		Charitah	le Activities	Section		······	
	Form CT-12				ow file reports and		
	For Oregon Charities	Olegon D	epartment o	JUSICE		dit card using our ine form at	
Fo	or Accounting Periods Beginning in: $2017$	100 SW Market Street Portland, OR 97201-570 Email: charitable.activitie Website: http://www.doj.	es@doj.state.or.us	· · ·	https://jus	stice.oregon.gov/ rtal/Account/Login	
Se	ction I. General Inform	ation					
1.	egistration #: 25229			ough Incorrect Iter			
В	oys & Girls Club of Western Lane Count	у	Registration	<b>#</b> :	RECE	Ven	
P,	O. Box 739		Organization	Name:		VL	
Fl	orence, OR 97439		Address:		JUL 31	2018	
	one: 541-902-0304 Fax: 541-99	7 9454	City, State, Z	ip:	DEPARTMENTO	Ellettor	
		ng: 12/31/17	Phone: Email:		Fax: PORTLANDL	EGAL Amended Report?	
			Period Begin	ning: / /	Period Ending:	/ /	
2.	Did a certified public accountant audit accompanying notes, schedules, or of				nancial statements	Yes No	
3.	Is the organization a party to a contrac Oregon?			ng machine or telephor	ne fund-raising in	Yes 🖌 No	
	If yes, write the name of the fund-raisi	•					
4.	Has the organization or any of its offic government agency, such as a state a in any court or administrative agency r yes, attach explanation of each such a	ttorney general, secretar egarding charitable solic	y of state, or local distri itation, administration, r	ct attorney, or been a p	party to legal action	n 🗌 Yes ✔ No	
5.	During this reporting period, did the or organization receive a determination le copy of the amended document or lett	etter from the Internal Re	cles of incorporation, by venue Service relating t	rlaws, or trust documer o its tax-exempt status	nts, OR did the s? If yes, attach a	🗌 Yes 🖌 No	
6.	Is the organization ceasing operations	and is this the final repo	rt? (If yes, see instructi	ons on how to close ye	our registration.)	🗌 Yes 🖌 No	
7.	Provide contact information for the per						
	Name	Position	Phone	Mailing /	Address & Email A	ddress	
	Chuck Trent	Director	541-551-0649	83421 Hwy 101 Florence, OR 97439			
8.	List of Officers, Directors, Trustees an not receive compensation. Attach add the phrase "See IRS Form" may be en corporations.)	litional sheets if necessa	ry. If an attached IRS for	orm includes substantia	ally the same com	pensation information,	
	(A) Name, mailing address, daytime phone number (B) Title & average weekly (C) hours devoted to position p						
	Name:         **Please see attached Fo           Address:	rm 990**					
	Phone: ()						
	Email: Name:						
	Address:						
	Phone: ()						
ŀ	Email: Name:						
	Address:				:		
	Phone: ()						
	Email:	Eorm Co	ntinued on Reve	arse Side			

a.

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			an an eisen oberteten wet eine	
ction II.	Fee Calculation			1999년 - 1995년 1997년 1997년 - 1997년 1997년 1997년 - 1997년 1 1997년 1997년 199
(m. 11	nue			
or see the CT-	12 instructions if no federal tax return was prepared or a Form 990-N was filed.		484,366.00	
Revenue F	ee ow. Minimum fee is \$20, even if total revenue is a negative amount.)	······	10.	\$200.00
(See chart bea Amount \$0	on Line 9 Revenue Fee - \$24,999 \$20			
\$25,000 \$50,000	- \$49,999 \$50 - \$99,999 \$90			
\$100,000 \$250,000	- \$249,999 \$150 - \$499,999 \$200			
\$500,000 \$1,000,000	- \$999,999 \$300 or more \$400 I		27.6	
(Erom Line 22	s or Fund Balances at End of the Reporting Period 11. (end of year) on Form 990, Line 21 on Form 990-EZ, or Part III, Line	\$943,658.00		
6 on Form 990		\$945,656.00		
	Assets Used to Conduct Charitable Activities 12.			
(Concernity fre	Assets Used to Contract Chantable Activities and the Activities of the Activities and the	\$388,332.00		
Ct-12 instruct	ions if organization owns income-producing assets.)		1997 - 1998 1997 - 1999 1997 - 1999	
Amount S	ubject to Net Assets or Fund Balances Fee Is Line 12. If Line 11 minus Line 12 is less than \$50,000, write \$0.)	13.	\$555,326.00	
(Line 11 minu	IS LINE 12. IT LINE 11 MINUS LINE 12 IS IESS MAIN \$50,000, WINS \$50.7			
Not Accot	s or Fund Balances Fee		14.	
(Line 13 multi	iplied by .0001. If the fee is less than \$5, enter \$0. Not to exceed \$2,000. Rou	ind cents to the nearest whole dollar.)		\$56.00
Are you fi	ling this report late? 🔲 Yes 🛛 No		45	
Alter and the state	te fee is a minimum of \$20. You may owe more depending on how late the reportivities Section at (971) 673-1880 to obtain late fee amount.)	rt is. See Instruction 15 for additional information or e	contact the 15.	
Chantable Ad				
Total Amo	punt Due		16.	\$256.00
(Add Lines 1	0, 14, and 15. Make check payable to the Oregon Department of Justice.)			
Attach a c	copy of the organization's federal 990 or other return and all & 990EZ filers do not need to attach a copy of their Schedu	supporting schedules and attachments t	that were filed with the IRS with the IRS or filed a 99	6, except that 0-N. but had
	certain IRS forms for Oregon purposes only. If the attached Only." If your organization files IRS Form 990-N (e-Postca	t return was not filed with the IRS, then t	nark any such return as i	or Oregon
	the second	rector of the organization   have examined	ned this return, including a	all
ease	accompanying forms, schedules, and attachments, and to	the best of my knowledge and belief, it	is true, correct, and comp	ete.
gn ere	$ \Rightarrow$	7/26/2018	Director	
	Signature of officer	Date	Title	
	Chuck Trent	83421 Hwy 101, Florence OR 974	139	
	Officer's name (printed)	Address	•	
		541-551-0649		
		Phone		
aid eparer's	= Muchael Burghunged	7-26-18	541-997-7173	
e Only	Preparer's signature	Date	Phone	
	Michael Buckwald	PO Box 239, Florence OR 97439	I	
	Preparer's name (printed)	Address		

	Form	99 <b>0</b>								I	OMB No. 1545-00	047
	F0IIII 4		R	eturn of	Organization	1 Exempt F	rom Inc	ome T	ax		2017	1
			Under s	ection 501(c),	527, or 4947(a)(1) of th	e Internal Revenue	Code (except	private four	ndations)	-		
Depa	artment of th nal Revenue	e Treasury Service			ocial security numb rs.gov/Form990 for						Open to Pub Inspection	
_		2017 calendar	1				, and endin		•	;		
_	Check if ap						<u> </u>		D Employ	er identif	ication number	
	Addres				B OF WESTERN	LANE COUN	ΓY		the second s	12368	and the second se	
	Name		.O. Box		20				E Telepho			
	Initial I	return P.	lorence,	, OR 974	39				541-	-902-	-0304	
	Final ret	urn/terminated										
		ied return						144 S. J. 16.1.	G Gross re			,538.
	Applica			dress of principa	officer:				a group returi			X No No
			ame As (		) (insort ps)	4047(a)(1) a	F 507	If 'No,'	subordinates attach a list.	(see inst	ructions)	
<u> </u>			501(c)(3)	501(c) (	) < (insert no.)	4947(a)(1) o	r 527					
- K	Websit			Trust	Association Other	► I	Year of formati	· · · ·	exemption nu		gal domicile: OR	,
		Summary	Corporation	ITUSL	Association	<u> </u>		00. 200.	2 1113		gai domiche: OF	
1.4.			the organiz	ation's missi	on or most significa	ant activities:To	promot	e the 1	health	, soc	cial.	
-					and character							6
nce		nd 18 yea	an many many panel build in				4					
Governance												
<u>No</u>					n discontinued its o						ets.	
ي م					ning body (Part VI, s of the governing t					3		$\frac{11}{0}$
es					calendar year 201					5		0
Activities &					necessary) Part VIII, column (C					6		0
Aci									· · · · · · · /	7a		0.
	<b>b</b> Ne	t unrelated bu	usiness taxa	able income	from Form 990-T, li	ne 34	1 2018			7b		0.
	• •		al avaita /D	مسارك السم	16)				rior Year	~	Current Y	
e					1h) 2g)				<u>563,1</u> 72,5			<u>,078.</u> ,523.
Revenue	10 Inv	estment inco	me (Part VI	ll. column (A	A), lines 3, 4, and 7	d)	ND LEGAL		1,6			, <u>525.</u> ,273.
Bei			•		nes 5, 6d, 8c, 9c, 10				32,9			,038.
	12 Tot	tal revenue -	add lines 8	8 through 11	(must equal Part V	III, column (A), l	ine 12)		670,2			,366.
					X, column (A), line							
		•			(, column (A), line							
Ś	<b>15</b> Sa	laries, other o	compensatio	on, employee	e benefits (Part IX,	column (A), lines	s 5-10)		128,3	27.	178	<u>,580.</u>
nse	<b>16a</b> Pro	ofessional fun	draising fee	es (Part IX, c	olumn (A), line 11e	e)	• • • • • • • • • • • •					
Expense	<b>b</b> Tot	tal fundraising	g expenses	(Part IX, col	umn (D), line 25) 🕨	-	1,090.					
ú	17 Oth	ner expenses	(Part IX, co	olumn (A), lir	nes 11a-11d, 11f-24	e)			161,6	68.	174	,425.
		•		•	equal Part IX, colur				289,9	95.		<u>,005.</u>
	19 Re	venue less ex	penses. Su	btract line 1	8 from line 12		••••		380,2			,361.
Net Assets or Fund Balances				~				Beginnin	ng of Current		End of Ye	
Bala									993,0		1,109	
at A					ne $21/1$ from line 20.				180,7			<u>,429.</u>
		Signature		s. Subtract III	ie zy nom me zu.			•	812,2	97.	943	<u>,658.</u>
	agent of new costs	<u> </u>			in industria conomiconsti	a cabadular and state	monte and to i	the best of m	w knowlodgo	and halio	f it is true correct	ond
com	olete. Declar	ation of preparer	other than offic	er) is based on a	rn, including accompanyin all information of which pr	eparer has any knowle	edge.	une best of m	ly knowledge		r, it is true, correct	, anu
	<u></u>		the se	-11	W				12/26	p/20	218	
Sig	n	Signature o	f officer					Da	te (			
He	re		Trent					Direc	ctor			
			nt name and titl	e	<b>F</b>				·	T		
		Print/Type prepa		-	Preparer's signature		Date		Check	」"		
Pa		MICHAEL				DC			self-employe	d F	<u>01280326</u>	
	eparer e Only	Firm's name	The second se		g & Consult	ing PC			Circula MINI	• • • •	0060004	
05	e Only	Firm's address		Box 239	07420						0860004	
Max	the IRS	discuss this r		nce, OR	9/439 shown above? (see	instructions)				541-	997-7173 X Yes	No
ivia		ulacuaa ulia I	Granti Mittill	no proparer	5.10111 above: (360		*******				44 163	

