

OMB No 1545-1150

2019

**Open to
Public
Inspection**

D Employer identification number	74-2711299
E Telephone number	(512) 321-3903
F Group Exemption Number	▶

Form **990-EZ** (2019)

Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II ☒

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	13,066	22 6,014
23 Land and buildings	0	23 0
24 Other assets (describe in Schedule O)	1,576	24 708
25 Total assets	14,642	25 6,722
26 Total liabilities (describe in Schedule O).	0	26 0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	14,642	27 6,722

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations, optional for others)

The purpose of the club is to provide for the health and well-being of club members, other employees, and their immediate families, promote good fellowship, and provide recreation and entertainment. Immediate family is defined as the member's parents, spouses, children, step-children, foster children, and grandchildren.

See Additional Data Table

28a

29a

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31a
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63 328

Check if the organization used Schedule O to respond to any question in this Part IV. ☐

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[illegible]

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V ☐

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	No
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	34	No
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a	No
b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c	No
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	No
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0		
b Did the organization file Form 1120-POL for this year?	37b	No
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a	No
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39 Section 501(c)(7) organizations Enter		
a Initiation fees and capital contributions included on line 9	39a	
b Gross receipts, included on line 9, for public use of club facilities	39b	
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ , section 4912 ▶ , section 4955 ▶		
b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	No
c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0		
d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization ▶ 0		
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	No
41 List the states with which a copy of this return is filed ▶ TX		
42a The organization's books are in care of ▶ FCI Bastrop FCI Bastrop Employees Club Telephone no ▶ (512) 321-3903 Located at ▶ PO Box 730 Bastrop, TX ZIP + 4 ▶ 78602		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶	42b	No
See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		
c At any time during the calendar year, did the organization maintain an office outside the U S ? If "Yes," enter the name of the foreign country ▶	42c	No
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	No
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	No
c Did the organization receive any payments for indoor tanning services during the year?	44c	No
d If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	No
45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b	No

		Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No

Part VI Section 501(c)(3) Organizations Only
All section 501(c)(3) organizations must answer questions 47- 49b and 52, and complete the tables for lines 50 and 51.
Check if the organization used Schedule O to respond to any question in this Part VI ☐

		Yes	No
47	Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		
49a	Did the organization make any transfers to an exempt non-charitable related organization?		
49b	If "Yes," was the related organization a section 527 organization?		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000. ▶ _____

52 Did the organization complete Schedule A? **NOTE.** All section 501(c)(3) organizations must attach a completed Schedule A ▶ ☐ **Yes** ☐ **No**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		2020-04-30		
	Justin Johnson Treasurer		Date		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
	Firm's name ▶			Firm's EIN ▶	
	Firm's address ▶			Phone no	

May the IRS discuss this return with the preparer shown above? See instructions ▶ ☐ **Yes** ☐ **No**

Additional Data

Software ID: 19009572
Software Version: v1.00
EIN: 74-2711299
Name: FEDERAL CORRECTIONAL INSTITUTION BASTROP TEXAS
EMPLOYEES CLUB

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.		Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)	
28 We provided an opportunity for the children and grandchildren of staff to compete in a Scholarship Essay competition for two (2) separate \$1000 scholarship (Grants \$ 0) If this amount includes foreign grants, check here . . . ☐		28a	2,000

Form 990EZ, Part III - Statement of Program Service Accomplishments	
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29 All of the meals we have provided staff throughout the year and the Thanksgiving Turkey we gift to all staff club members is a very great thing We work along side HEB Groceries to purchase them (Grants \$ 0) If this amount includes foreign grants, check here . . . ☐	29a 22,273

Form 990EZ, Part III - Statement of Program Service Accomplishments

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30 We also reserve space at a local place called "The Main Event" in Austin, Texas to hold our annual children's Christmas Party, we hire a Santa, Families provide \$20 per child attending for a gift with a gift idea of no more then \$30 At The Main Event the families have a meal, pictures with Santa, open gifts and then can rock climb, play in an arcade, go bowling, play laser tag, and do miniature golfing We also hold an annual adults Christmas Party at a local convention center and do a theme of some kind There are door prizes, a meal, dancing, and drawings for gift cards (Grants \$ 0) If this amount includes foreign grants, check here . . . ☐	30a	22,456

Form 990EZ, Part III - Statement of Program Service Accomplishments

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We donate money quarterly to the Texas Workforce Commission & the Blind (Grants \$ 0) If this amount includes foreign grants, check here ☐		16,599

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

FEDERAL CORRECTIONAL INSTITUTION BASTROP TEXAS EMPLOYEES CLUB

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.

OMB No 1545-0047

2019

Open to Public Inspection

Employer identification number

74-2711299

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990-EZ, Part I, Line 10	We provide a scholarship fund of \$1000 each Employee's children write an essay explaining their educational goals that will propel them into the job market

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990- EZ, Part I, Line 16	We do many events for staff and their families throughout the year. We provided staff meals during the government shut down, correctional officer week events, drawings for gifts, ice cream socials, summer cook outs, back to school bash for families, veteran support programs, provide Thanksgiving turkeys to staff, children's Christmas Party with Santa and gifts, Christmas Gala for staff and significant other, and three to four staff appreciation lunches per year.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990- EZ, Part II, Line 24	Clothing and merchandise not sold by the end of year