNDATION	94 - 2876537
FORM 990, PART VI, SECTION A, LINE 3	
THE BOYS AND GIRLS CLUB OF METRO PHOENIX PROVIDES MANAGEMENT AND	
ADMINISTRATIVE SERVICES TO THE FOUNDATION. THE FOUNDATION REIMBURSES THE	
CLUB FOR THESE SERVICES.	
FORM 990, PART VI, SECTION A, LINE 4	
ORGANIZATION CHANGED ITS YEAR END FROM AUGUST TO JUNE.	
FORM 990, PART VI, SECTION B, LINE 11B	
THE FORM 990 WAS PREPARED BY AN OUTSIDE ACCOUNTING FIRM AND REVIEWED BY THE	
BOARD OF TRUSTEES BEFORE FILING.	
FORM 990, PART VI, SECTION B, LINE 12C	
THE CONFLICT OF INTEREST POLICY COVERS OFFICERS, DIRECTORS, MEMBERS OF A	
COMMITTEE WITH BOARD-DELEGATED POWERS, AND VOLUNTEERS. IF A COVERED PERSON	
HAS AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, HE OR SHE MUST DISCLOSE THE	
EXISTENCE AND NATURE OF HIS OR HER FINANCIAL INTEREST TO THE DIRECTORS AND	
MEMBERS OF COMMITTEES WITH BOARD-DELEGATED POWERS CONSIDERING THE PROPOSED	
TRANSACTION OR ARRANGEMENT. AFTER DISCLOSURE OF THE FINANCIAL INTEREST, THE	
INTERESTED PERSON MUST LEAVE THE BOARD OR COMMITTEE MEETING WHILE THE	
FINANCIAL INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD OR	
COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS. ANNUALLY,	
THE CONFLICT OF INTEREST POLICY IS REVIEWED BY THE TRUSTEES AND ALL	
TRUSTEES COMPLETE A CONFLICT OF INTEREST STATEMENT	

FORM 990, PART VI, SECTION C, LINE 19

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Schedule O (Form 990 or 990-EZ) (2018)