BAA For Paperwork Reduction Act Notice, see the separate instructions.

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TEEA0113L 08/08/17

Form 990 (2017)

Forn	n 990 (2017) BOYS & GIRLS CLUB OF WESTERN LANE COUNTY	93-1236854	4 Page <b>2</b>
Pai	Statement of Program Service Accomplishments     Check if Schedule O contains a response or note to any line in this Part III	<u> </u>	
1			
	To promote the health, social, educational, vocational and char	acter develo	ment of
	youth between the ages of 6 and 18 years.		
		·····	
Z	Did the organization undertake any significant program services during the year which were not listed on the Form 990 or 990-EZ?		Yee V Ne
	If 'Yes,' describe these new services on Schedule O.		Yes X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	services?	Yes X No
	If 'Yes,' describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program service accomplishments for each of its three largest program service section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocat and revenue, if any, for each program service reported.	ervices, as measured ions to others, the to	l by expenses. tal expenses,
4 <del>a</del>		(Revenue \$	48,857.)
	Operating a program for young people, between the ages of 6-18	<u>years, after</u>	school
	and on non-school days, including salaries of personnel who are	hired to ope	rate the _
	program		
4t	(Code: ) (Expenses \$ 20,212. including grants of \$ )	(Revenue \$	16,666.)
	Operating an athletic program for people, between the ages of 6		
	school and on non-school days, including salaries of personnel		
	operate the program.		
4 c	: (Code:) (Expenses \$ including grants of \$)	(Revenue \$	)
4 d	I Other program services (Describe in Schedule O.)		
4 d	Other program services (Describe in Schedule O.)         (Expenses \$       including grants of \$       ) (Revenue 1)	\$	)

# Form 990 (2017) BOYS & GIRLS CLUB OF WESTERN LANE COUNTY Part IV Checklist of Required Schedules

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.,

		_	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
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 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 similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete 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? <i>If 'Yes,' complete Schedule D, Part V</i>	10	x	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VII, IX, or X as applicable.			
;	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i>	11 a	х	
ł	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	11 b		x
	c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		x
•	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d	х	
(	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
1	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		x
12:	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	х	
I	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
ł	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? <i>If 'Yes,' complete Schedule F, Parts I and IV</i>	14b		х
	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		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (Å), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		x
BAA	TEEA0103L 08/08/17	Form	990	2017)

Page 3

Form 990 (2017) BOYS & GIRLS CLUB OF WESTERN LANE COUNTY Part IV Checklist of Required Schedules (continued)

93-1236854	Page 4

			Yes	No
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		X
	) If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II.</i>	21		x
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 and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		x
	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? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a</i>	24a		x
I	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		1
(	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 transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
I	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,' complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III</i>	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		<u>X</u>
1	A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i>	28b		х
Ċ	: An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part L	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>	33		x
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		x
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ł	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	x	
BAA		Form	990 /	2017

Form 990 (2017)

Form 990 (2017) BOYS & GIRLS CLUB OF WESTERN LANE COUNTY	93-1236854	Pag
Part V Statements Regarding Other IRS Filings and Tax Compliance		
Check if Schedule O contains a response or note to any line in this Part V		
		Yes N
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	0	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and report (gambling) winnings to prize winners?	able gaming	
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, filed for the calendar year ending with or within the year covered by this return	0	
b If at least one is reported on line 2a, did the organization file all required federal employment tax	returns? 2b	29.00.942.842.9
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruct	tions)	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		
<b>b</b> If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule Q		_
4a At any time during the calendar year, did the organization have an interest in, or a signature or other aut	hority over. a	
financial account in a foreign country (such as a bank account, securities account, or other financial	ial account)? 4a	2
b If 'Yes,' enter the name of the foreign country: ►		
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Acco	unts (FBAR).	4.85
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax yea	ar? <b>5a</b>	2
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tra		2
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and di	d the organization	
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and di solicit any contributions that were not tax deductible as charitable contributions?	6a	2
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions o		
not tax deductible?		
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly	for goods and	
services provided to the payor?		<u> </u>
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was re Form 8282?	equired to file	2
d If 'Yes,' indicate the number of Forms 8282 filed during the year	Sau 94 82 - 1 22	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal bene		332 VA
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit of		
<b>a</b> If the organization received a contribution of qualified intellectual property, did the organization file Form		
as required?		
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the orga Form 1098-C?	nization file a <b>7 h</b>	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by th		
organization have excess business holdings at any time during the year?		99.2555 34 3
9 Sponsoring organizations maintaining donor advised funds.		
a Did the sponsoring organization make any taxable distributions under section 4966?		
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10 Section 501(c)(7) organizations. Enter:		188 <b>1</b> - 3
a Initiation fees and capital contributions included on Part VIII, line 12	22.0	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b		
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders 11 a		
a Gross income from members or shareholders       11 a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11 b		
a Gross income from members or shareholders       11 a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11 b         12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		
a Gross income from members or shareholders       11 a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11 b         12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.       12 b	m 1041? 12a	
a Gross income from members or shareholders       11 a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11 b         12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.       12 b         13 Section 501(c)(29) qualified nonprofit health insurance issuers.       11 b	m 1041? 12 a	
a Gross income from members or shareholders       11 a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11 b         12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.       12 b         13 Section 501(c)(29) qualified nonprofit health insurance issuers.       a Is the organization licensed to issue qualified health plans in more than one state?       12 b	m 1041? 12 a	
<ul> <li>a Gross income from members or shareholders</li></ul>	m 1041? 12 a	
<ul> <li>a Gross income from members or shareholders</li></ul>	m 1041? 12 a	
<ul> <li>a Gross income from members or shareholders</li></ul>	m 1041? 12a 13a	
a Gross income from members or shareholders       11 a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11 b         12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.       12 b         13 Section 501(c)(29) qualified nonprofit health insurance issuers.       a Is the organization licensed to issue qualified health plans in more than one state?       12 b         other. 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       13 b         c Enter the amount of reserves on hand.       13 c	m 1041? 12a 13a	
<ul> <li>a Gross income from members or shareholders</li></ul>	m 1041? 12a 	

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93-1236854

Page 6

Pa	RVI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b be	elow,	and	for
	a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or char Schedule O. See instructions.	nges	in	
	Check if Schedule O contains a response or note to any line in this Part VL			X
See	ction A. Governing Body and Management			
			Yes	No
1	a Enter the number of voting members of the governing body at the end of the tax year 1 a 11 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
	<b>b</b> Enter the number of voting members included in line 1a, above, who are independent <b>1 b</b>			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents			<u> </u>
	since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
	a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7 a		x
I	<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	a The governing body?	8 a	Х	5 (12)90 F (2) - (
I	b Each committee with authority to act on behalf of the governing body?	8 b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If 'Yes,' provide the names and addresses in Schedule O</i>	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	eveni		
10.	Did the exercise time level there is a still be 2		Yes	
	a Did the organization have local chapters, branches, or affiliates?	10 a		X
I	b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 ь		
11 ;	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
I	Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O			282.5
12:	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	X	200 Suite (
	• Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	Х	
(	c Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If 'Yes,' describe in Schedule O how this was done</i> SeeSchedule.O	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 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	a The organization's CEO, Executive Director, or top management official	15 a		X
	• Other officers or key employees of the organization.	15 b	20.00	X
16 a	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?			
ł	If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	16 a		X
	organization's exempt status with respect to such arrangements?	16 b	4023 ( 	193 <u>8</u> 20
	tion C. Disclosure			
	List the states with which a copy of this Form 990 is required to be filed ► _OR			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s for public inspection. Indicate how you made these available. Check all that apply.           X         Own website         Upon request         Other (explain in Schedule O)	only)	availa	able
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements availa the public during the tax year. See Schedule O	ble to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	Chuck Trent P.O. Box 739 Florence OR 97439 (541) 902-0304			

				LANE COUNTY	93-1236854	Page 7
Part VII Com	pensation	of Officers, I	Directors, Trus	tees, Key Employees	, Highest Compensated Employ	ees, and
Indep	bendent Co	ontractors				_
Check	if Schedule (	O contains a res	ponse or note to a	any line in this Part VII		

