## Form **990**

Department of the Treasury

Internal Revenue Service

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

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

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

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

2022

OMB No. 1545-0047

Open to Public Inspection

A F	or the	2022 calend	dar year, or tax year	beginning		09-01	, <b>2022</b> , ar	nd ending	08	-31 , <b>20</b> 23
<b>B</b> 0	heck if a	applicable:	C Name of organization	BOYS &	GIRLS CLUBS O	F GREATER	NEW HAV	MEN, INC	D Emplo	yer identification number
	ddress c	change	Doing business as	BOYS AN	ND GIRLS CLUB	OF NEW HA	VEN			06-0646935
	lame cha	ange	Number and street (or	r P.O. box if mail is	s not delivered to street add	ress)		Room/suite	E Teleph	one number
	nitial retu	ırn	253 TO 259	COLUMBUS	S AVENUE					(203)787-0187
F	inal retu	rn/terminated	City or town, state or	province, country,	and ZIP or foreign postal co	ode			<b>G</b> Gross	receipts
	mended	return	NEW HAVEN,	CT 06519	9				\$	2,268,238
	pplicatio	n pending	F Name and address of	principal officer:				H(a) Is this a	group return fo	or subordinates? Yes X No
								H(b) Are all	subordinates	s included? Yes No
<u>I T</u>	ax-exem	npt status:	501(c)(3) 501(c)	) ( ) (in:	sert no.) 4947(a)(	(1) or 527	7	If "No,"	' attach a list	. See instructions
	Vebsite:	_	BGCNEWHAVEN	ORG				H(c) Group	exemption n	umber
		rganization: X		Association	Other	L '	Year of formatio	n: <b>1871</b> M	State of lega	al domicile: CT
Pa	rt I	Summar	<b>4</b>							
	1	•	-		nost significant activiti			ND ENABLE AI		
ø				NEED US N	MOST, TO REALI	ZE THEIR	FULL POI	TENTIAL AS P	RODUCT	IVE, RESPONSIBLE
anc		AND CARI	NG CITIZENS.							
ern								· · · · · · · · · · · · · · · · · · ·		
& Governance	2		_		nued its operations or	•			1 1	0.0
∞ ∞	3		-		ody (Part VI, line 1a)				3	23
Activities	4				governing body (Par				4	23
Ĭ	5		•	-	dar year 2022 (Part V	•			5 6	189
Act	6		`		ary)				7a	35
					II, column (C), line 12 orm 990-T, Part I, line				7a 7b	0
		ivet uniterate	u business taxable i	ncome nom r	Jiii 990-1, Fait I, IIIIe	<del></del>		Prior Year		Current Year
	8	Contributions	s and grants (Part Vi	III line 1h)					4,899	1,339,322
ø	9		• ,	•					6,160	660,195
Revenue	10	•	,	•	3, 4, and 7d)				0,597	29,975
	11				d, 8c, 9c, 10c, and 11				6,138	173,914
-	12				qual Part VIII, column				7,794	2,203,406
	13			'	mn (A), lines 1-3) .	` , _ ,		3,20	, , , , , ,	0
	14		·	•	nn (A), line 4)					0
	15				ts (Part IX, column (A			1,140	6,552	1,800,063
ses	16a		•		(A), line 11e)			,		0
Expenses			ising expenses (Part	•			180,686			
쬤	17	Other expen	ses (Part IX, column	(A), lines 11a	-11d, 11f-24e)			608	8,839	793,457
	18	Total expens	ses. Add lines 13-17	' (must equal F	Part IX, column (A), lir	ne 25)			5,391	2,593,520
	19	Revenue les	s expenses. Subtra	ct line 18 from	line 12			1,35	2,403	(390,114)
- S								Beginning of Curr	rent Year	End of Year
sets	20	Total assets	(Part X, line 16) .					2,67	4,773	2,172,477
Net Assets or Fund Balances	21	Total liabilitie	es (Part X, line 26)					36	3,189	232,504
_				ubtract line 21	from line 20			2,31	1,584	1,939,973
	rt II		ire Block							
					ing accompanying schedule sed on all information of wh			of my knowledge and be	lief, it is	
Sig	n	JEFF Signature of office	REY PYTLAK						Late	
Her		· ·							Date	•
пеі	<b>-</b>	Type or print nar	-	NTERIM EX	KECUTIVE OFFIC	ER				
			eparer's name	Prepare	er's signature	1	Date	Charle	□ if	PTIN
Paid	4		VISCONTI	, repare	<del>3</del>		7-09-202	Check	□ "	P00027180
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J30	- O.III)	, i iiii s addies		HAVEN C				FIIOTIC IIU.	203-8	865-2927
Mav	the IRS	S discuss this			ove? See instructions					X Yes No