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

**1** a 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.

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

				(C)	)					
(A) Name and Title	(B) Average hours per	i:	s both dire	n (do not check more le box, unless person th an officer and a lirector/trustee)				(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other compensation
	per week (list any hours for related organiza- tions below dotted line)	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) Kristen Goodman	0									
Director	0	X						0.	0.	0.
(2) Larry Martindale	_10_									
Director	0	X						0.	0.	0.
(3) Chuck Trent								_		
Director	0	X						2.	0.	0.
(4) Pixie Center	_10_							_		
Director	0	X						0.	0.	0.
(5) Harold Kinney	10	.,								•
Director	0	X						0.	0.	0.
(6) Arika McGallian	$-\frac{10}{0}$	x						0	0	0
Director (7) John Davis	40						_	0.	0.	0.
Executive Dir.	- 40 -	x						20,000.	0.	0.
(8) Michael Pearson	20							20,000.		<u> </u>
President	- 20 -			х				0.	0.	0.
(9) Michael Smith	2			41				0.	0.	0.
Secretary	0			х				0.	0.	0.
(10) Jeff Gowing	10									
Vice President	0			x				ο.	0.	0.
(11) Jordan Nivilinszky	2									
Treasurer	0			X				0.	0.	0.
(12)										
(13)										
(14)										
BAA	TEEA01	071	08/08	/17						Form 990 (2017)

Form 990 (2017) BOYS						93-1236854	Page 8
Part VII Section A.	Officers,	Directors,	Trustees,	Key Employees	, and Highest (	<b>Compensated Employees</b>	(continued)

93-1236854

	(B)			((						
(A)	Average hours	(do	not o	check	sition more erson	than is botl	one h an	<b>(D)</b> Reportable	(E)	(F)
Name and title	per week	offi	cer a	ndau	direct	or/trus	tee)	compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation
	(list any hours for	Individual or director	Istitut	Officer	ey er	lighes mploy	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related
	related organiza - tions	Individual trustee or director	ional	~	Key employee	t com	1			organizations
	below dotted line)	ustee	nstitutional trustee		8	Highest compensated employee				
			e			bed				
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)									· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
(24)										
(25)										
1 b Sub-total	•••••							20,002.	0.	0.
c Total from continuation sheets to Part VII, Section							•	0.	0.	0.
d Total (add lines 1b and 1c)2 Total number of individuals (including but not limited							ved	20,002. more than \$100.00	0. 0 of reportable comp	0.
from the organization ► 0				-, -						
3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for suc.	tor, or tru:	stee,	key	/ em	ploy	/ee, i	or h	ighest compensat	ed employee	Yes No 3 X
4 For any individual listed on line 1a, is the sum of the organization and related organizations greated	reportabl r than \$1									
<ul> <li>such individual</li> <li>Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes</li> </ul>	e compen	satio	n fr	om	any	unre	late	d organization or	individual	. 4 X
Section B. Independent Contractors	, comple		neu	ule	5 10	i suc	пр	erson		. 5 X
<ol> <li>Complete this table for your five highest compensation from the organization. Report compensation</li> </ol>	sated inde	pen he ca	den alen	t cor dar v	ntra vear	ctors endir	tha no w	t received more the	nan \$100,000 of nanization's tax year	
(A) Name and business addr								( <b>B)</b> Description of		(C) Compensation
								······		
2 Total number of independent contractors (including b \$100,000 of componentian from the examination		ted to	o the	se li	istec	labov	ve) v	who received more	than	
\$100,000 of compensation from the organization	- 0								· · · · · · · · · · · · · · · · · · ·	

#### Form 990 (2017) BOYS & GIRLS CLUB OF WESTERN LANE COUNTY 93-1236854 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII ..... **(A)** Total revenue (B) (C) (D) Related or Unrelated Revenue exempt business excluded from tax function revenue under sections revenue 512-514 1 a Federated campaigns ..... Grants Amounts 1 a **b** Membership dues..... 1 b c Fundraising events 1 c É d Related organizations..... 1 d Similar Contributions, Gi e Government grants (contributions) . . . . 1 e f All other contributions, gifts, grants, and similar amounts not included above . . . and Other 1f 403,078 g Noncash contributions included in lines 1a-1f: \$ h Total. Add lines 1a-1f..... 403,078 . . . . . . . . . . . **Business Code** Program Service Revenue 2a Program Service Revenue 611710 48,857 48,857 b <u>Athletic Program</u> 611710 16,666 16,666 f All other program service revenue ... g Total. Add lines 2a-2f..... 65,523. Investment income (including dividends, interest and 3 other similar amounts). 17 17 Income from investment of tax-exempt bond proceeds. 4 5 Royalties..... (i) Real (ii) Personal 6 a Gross rents..... b Less: rental expenses c Rental income or (loss) . . . d Net rental income or (loss)..... (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory 48,810 b Less: cost or other basis and sales expenses . . . . . 134,100 c Gain or (loss)..... 48,810 -134.100d Net gain or (loss)..... . . . . . . . . . . . . -85,290 -85,290 8 a Gross income from fundraising events Other Revenue (not including. \$ of contributions reported on line 1c). See Part IV, line 18..... a 122,279 b Less: direct expenses..... b 38,072 c Net income or (loss) from fundraising events ..... 84,207 **9 a** Gross income from gaming activities. See Part IV, line 19..... b Less: direct expenses..... b c Net income or (loss) from gaming activities..... 10 a Gross sales of inventory, less returns and allowances..... a b Less: cost of goods sold ..... b c Net income or (loss) from sales of inventory..... Miscellaneous Revenue **Business** Code 11a <u>Miscellaneous</u> 16,831 16,831 d All other revenue . . e Total. Add lines 11a-11d ..... 16,831 Total revenue. See instructions...... 12 484,366 -2,9190

Form 990 (2017)

## Form 990 (2017) BOYS & GIRLS CLUB OF WESTERN LANE COUNTY

# 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....

93-1236854 Page 10

	Check if Schedule O contains a	response or note to an	y line in this Part IX		
Do 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and for- eign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				210 - Sec. 10
5	Compensation of current officers, directors, trustees, and key employees	20,000.	10,000.	10,000.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	· · · · · · · · · · · · · · · · ·	138,281.	134,895.	3,386.	0.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	130,201.	134,695.	5,386.	
9	Other employee benefits	2,079.	1,912.	167.	
10	Payroll taxes	18,220.	16,638.	1,582.	
11	Fees for services (non-employees):				
1	a Management				
I	• Legal				
(	c Accounting	24,693.		24,693.	
(	Lobbying			21,055.	·····
(	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	I Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	0 100	1		
12	(A) amount, list line 11g expenses on Schedule 0.)	8,102.	1,557.	6,545.	
13	Office expenses	8,112.	6,394.	1,123.	595.
14	Information technology	2,779.	1,107.	1,672.	
15	Royalties.				
15	Occupancy.	24.462	01 000	10,401	
10	Travel	34,463.	21,032.	13,431.	
18					
19	Conferences, conventions, and meetings				
20	Interest	4,008.		4,008.	
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization	8,382.		8,382.	
23 24	Other expenses. Itemize expenses not	11,749.	1,937.	9,812.	an teach an teach an teachar an teachar an teachar
	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 0.)				
2	<u>Teen &amp; Elementary Program</u>	26 210	0C 010		
	Athletics_Expense	<u>26,210.</u> 20,241.	<u>26,210.</u> 20,212.	29.	
	Staff_Development	17,341.	8,548.	8,494.	299.
	Miscellaneous	2,544.	<u> </u>	2,448.	433,
	All other expenses.	5,801.	2,772.	2,833.	196.
25	Total functional expenses. Add lines 1 through 24e	353,005.	253,310.	98,605.	1,090.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► if following SOP 98-2 (ASC 958-720)		•	,	

# Form 990 (2017) BOYS & GIRLS CLUB OF WESTERN LANE COUNTY

### Part X Balance Sheet

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1 2 3	<u> </u>				
2	Cash – non-interest-bearing		Beginning of year 132,259.	1	( <b>B)</b> End of year 113, 792
_	Savings and temporary cash investments		2,552.	2	11,022
	Pledges and grants receivable, net		2,552.	3	
4	Accounts receivable, net			4	2,050
					2,050
5	Loans and other receivables from current and former of trustees, key employees, and highest compensated emp Part II of Schedule L	· · · · · · · · · · · · · · · · · · ·		5	
6	Loans and other receivables from other disqualified per- section 4958(f)(1)), persons described in section 4958(c)(3) employers and sponsoring organizations of section 501(c)(9 beneficiary organizations (see instructions). Complete F	sons (as defined under (B), and contributing ) voluntary employees' Part II of Schedule L		6	
7	Notes and loans receivable, net			7	4,793
8	Inventories for sale or use			8	·····
9	Prepaid expenses and deferred charges.			9	anda alaka ayar
10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 524,265.			
b	Less: accumulated depreciation		525,153.	10 c	388,332
11	Investments – publicly traded securities			11	
12	Investments - other securities. See Part IV, line 11			12	
13	Investments - program-related. See Part IV, line 11			13	and a second
14	Intangible assets			14	
15	Other assets. See Part IV, line 11	· · · · · · · · · · · · · · · · · · ·	333,049.	15	589,098
16	Total assets. Add lines 1 through 15 (must equal line 34	4)	993,013.	16	1,109,08
17	Accounts payable and accrued expenses		12,220.	17	14,50
18	Grants payable			18	
19	Deferred revenue			19	
20	Tax-exempt bond liabilities			20	
21	Escrow or custodial account liability. Complete Part IV			21	
21 22	Loans and other payables to current and former officers key employees, highest compensated employees, and c Complete Part II of Schedule L	, directors, trustees, lisqualified persons.		22	
23	Secured mortgages and notes payable to unrelated third	d parties		23	
24	Unsecured notes and loans payable to unrelated third p	arties		24	
25	Other liabilities (including federal income tax, payables and other liabilities not included on lines 17-24). Complete		168,496.	25	150,922
26	Total liabilities. Add lines 17 through 25		180,716.	26	165,429
	Organizations that follow SFAS 117 (ASC 958), check here	X and complete			
-	lines 27 through 29, and lines 33 and 34.				
27	Unrestricted net assets.		355,487.	27	408,673
28	Temporarily restricted net assets		419,409.	28	47,706
27 28 29 30 31 32 33	Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), chec		37,401.	<b>29</b>	487,279
	and complete lines 30 through 34.				
30	Capital stock or trust principal, or current funds			30	se constant del Alt
31	Paid-in or capital surplus, or land, building, or equipmer			31	
32	Retained earnings, endowment, accumulated income, or			32	
33	Total net assets or fund balances		812,297.	33	943,658
34	Total liabilities and net assets/fund balances		993,013.	34	1,109,087

Page 11

93-1236854

		-1236854	:	Page 12
Pa	Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	-	484	,366.
2	Total expenses (must equal Part IX, column (A), line 25)		353	,005.
3	Revenue less expenses. Subtract line 2 from line 1		131	,361.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4	812	,297.
5	Net unrealized gains (losses) on investments.		_	
6	Donated services and use of facilities			
7	Investment expenses			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10	943	<u>,658.</u>
Fa	TXII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII	•••••••••••••	· · · · · · · · · · · ·	•••••
			Ye	s 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 O.			
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review	ved 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?		2b >	ζ
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa	rate		
	basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis			
(	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aud review, or compilation of its financial statements and selection of an independent accountant?	t, •••••	2 c 2	K
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3;	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a	X
1	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required au	ıdit		-
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 b	
BAA			Form 99	0 (2017)

Form 990 (2017)

		Public Char	ity Status and I	Public Sup	port	OMB No. 1545-0047
SCHEDULE A (Form 990 or 990-E	Z) Co	omplete if the organiza	ation is a section 501(c a)(1) nonexempt charit	(Y3) organizatio	•	2017
<b>N</b>		► Att	ach to Form 990 or For	m 990-EZ.		Open to Public
Department of the Treasu Internal Revenue Service	∽   ►	Go to www.irs.gov/F	orm990 for instruction	s and the latest	information.	Inspection
Name of the organization					Employer identifie	cation number
		ESTERN LANE CO			93-123685	54
			rganizations must			ctions.
	•		(For lines 1 through 12 hurches described in <b>se</b> t		,	
			Schedule E (Form 990 c		<b>(</b> (),	
			nization described in se	• •	AYIII).	
			unction with a hospital			Enter the hospital's
	, and state:		,			
5 An organiz	ation operated fo 0(b)(1)(A)(iv).	or the benefit of a colle Complete Part II.)	ege or university owned	d or operated by	a governmental unit d	escribed in
	state, or local go	vernment or governme	ental unit described in	section 170(b)(1	)(A)(v).	
in section	170(b)(1)(A)(vi).	(Complete Part II.)	part of its support from a		nit or from the general pu	blic described
8 🗌 A commur	ity trust describe	ed in <b>section 170(b)(1)</b>	(A)(vi). (Complete Part	11.)		
	/ or a non-land-gr		ction 170(b)(1)(A)(ix) ope e (see instructions). Ente			
from activi	ties related to its income and unr	exempt functions-su	33-1/3% of its support f bject to certain excepti le income (less section Part III.)	ons, and (2) no.	more than 33-1/3% of	its support from aross
			ely to test for public sat	fety. See <b>sectio</b>	n 509(a)(4).	
12 An organiz	ation organized a	and operated exclusive	ely for the benefit of, to	perform the fu	nctions of, or to carry o	ut the purposes of one
or more pl	ibliciv supported	organizations describe	ed in section 509(a)(1) supporting organization	or section 509(a	<b>Y2)</b> , See section 509/a	<b>)(3).</b> Check the box in
a Difference Type I. A su organizatio	pporting organiza	tion operated, supervise equiarly appoint or elec	d, or controlled by its su t a majority of the directo	pported organiza	tion(s) typically by giving	g the supported on. <b>You must</b>
manageme	supporting organ nt of the supportin <b>blete Part IV, Sec</b>	g organization vested in	controlled in connection the same persons that c	with its suppor control or manage	ted organization(s), by the supported organizat	having control or ion(s). <b>You</b>
			tion operated in connectic plete Part IV, Sections			
functionall	integrated. The	organization generally	anization operated in co / must satisfy a distribu Is A and D, and Part V.	ition requiremen	supported organization(s it and an attentiveness	) that is not requirement (see
e Check this	box if the organi	zation received a writt	en determination from	the IRS that it is	s а Туре I, Туре II, Тур	e III functionally
			supporting organization			
		on about the supporte				
(i) Name of supporte	d organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) is the organization listed in your governing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes No		
(A)						
(B)						
(C)						
(D)						
<u>(E)</u>				NAMER AVER		·····
Total						

) .

#### Schedule A (Form 990 or 990-EZ) 2017 BOYS & GIRLS CLUB OF WESTERN LANE COUNTY 93-1236854

Page 2

Part II 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.)

Sec	tion A. Public Support	<b>.</b>					
Cale begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2013	<b>(b)</b> 2014	<b>(c)</b> 2015	<b>(d)</b> 2016	<b>(e)</b> 2017	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.)	244,478.	348,296.	292,732.	563,104.	410,653.	1,859,263.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	244,478.	348,296.	292,732.	563,104.	410,653.	1,859,263.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	<b></b>					780,031.
6	Public support. Subtract line 5 from line 4						1,079,232.
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2013	<b>(b)</b> 2014	<b>(c)</b> 2015	<b>(d)</b> 2016	<b>(e)</b> 2017	<b>(f)</b> Total
7	Amounts from line 4	244,478.	348,296.	292,732.	563,104.	410,653.	1,859,263.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						0.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
11	Total support. Add lines 7 through 10						1,859,263.
12	Gross receipts from related activ	vities, etc. (see ins	structions)	•••••••••••••••••••••••	•••••	12	892,204.
13	First five years. If the Form 990 is organization, check this box and	for the organization	n's first, second, th	ird, fourth, or fifth t	ax year as a sectio	n 501(c)(3)	
Sec	tion C. Computation of Put	hlic Sunnort P	ercentage				
	Public support percentage for 20						58.05%
15	Public support percentage from	2016 Schedule A,	Part II, line 14				66.45 %
16a	33-1/3% support test-2017. If t and stop here. The organization	he organization di qualifies as a put	d not check the b blicly supported o	oox on line 13, and rganization	d line 14 is 33-1/3	% or more, check	this box ····· ► X
b	<b>33-1/3% support test-2016.</b> If the and <b>stop here.</b> The organization	ne organization did qualifies as a pu	l not check a box blicly supported o	on line 13 or 16a	, and line 15 is 3	3-1/3% or more, c	heck this box ·····►
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the 'facts	est—2017. If the or meets the 'facts-a s-and-circumstanc	rganization did no and-circumstances es' test. The orga	t check a box on s' test, check this anization qualifies	line 13, 16a, or 16 box and <b>stop her</b> as a publicly sup	5b, and line 14 is <b>e.</b> Explain in Part ported organizatio	10% VI how m►
	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances'	and-circumstances test. The organiza	s' test, check this ation qualifies as a	box and <b>stop her</b> a publicly support	e. Explain in Part ed organization	VI how the
18	Private foundation. If the organi	zation did not che	ck a box on line	13, 16a, 16b, 17a,	or 17b, check thi	s box and see ins	structions 🕨 🗌
DAA							

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 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

See	ction A. Public Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	and membership fees						
	received. (Do not include any 'unusual grants.')						
2	Gross receipts from admissions,						
-	merchandise sold or services						
	performed, or facilities furnished in any activity that is						
	related to the organization's						
	tax-exempt purpose						
3	Gross receipts from activities						
	that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the						
	organization's benefit and						
	either paid to or expended on its behalf						
5	The value of services or						
	facilities furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1,						
	2, and 3 received from disqualified persons						
Ь	Amounts included on lines 2						
	and 3 received from other than						
	disqualified persons that exceed the greater of \$5,000 or						
	1% of the amount on line 13						
	for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
	dar year (or fiscal year beginning in) ►	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6,	(4) 1010	(4) 2011	(0) 2010	(4) 2010	(6) 2017	
	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from similar sources.						
b	Unrelated business taxable						
	income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include						
	gain or loss from the sale of capital assets (Explain in						
	Part VI.)						<u></u>
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12)						
14	10c, 11, and 12.)	is for the organiza	tion's first soos	d third fourth	r fifth toy year	a contine E01(-)(2	、
	organization, check this box and	stop here		ia, unia, iourui, (			′ト□
	tion C. Computation of Put	olic Support P	ercentage				
	Public support percentage for 20						80
16	Public support percentage from 2	2016 Schedule A,	Part III, line 15 .				00
Sect	tion D. Computation of Invo	estment Incon	ne Percentage	e			·····
17	Investment income percentage for	or 2017 (line 10c,	column (f) divide	d by line 13, colu	umn (f))	17	00
	Investment income percentage fr						% %
19a	33-1/3% support tests-2017. If the	he organization di	d not check the	box on line 14. a	nd 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 orgar	nization qualifies	as a publicly suppo	orted organization.	▶
b	<b>33-1/3% support tests-2016.</b> If the line 18 is not more than 33 1/3%	ne organization di	d not check a bo	x on line 14 or line	ne 19a, and line 16	is more than 33-1	
20	line 18 is not more than 33-1/3% Private foundation. If the organiz	ation did not che	nu <b>stop nere.</b> In sk a box on line	e organization qu 14. 19a. or 19b. c	annes as a publici	y supported organ	
			TEEA0403L			hedule A (Form 99	
BAA							

#### 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

Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 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. 1 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). 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. 3a **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. 3b c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) in. purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use. 3c 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. 1 4a 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. 4h 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. 4c 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). 5a **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? 5b c Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to 6 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**. 6 3.5 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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).* 7 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). 8 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. 9a 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. ÷. 9b 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**. 9c 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. 10a 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.) 10b

Page 4

No

Yes

# Schedule A (Form 990 or 990-EZ) 2017 BOYS & GIRLS CLUB OF WESTERN LANE COUNTY 93-1236854 Page 5 Part IV Supporting Organizations (continued)

- 11 Has the organization accepted a gift or contribution from any of the following persons?
  - **a** 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?
  - **b** A family member of a person described in (a) above?

c 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.

#### Section B. Type I Supporting Organizations

- 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.
- 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 **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

#### Section C. Type II Supporting Organizations

**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).* 

#### Section D. All Type III Supporting Organizations

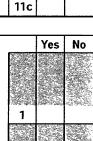
- 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- 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 the organization maintained a close and continuous working relationship with the supported organization*(s).
- **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 income or assets at all times during the tax year? If 'Yes,' describe in **Part VI** the role the organization's supported organizations played in this regard.

#### Section 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 instructions).
  - 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.
- c The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions).

#### 2 Activities Test. Answer (a) and (b) below.

- a 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.
- **b** Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more 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.*
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
  - a 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.*
  - 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.



Yes

11a 11b No

	Yes	No
and the second secon		
1		
2		

Yes

2a

2b

3a

3b

No

3

n(s) such	2		
		Yes	No
t of the n(s).	1		

# Schedule A (Form 990 or 990-EZ) 2017 BOYS & GIRLS CLUB OF WESTERN LANE COUNTY 93-1236854 Page 6 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 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.

Sect	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Sect	tion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		·

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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Schedule A (Form 990 or 990-EZ) 2017

Section D – Distributions			Current Year
1 Amounts paid to supported organizations to accomplish exempt pu	rposes		
2 Amounts paid to perform activity that directly furthers exempt purposes of		,	
in excess of income from activity			
3 Administrative expenses paid to accomplish exempt purposes of su	ipported organizations		
4 Amounts paid to acquire exempt-use assets	······································		
5 Qualified set-aside amounts (prior IRS approval required)			
6 Other distributions (describe in <b>Part VI</b> ). See instructions.			
7 Total annual distributions. Add lines 1 through 6.		1 1 14	
8 Distributions to attentive supported organizations to which the organization in Part VI). See instructions.	on is responsive (provide	details	
9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by line 9 amount			
ection E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required – explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017			
a			
<b>b</b> From 2013			
c From 2014			
<b>d</b> From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D,			
line 7: \$			
a Applied to underdistributions of prior years			
<b>b</b> Applied to 2017 distributable amount		Ch. S. Charles	
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
<b>6</b> Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:	and the second		
a Excess from 2013			
<b>b</b> Excess from 2014			
c Excess from 2015			1.1.1.1.1.1.1
d Excess from 2016			
e Excess from 2017	A CONTRACTOR OF A CONTRACT		NA STREET

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Schedule A (Form 990 or 990-EZ) 2017

Department of the Treasury Internal Revenue Service       Go to www.irs.gov/Form990 for Instructions and the latest information.       Open to Public Inspection         Name of the organization       Employer identification number         BOYS & GIRLS CLUB OF WESTERN LANE COUNTY       93–1236854         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.       (a) Donor advised funds       (b) Funds and other accounts         2       Aggregate value of contributions to (during year).       (a) Donor advised funds       (b) Funds and other accounts
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
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
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
1 Total number at end of year
2 Addredate value of contributions to (during year)
<ul> <li>Aggregate value of grants from (during year)</li></ul>
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds
are the organization's property, subject to the organization's exclusive legal control?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?
Part II Conservation Easements.
Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 7.
1 Purpose(s) of conservation easements held by the organization (check all that apply).
Preservation of land for public use (e.g., recreation or education)
Protection of natural habitat
Preservation of open space
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
Held at the End of the Tax Yea
a Total number of conservation easements
b Total acreage restricted by conservation easements
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►
4 Number of states where property subject to conservation easement is located ►
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
<ul> <li>Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year</li> <li>\$</li> </ul>
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.
1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
<b>b</b> If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
(i) Revenue included on Form 990, Part VIII, line 1
(ii) Assets included in Form 990, Part X►\$
If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
a Revenue included on Form 990, Part VIII, line 1
BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. TEEA3301L 10/11/17 Schedule D (Form 990) 20

Schedule D (Form 990) 2017 BOYS					93-123		antin	Page 2
Part III Organizations Mainta						· · · ·		ea)
<ul> <li>Using the organization's acquisition items (check all that apply):</li> <li>a Public exhibition</li> </ul>	, accession, and of		-	-	re a significant use of its	collectio	n	
		<b></b>	or excra	ange programs				
<b>b</b> Scholarly research		e 🗌 Other						
<ul> <li>c Preservation for future gener</li> <li>4 Provide a description of the organiz Part XIII.</li> </ul>		and explain how they	further	the organization'	s exempt purpose in			
<ul> <li>5 During the year, did the organiza to be sold to raise funds rather the solution of the solution of</li></ul>	tion solicit or rece nan to be maintair	eive donations of art ned as part of the o	, histor ganiza	rical treasures, o tion's collection	or other similar assets ?	Yes	Г	No
Part IV Escrow and Custodia line 9, or reported an	Arrangement	ts. Complete if t	ne orc	anization an		rm 990	), Par	tĪV,
<b>1 a</b> Is the organization an agent, trus on Form 990, Part X?	tee, custodian or	other intermediary	or con	tributions or oth	er assets not included	Yes	Г	 No
<b>b</b> If 'Yes,' explain the arrangement					<b></b>	Amount		
<b>c</b> Beginning balance						Anoun	•	
d Additions during the year								
e Distributions during the year								
f Ending balance								
<b>2 a</b> Did the organization include an a						Yes		No
<b>b</b> If 'Yes,' explain the arrangement					· · ·		[	
Part V Endowment Funds. C	omplete if the	organization and	swere	d 'Yes' on Fo	orm 990, Part IV, Iir	ne 10.		
	(a) Current year	(b) Prior year		(c) Two years back			our years	back
<b>1 a</b> Beginning of year balance	37,40	1.	0.		0. 0.	_		0.
<b>b</b> Contributions	51,66	5. 37,0	00.					
<b>c</b> Net investment earnings, gains, and losses	11,35	1. 4	53.					
<b>d</b> Grants or scholarships	1,66	5.						
e Other expenditures for facilities and programs				<u> </u>	0.			
f Administrative expenses	1,53		52.					
<b>g</b> End of year balance	97,22				0. 0.			0.
2 Provide the estimated percentage	-	ear end balance (lin	e 1g, co	olumn (a)) held	as:			
<b>a</b> Board designated or quasi-endowm		%						
<b>b</b> Permanent endowment	<u>100.00</u> %							
c Temporarily restricted endowmer		oto						
The percentages on lines 2a, 2b, ar	nd 2c should equal	100%.						
<b>3 a</b> Are there endowment funds not in t	ne possession of th	e organization that a	re held	and administered	l for the			
organization by:		ie erganization that a	e nora				Yes	No
(i) unrelated organizations						3a(i)		Х
(ii) related organizations						3a(ii)		Х
<b>b</b> If 'Yes' on line 3a(ii), are the rela						3b		
4 Describe in Part XIII the intended	uses of the orga	nization's endowme	nt fund	ls. See Par	t XIII			
Part VI Land, Buildings, and	Equipment.							
Complete if the organi	zation answer	ed 'Yes' on Forn	1 <mark>990</mark> ,	, Part IV, line	11a. See Form 99	0, Pari	t X, lir	ne 10.
Description of property	<b>(a)</b> (	Cost or other basis (investment)	<b>(b)</b> (ba	Cost or other isis (other)	(c) Accumulated depreciation	<b>(d)</b> E	Book va	lue
<b>1 a</b> Land				50,000.			50.	000.
<b>b</b> Buildings				197,200.	65,971.			229.
c Leasehold improvements				18,284.	3,107.			177.
d Equipment				35,932.	33,497.	•		435.
<b>e</b> Other				222,849.	33,358.			491.
Total. Add lines 1a through 1e. (Colum		Form 990, Part X. c	olumn					332.
BAA		, .				ule <b>D</b> (Fo		

Schedule D (Form 990) 2017 BOYS & GIRLS CLUB	OF WESTERN LAN	E COUNTY	93-1236854	Page 3
Part VII Investments – Other Securities.		N/A		
Complete if the organization answered				
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu	ation: Cost or end-of-year mark	et value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
<u>(C)</u>				
(D)				
<u>(E)</u>				
(F)				
(G) (H)				
(I)				
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)		NT / 7		
Part VIII Investments – Program Related. Complete if the organization answered	'Yes' on Form 990	), Part IV, line 11c.	See Form 990, Parl	X. line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation	on: Cost or end-of-year m	narket value
(1)				
(2)				
(3)				
(4)				·
(5)				
(6)				
(7)				
(8)				
(9)				
(10)		and the second of the second		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) ► Part IX Other Assets.				
<b>Part IX</b> Other Assets. Complete if the organization answered	'Yes' on Form 990	). Part IV. line 11d.	See Form 990, Part	X. line 15.
	scription	<u>,,</u>		ook value
(1) Construction in Progress				101,819.
(2) N/R Skalla				4,793.
(3) West Lane Community Foundation				487,279.
(4)			·····	
(5)				
(6) (7)				
(8)				
(9)				
(10)				·······
Total. (Column (b) must equal Form 990, Part X, column (E	3) line 15.)		►	589,098.
Part X Other Liabilities.				
Complete if the organization answered 'Yes' on Fo		<u>e or 11f. See Form 990,</u>	Part X, line 25	
(a) Description of liability	(b) Book value			
(1) Federal income taxes	150.02			
(2) Mortgage Payable (3) Rounding	150,92	<u>0.</u> 2.		
(4)		<u></u>		
(5)		-		
(6)				
(7)				
(8)				
(9)				
(10)				
(11)	1			

 Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)..... 
 150, 922.

 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.

ş

Schedule D (Form 990) 2017 BOYS & GIRLS CLUB OF WESTERN LANE COU	JNTY 93-	-1236854 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements V	Nith Revenue per Ref	turn.
Complete if the organization answered 'Yes' on Form 990, Part	IV, line 12a.	
1 Total revenue, gains, and other support per audited financial statements		1 484,366.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments 2	a	
b Donated services and use of facilities	b	
c Recoveries of prior year grants 2	c	
d Other (Describe in Part XIII.)	d	
e Add lines 2a through 2d		2e
3 Subtract line 2e from line 1		<b>3</b> 484,366.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1000 million and 1000	
a Investment expenses not included on Form 990, Part VIII, line 7b	a	
<b>b</b> Other (Describe in Part XIII.)	b	
c Add lines <b>4a</b> and <b>4b</b>		4 c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5 484,366.
Part XII Reconciliation of Expenses per Audited Financial Statements	With Expenses per F	
Complete if the organization answered 'Yes' on Form 990, Part		
1 Total expenses and losses per audited financial statements		1 353,005.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	Į	
a Donated services and use of facilities	a	
	b	
c Other losses		
	d	
e Add lines 2a through 2d		2e
<b>3</b> Subtract line <b>2e</b> from line <b>1</b>		<b>3</b> 353,005.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	3	- 555,005.
	a	
<b>b</b> Other (Describe in Part XIII.)	b	
c Add lines <b>4a</b> and <b>4b</b>		4c
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5 353,005.
Part XIII Supplemental Information.		·····

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

#### Part V, Line 4 - Intended Uses Of Endowment Fund

The purpose of the fund is to establish a permanent endowment, the earnings of which will be used to fund continuing education scholarships. Distributions from the fund are intended for the award of academic scholarships to graduates of the Siuslaw High School, Florence, Oregon and/or Mapleton High School, Mapleton, Oregon. It is for colleges or trade/vocational schools.

Schedule D (Form 990) 2017

		-		Fundraising or Gami			OMB No. 1545-0047
(Form 990 or 990-EZ)	complete if the organizat organizatio	n entered m	ore than \$15	orm 990, Part IV, line 17, 18 i,000 on Form 990-EZ, line 6 or Form 990-EZ.	a. 6, or 19, o 6.	rittine	2017 Open to Public
Department of the Treasury Internal Revenue Service Name of the organization	► Go to w			9 for the latest instruct	ions.	Employer identific	Inspection
BOYS & GIRLS CLUB OF						93-123685	
Fundraising Activities. C	not required to comp	lete this p	art.				
<ol> <li>Indicate whether the organization</li> <li>Mail solicitations</li> </ol>	ation raised funds th	rough any	of the foll			• • •	
<b>b</b> Internet and email solicit	ations		f	Solicitation of gove	-	-	
c Phone solicitations			g	Special fundraising	g events		
d In-person solicitations							
<b>2 a</b> Did the organization have a wri employees listed in Form 990	), Part VII) or entity i	in connect	tion with p	rofessional fundraising	service	s?	Yes 🕅 No
<b>b</b> If 'Yes,' list the 10 highest pa compensated at least \$5,000	id individuals or enti by the organization.	ties (fund	raisers) pı	ursuant to agreements	under w	hich the fundra	iser is to be
(i) Name and address of individuor or entity (fundraiser)	ual <b>(ii)</b> Activity	I have custo	fundraiser dy or control fibutions?	(iv) Gross receipts from activity	or fundr	mount paid to retained by) aiser listed in column <b>(i)</b>	(vi) Amount paid to (or retained by) organization
		Yes	No				
1							
2							
3							
4	·						
-							
5							
6							
7							
8							
9							
10							
Total.						•••••	0.
3 List all states in which the orga or licensing.	nization is registered o	or licensed	to solicit c	ontributions or has been	notified	It is exempt from	registration
				· · · · · · · · · · · · · · · · · · ·			

#### Schedule G (Form 990 or 990-EZ) 2017 BOYS & GIRLS CLUB OF WESTERN LANE COUNTY 93-1236854

**Part II** Fundraising Events. Complete if the organization answered 'Yes' on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		List ovolitio miti gi coo i occipio gi	bater than wejeee.			
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Homecoming & O	Summer Golf To	None	(add column (a)
R			(event type)	(event type)	(total number)	through column (c)
EV						
REVENUE	1	Gross receipts.	81,143.	41,136.		122,279.
Ũ	l '		01/143.	41,130.		144,413.
Ε	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)	81,143.	41,136.		122,279.
	4	Cash prizes				
_	5	Noncash prizes				······································
D						
R	6	Rent/facility costs				
DIRECT	-	Food and beverages				
	1					
X	8	Entertainment				
E	Ĭ					
EXPENSES	9	Other direct expenses.	26,644.	11,428.		38,072.
Ĕ	- T		20/011.			
3	10	Direct expense summary. Add lines 4 thr	ough 9 in column (d)		•	20 070
Name: 5 & A.23	11	Net income summary. Subtract line 10 fr				
Par	tIII	Gaming. Complete if the organiza	ation answered 'Ye	s' on Form 990, Pai	rt IV, line 19, or re	ported more than
		\$15,000 on Form 990-EZ, line 6a.				
				(b) Pull tabs/instant		(d) Total gaming
R			(a) Bingo	bingo/progressive	(c) Other gaming	(add column (a)
Ϋ́				bingo		through column (c)
REVENUE						
Ĕ	1	Gross revenue				
	<u>'</u> -	Gloss levellue				
	2	Cash prizes				
EXPENSES DIRECT						
D I RECT	3	Noncash prizes				
EN						
ŤĔ	4	Rent/facility costs				
3		-				
	5	Other direct expenses.				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	No	No	No	
	7	Direct expense summary. Add lines 2 thr	ough 5 in column (d)		•••••••	
	8	Net gaming income summary. Subtract li	ine 7 from line 1, colum	nn (d)	•	
9	Ent	er the state(s) in which the organization co	anducte coming activitie			
-						
		he organization licensed to conduct gamin	g activities in each of th	hese states?		Yes No
I	b If 'N	lo,' explain:				
10:	a Wer	re any of the organization's gaming license	es revoked, suspended.	or terminated during th	ne tax year?	. Yes No
			,,			
1	bilf 'Y	(es.' explain:				
1	bilf 'Y	/es,' explain:				

Page 2

Schedule G (Form 990 or 990-EZ) 2017 BOYS & GIRLS CLUB OF WESTERN LANE COUNTY	93-1236854	Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes	No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity form administer charitable gaming?		No
13 Indicate the percentage of gaming activity conducted in:		
<b>a</b> The organization's facility	13a	5
<b>b</b> An outside facility.		8
14 Enter the name and address of the person who prepares the organization's gaming/special events books and r		
Name ►		
Address ►		
<ul> <li>15 a Does the organization have a contract with a third party from whom the organization receives gaming b If 'Yes,' enter the amount of gaming revenue received by the organization <sup>▶</sup> \$ of gaming revenue retained by the third party <sup>▶</sup> \$ c If 'Yes,' enter name and address of the third party:</li> </ul>	revenue? <b>Yes</b> and the amount	No
Name ►		
Address ►		1
16 Gaming manager information:		
Name ►		
Gaming manager compensation ► \$		
Description of services provided		
Director/officer		
17 Mandatory distributions:		
<ul> <li>a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain state gaming license?</li> <li>b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sp organization's own exempt activities during the tax year ► \$</li> </ul>	Yes	No
<b>Part IV</b> Supplemental Information. Provide the explanations required by Part I, line 2 and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide information. See instructions.	o, columns (iii) and ( le any additional	v);

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#### SCHEDULE O (Form 990 or 990-EZ)

1<sup>11</sup> •

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.



#### Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

## BOYS & GIRLS CLUB OF WESTERN LANE COUNTY

#### Form 990, Part VI, Line 11b - Form 990 Review Process

990 prepared by organization's CPA and reviewed by the board prior to filing.

#### Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Disqualified persons must disclose any activity or relationship that is or might appear to be a conflict of interest. Once per year, each board member shall be required to submit a signed disclosure statement that describes activities such as employment, other board memberships (corporate or nonprofit), relevant affiliations, related personal or professional dealings, and any other relationships or business interest that might result in conflict. The related activities of close family memebers should also be reported.

#### Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Governing docs and policies are disclosed on own website and are made available on request.

# BOYS & GIRLS CLUB OF WESTERN LANE COUNTY

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JUL 3 1 2018

DEPARTMENT OF JUSTICE PORTLAND LEGAL

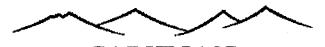
FINANCIAL STATEMENTS (Audited)

For the Year Ended December 31, 2017 and 2016

# **BOYS & GIRLS CLUB OF WESTERN LANE COUNTY**

# CONTENTS

Indep	endent Accountants' Report	3 4 5 6
Finan	cial Statements:	
	Statements of Financial Position	3
	Statements of Activities and Changes in Net Assets	.4
	Statements of Functional Expenses	.5
	Statements of Cash Flows	6
	Notes to Financial Statements	7



CAPSTONE CERTIFIED PUBLIC ACCOUNTANTS, LLC

The Board of Directors Boys & Girls Club of Western Lane County Florence, Oregon

### **INDEPENDENT AUDITORS' REPORT**

We have audited the accompanying financial statements of Boys & Girls Club of Western Lane County (a non-profit organization) which comprise the statements of financial position as of December 31, 2017 and 2016, and the related statements of activities, changes in net assets and cash flows for the years then ended, and the related notes to the financial statements.

#### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

#### Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the

CAPSTONE CERTIFIED PUBLIC ACCOUNTANTS, LLC

698 NW York Dr., Bend, OR 97703 phone: 541-382-5099 fax: 541-388-1056 735 SW 9<sup>th</sup> St., Redmond 97756 phone: 541-548-3569 fax: 541-548-3580 PO Box 1563, Sisters, OR 97759 phone: 5411 549-1237 fax: 541- 549-4465 financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our qualified audit opinion.

#### Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Boys & Girls Club of Western Lane County as of December 31, 2017 and 2016 and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Capstone Certified Public accountants X.C.

Capstone Certified Public Accountants, L.L.C. May 11, 2018

# **BOYS & GIRLS CLUB OF WESTERN LANE COUNTY**

# STATEMENTS OF FINANCIAL POSITION

(See Independent Auditor's Report)

December 31,	аў — <b>ж</b> аўна актала на	2017		2016
A	SSETS	nan na an an an Arlan		
Current assets:				
Cash	\$	124,814	\$	134,811
Accounts receivable	••••••••••	2,050		-
Total current assets		126,864		134,811
Property (Note 2) Less accumulated depreciation	·	524,262 135,932	Galifficação	682,890 157,737
Net property and improvements		388,330		525,153
Construction in progress		101,819		-
Beneficial interests (Note 4)		487,279		37,401
Notes receivable (Note 3)		4,793		295,648
	\$	1,109,085	\$	993,013

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December 31,		2017		2016	
LIABILIITES AND	NET ASSE	TS			
Current liabilities:					
Accounts payable	\$	4,239	\$	5,243	
Accrued payroll liabilities		10,268		6,977	
Current portion of long term debt (Note 6)	·	150,920	•	7,063	
Total current liabilities		165,427		19,283	
Long term debt (Note 6)		-		161,433	
Total liabilities		165,427		180,716	
Net assets:					
Unrestricted		408,673		355,487	
Temporarily restricted (Note 9)		47,706		419,409	
Permanently restricted (Note 4)		487,279		37,401	
Total net assets		943,658		812,297	
	\$	1,109,085	\$	993,013	

The accompanying notes are an integral part of the financial statements.

### STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS (See Independent Auditor's Report)

# For the Year Ended December 31, 2017 (With Comparative Totals for the Year Ended December 31, 2016)

	Unrestrict		Temporarily Restricted			2016 Total	
Support, revenues and							
program receipts:							
Program fees	\$ 65,5		<b>6</b> -	\$-	\$ 65,523	\$ 72,5	<i>i</i> 10
Grants	95 <i>,</i> 3			-	95,315	18,1	. <b>70</b>
Contributions	118,4	53	71,500	117,810	307,763	544,9	134
Special events, net of cost	84,2	)7	-	-	84,207	22,8	82
Miscellaneous	24,4	<u>4                                    </u>	-	41,213	65,657		95
Total support, revenues and							
program receipts	387,9	2	71,500	159,023	618,465	667,0	91
Net assets released							
from restriction:	152,3	<u>8 (</u>	443,203)	290,855		-	
Operating expenses:							
Program services	387,4	9	-	-	387,409	224,99	92
General and administrative	98,60	5	-	-	98,605	47,24	46
Fundraising	1,0	0	-		1,090	14,63	39
Total expenses	487,1	4			487,104	286,83	77
Increase in net assets	53,18	6 (	371,703)	449,878	131,361	380,21	14
Net assets - Beginning of year	355,48		419,409	37,401	812,297	432,08	83
Net assets - End of year	\$ 408,62	3 <u>\$</u>	47,706	\$ 487,279	\$ 943,658	\$ 812,29	97

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# STATEMENTS OF FUNCTIONAL EXPENSES

(See Independent Auditor's Report)

# For the Year Ended December 31, 2017 (With Comparative Totals for the Year Ended December 31, 2016)

			orting vices		
	Program	Management		2017	2016
	Services	and General	and General Fundraising		Total
Salaries	\$ 144,895	\$ 13,386	\$ -	\$ 158,281	\$    112,994
Payroll taxes and					
workers' compensation	16,638	1,582	-	18,220	15,333
Employee benefits	1,912	167	-	2,079	·
Total salaries and related expenses	163,445	15,135	. –	178,580	128,327
Advertising	6,394	1,123	595	8,112	754
Athletic program	20,212	29	-	20,241	25,547
Bank charges	20	514	-	534	1,417
Depreciation	-	8,382	-	8,382	7,749
Dues and subscriptions	-	439	175	614	9,606
Insurance	1,937	9,812	-	11,749	12,333
Interest expense	-	4,008	-	4,008	549
Loss on disposition of assets	134,099	-	-	134,099	-
Miscellaneous expense	96	2,448	-	2,544	4,973
Office	1,107	1,672	-	2,779	1,867
Printing and publications	1,018	1,768	21	2,807	1,918
Professional fees	1,557	31,238	-	32,795	2,858
Program expenses	26,210	-	-	26,210	30,165
Rent and occupancy	21,032	13,431	-	34,463	56,389
Staff development	8,548	8,494	299	17,341	771
Vehicle expense	1,734	112	-	1,846	1,654
Total expenses	\$ 387,409	\$ 98,605	\$ 1,090	\$ 487,104	\$ 286,877

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# STATEMENTS OF CASH FLOWS

(See Independent Auditor's Report)

2017			2016
\$	131,361	\$	380,214
	8,382		7,748
	134,099		-
(	2,050)		
(	1,004)	(	2,239)
•••••	3,291	<u></u>	3,475
	274,079		389,198
(	101,819)		-
(	5,658)		-
	290,855	(	295,648)
(	449,878)	(	37,401)
(	266,500)	(	333,049)
(	17,576)	(	8,030)
(	17,576)	(	8,030)
(	9,997)		48,119
	134,811		86,692
· .	124,814	\$	134,811
		\$ 131,361	\$ 131,361 \$ 8,382 134,099 ( 2,050) ( 2,050) ( 1,004) ( 3,291 274,079 ( 101,819) ( 5,658) 290,855 ( ( 449,878) ( ( 266,500) ( ( 17,576) ( ( 17,576) ( ( 9,997) (

The accompanying notes are an integral part of the financial statements.

### NOTES TO FINANCIAL STATEMENTS (See Independent Auditor's Report)

### **1 - Significant Accounting Policies**

### **Organization's Activities**

The Boys & Girls Club of Western Lane County (hereafter, "the Organization"), is a nonprofit youth guidance agency. It is a local chapter of the Boys & Girls Club of America, and has served the area's youth, ages six to eighteen since 1996. The Organization promotes the health, social, education, vocational, and character development of each member and provides a variety of wholesome, adult-guided activities, and services at a minimal cost.

### **Basis of Accounting**

The financial statements of the Organization have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables, and other liabilities. Financial statement presentation follows the recommendations of the Financial Accounting Standards Board Accounting Standards Codification (ASC) 958, *Not-For-Profit Organizations*. Under ASC 958, the Organization is required to report information regarding its financial position and activities per three classes of net assets; unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets. As permitted by ASC 958, the Organization does not use fund accounting.

### **Basis of Presentation**

As required by generally accepted accounting principles, the Organization reports information regarding its financial position and activities in the following three net asset classes:

Unrestricted Net Assets - Net assets that are not subject to donor – imposed stipulations are classified as unrestricted net assets.

Temporarily Restricted Net Assets - Net assets that are subject to donor – imposed stipulations that may or will be met either by action of the Organization and / or the passage of time are classified as temporarily restricted net assets. When a restricted expires, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restriction.

Permanently Restricted Net Assets - Net assets that are required by donor – imposed stipulations to be maintained permanently by the Organization are classified as permanently restricted net assets.

### NOTES TO FINANCIAL STATEMENTS (See Independent Auditor's Report)

### 1 - Significant Accounting Policies - continued

### **Public Support and Revenue**

The organization is supported primarily through donor contributions, grants, and fund raising activities. Campaign contributions are generated through mail solicitations and special event activities. Contributions are recognized upon receipt. Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support depending on existence or nature of any donor restrictions. Contributions that are restricted by the donor are reported as increases in unrestricted net assets if the restrictions expire in the calendar year in while the contributions are recognized. All other donor-restricted contributions are reported as increases in temporarily or permanently restricted net assets depending on the nature of the restrictions. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets.

### **Contributed Services and Noncash Assets**

Contributions of donated services that creates or enhances nonfinancial assets or that require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation. Contributions of donated noncash assets are recorded at their fair values in the period received.

### **Functional Allocation of Expenses**

The costs of providing the various programs and other activities have been summarized on a functional basis in the statement of functional expenses. Accordingly, certain costs have been allocated among the programs and supported services benefitted.

### **Cash and Cash Equivalents**

For the purpose of the statement of cash flows, the Organization considers petty cash and all demand deposits to be cash and cash equivalents. Cash held by financial institutions is insured by the Federal Deposit Insurance Corporation up to \$250,000 for each institution. The balance held by these institutions did not exceed the insured amount during the periods ended December 31, 2017 and 2016, respectively.

### NOTES TO FINANCIAL STATEMENTS - Continued (See Independent Auditor's Report)

# 1 - Significant Accounting Policies - continued

### **Property and Equipment**

It is the Organization's policy to capitalize property and equipment over \$500. All significant acquisitions and renovations which increase the value of assets are capitalized. All expenditures for repairs and maintenance are expensed in the period in which the cost is incurred. Purchased property and equipment is capitalized as cost. Depreciation expense for the years ended December 31, 2017 and 2016 were \$8,382 and \$7,749, respectively.

Property	5 - 39 years
Equipment	3 - 10 years

In 2017, the Organization disposed of land improvements, with a basis of \$134,100, made to the former site of the modular building. The land improvements are no longer available to the Organization for use.

### **Donated Assets**

Donations of property and equipment are recorded as contributions at their estimated fair value. Such donations are reported as unrestricted contributions unless the donor has restricted the donated asset to a specific purpose or use. Absent donor stipulations regarding how long the donated asset must be maintained, the Organization reports expirations of donor restrictions when the donated assets are placed in service.

### **Compensated Absences**

The Organization provides paid leave benefits to its full-time employees. The unpaid leave balances as of December 31, 2017 and 2016 were \$0 and \$897, respectively.

### NOTES TO FINANCIAL STATEMENTS - Continued (See Independent Auditor's Report)

### **1 - Significant Accounting Policies - continued**

### **Use of Estimates**

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America require management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

### **Advertising Costs**

The Organization expenses advertising costs as incurred. The Organization incurred \$8,112 and \$754 in advertising costs, for the years ended December 31, 2017 and 2016, respectively.

### **Income Taxes**

The Boys & Girls Clubs is a nonprofit organization as described in Section 501(c)(3) of the Internal Revenue Code and is exempt from federal and state income taxes and classified by the Internal Revenue Service as other than a private foundation.

The Organization follows accounting standards for uncertain income tax positions. The Organization will recognize in its financial statements the benefit of a tax position when it believes that tax position will more likely than not be sustained on audit based on the technical merits of the position. For an exempt organization, uncertain tax positions could result from unrelated business income activities or actions that jeopardize its status as tax-exempt, such as political activity, substantial lobbying expenditures or excessive unrelated business activities. The Organization has concluded that it had no unrecognized income tax benefits at December 31, 2017 and 2016, and it has no tax positions for which it estimates a significant change over the next 12 months.

### Date of Management's Review

Subsequent events have been evaluated through May 11, 2018, which is the date the financial statements were available to be issued. See Note 10 for subsequent events to which management was aware for disclosure.

# NOTES TO FINANCIAL STATEMENTS - Continued (See Independent Auditor's Report)

# 2 - Property and Equipment

The following is a summary of	f property and equipment:
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2017	2017 Cost Depreciation		Net Book Value			
Assets held for use:						
Land	\$	50,000	\$	-	\$	50,000
Building and improvements		215,482		70,392		145,090
Furniture and equipment		26,200		23,765		2,435
Vehicles	<u></u>	9,731	·	9,731	. <u> </u>	-
	<b>.</b>	301,413	<del>وئ</del> ري قير بروجي	103,888	<u></u>	197,525
Idle assets as of December 31, 2017						
Buildings		202,582		20,150		182,432
Furniture and equipment		20,267		11,894	<b></b>	8,373
	<del></del>	222,849		32,044		190,805
	\$	524,262	\$	135,932	\$	388,330
2016		Cost	Accumulated Depreciation		Net Book Value	
2010		CUBI	Dej	picciation		Value
Assets held for use:						
Land	\$	50,000	\$	-	\$	50,000
Building and improvements		209,822		64,219		145,603
Furniture and equipment		26,200		23,015		3,185
Vehicles		9,731		8,271	·	1,460
		295,753		95,505	<u>Höhen and and and and and and and and and an</u>	200,248
Idle assets as of December 31, 2016						
Land improvements		164,288		30,188		134,100
Buildings		202,582		20,150		182,432
Furniture and equipment	<b></b>	20,267	<b>b</b>	11,894		8,373
		387,137		62,232		324,905
			Topological Contraction			

# **NOTES TO FINANCIAL STATEMENTS - Continued**

(See Independent Auditor's Report)

### 3 - Notes Receivable

In 2016, a donor assigned interest to the Organization two notes receivable with relation to properties in Riverside County, California. The notes are secured by the deeds of trust of the properties to which the donor owns. The following is a schedule of the notes receivable at December 31, 2017 and 2016.

Note receivable from Ronald Wilkoff, in monthly installments of \$850, originally due July 10, 2020. Paid in full in 2017, due to proceeds from the sale of related		
property.	\$ -	\$ 285,400
Note receivable from Terry and Vikki Skalla, in monthly payments of \$500, including interest at 7% per annum,		
due September 30, 2018.	 4,793	 10,248
	\$ 4,793	\$ 295,648

### 4 - Beneficial Interests

Beneficial interests in split-interest agreements held by others are recorded at the net present value of the estimated future amount to be received from such assets, revalued annually based on the fair value of investments on December 31. In 2016, the Organization received a donation to establish a Continuing Education Trust Fund. In 2017, the Organization established the John and Patricia Hardison Children's Charitable Endowment. The Organization has established the funds with the Western Lane County Community Foundation. The funds are invested with the Oregon Community Foundation on behalf of the Organization.

Per the Oregon Community Foundation and the Standards prescribed by ASC 958 the Endowment Fund should be shown as permanently restricted funds by the Organization based on the beneficial interest in the Endowment. The Oregon Community Foundation, even though it has custody of the restricted funds, does not show these funds as Net Assets for the Foundation. Accordingly, in 2016 the Endowment Fund was recorded on the financial statements of the Organization during the year transfers between the Endowment Fund and operations are shown in Changes of Net Assets in the financial statements.

# **NOTES TO FINANCIAL STATEMENTS - Continued**

(See Independent Auditor's Report)

### 4 - Beneficial Interests - Continued

### Al Pearn Endowment:

The Organization is also named as the beneficiary of a permanent endowment. The earnings of the endowment are to be used to benefit the Organization. The Organization cannot use the original principal of the endowment. Should the Organization cease to exist, the beneficiary would change to another organization named in the agreement. Based on the preceding facts, the Organization has not recorded an asset for the endowment and only records the distribution of earnings when received.

### **5 - Operating Lease**

The Organization has entered into leases for office and program space under agreements with Siuslaw School District for \$300 a month.

# Minimum lease payments as follows for the Years Ending December 31,

	\$ 5,100
2019	 1,500
2018	\$ 3,600

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6 - Long-Term Debt		2017	2016		
Note payable to Oregon Pacific Bank, in monthly installments of \$715, including interest at 2.16% per annum, subsequently refinanced in April, 2018					
(See Note 10).	\$	150,920	\$	156,141	
Systems Development Charge payable to the City of Florence. This note was assumed in the merger with Quality Child Care of Florence, in monthly installments of \$1,214, including interest at 5.27% per annum, originally due December 2023. Paid in full in					
March, 2017.	<b>.</b>			12,355	
		150 <b>,920</b>		168,496	
Less current portion		150,920		7,063	
	\$		\$	161,433	
Maturities of long-term debt are as follows for the years ending December 31,					
2018	\$	150,920			
		150,920			
Less current portion	<del>.</del>	150,920			
Long-term portion	\$	-			

# NOTES TO FINANCIAL STATEMENTS - Continued (See Independent Auditor's Report)

### NOTES TO FINANCIAL STATEMENTS - Continued (See Independent Auditor's Report)

### 7 - Concentrations

The Organization's operations are concentrated in Florence, Oregon. In 2016, a significant portion of the Organization's revenues for continuing operations were from an individual donor. This revenue was approximately 58% of the Organization's total revenue.

### 8 - Fair Value of Financial Instruments

Unless otherwise indicated, the fair value of all reported assets and liabilities which represent financial instruments, (none of which are held for trading purposes), approximate the Level 1 carrying value of the three levels of the hierarchy.

### 9 - Restrictions on Net Assets

### Temporarily restricted net assets

Temporarily restricted net assets for program activities consisted of the following:

	2017		2016	
Osbon building relocation	\$	25,534	\$	60,000
Security cameras		4,123		8,280
Hardison note receivables		4,793		295,648
Uniforms		-		1,000
Osbon bequest		-		54,481
Cow Creek managing money		248		-
Three Rivers kitchen grant		1,393		-
BGCA passthrough		1,131		-
U.S. Bank managing money		484		-
Hardison van/bus cover	-	10,000	·	-
	\$	47,706	\$	419,409

## NOTES TO FINANCIAL STATEMENTS - Continued (See Independent Auditor's Report)

# 9 - Restrictions on Net Assets - Continued Temporarily restricted net assets released Net assets were released from donor restrictions by incurring expenses or providing services satisfying the purpose of time and restrictions specified by donors as follows: 2017 2016 Purpose and restriction accomplished: Private / other \$ 443,203 \$ 81,239

### **10 - Subsequent Events**

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Long term debt associated with Oregon Pacific Bank was refinanced in April of 2018 to extend the date of maturity to March of 2028, and adjust the interest rate from 2.16% to 5.29%.