Part IV

06-0646935

Checklist of Required Schedules

Yes No 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 х 2 2 х 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 х 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 Х Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, 5 assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III. . . . . . . . . . . . . . . . . 5 Х Did the organization maintain any donor advised funds or any similar funds or accounts for which donors 6 have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 6 Х 7 Did the organization receive or hold a conservation easement, including easements to preserve open space. 7 Х 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 X Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a 9 custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or 9 Х 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 Х 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," 11a Х b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more 11b Х c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more 11c Х d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets х e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X . . . . . . . 11e Х Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X . . . . . 11f Х 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete 12a **b** Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional . . . . . . . 12b Х 13 13 х 14a Did the organization maintain an office, employees, or agents outside of the United States? .............. Х 14a 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 14b Х 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 Х 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 Х Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 Х Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 19 Х 20a Х 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? If "Yes," complete Schedule I, Parts I and II . . . . . . . . . . . . . 21 x

Part IV

06-0646935

BOYS & GIRLS CLUBS OF GREATER NEW HAVEN, INC Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
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? If "Yes," complete Schedule J	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	04-		
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24=		
	to defease any tax-exempt bonds?	24c 24d		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24u		
ZJa	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		v
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	ZJa		Х
D	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		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		Α
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part.II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			Λ
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV, instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? 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		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		х
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 on Schedule O for Part VI, lines 11b and			
	19? <b>Note</b> : All Form 990 filers are required to complete Schedule O	38	х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	х	

Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 189			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
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 Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	- Ch		
7		6b		
7	Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
а	and services provided to the payor?	7a		х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7.5		
Ŭ	required to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	_		
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	1.0		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	_		
13 a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	Note: See the instructions for additional information the organization must report on Schedule O.	Tou		
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			
С	Enter the amount of reserves on hand	-		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule Q	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes " complete Form 6069			

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	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? If "Yes," provide the names and addresses on Schedule Q	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	40		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	40-		
42	describe on Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13 14	v	X
14		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?			
а	The organization's CEO, Executive Director, or top management official	15a	x	
b	Other officers or key employees of the organization	15b	X	
b	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	130	^	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
Ioa	with a taxable entity during the year?	16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	104		A
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		х
Sec	tion C. Disclosure	. 5.5		<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed Connecticut			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website  Another's website  Upon request  Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			

JEFFREY PYTLAK (203)787-0187, 253 TO 259 COLUMBUS AVENUE, NEW HAVEN, CT 06519

## **Part VII**

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and **Independent Contractors** 

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- · List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employees."
- 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

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

See instructions for the order in which to list the persons above.

			•	(	C)					
(A)	(B)	Position (do not check more than one box, unless person is both an				(D)	(E)	(F)		
Name and title	Average					Reportable	Reportable	Estimated amount		
	hours per week	offic	officer and a director/trustee)			/trustee)		compensation from the	compensation from related	of other compensation
	(list any				_	•		organization (W-2/	organizations (W-2/	from the
	hours for	Individual or director	nstit	Office	(ey	Tigh empl	Former	1099-MISC/	1099-MISC/	organization and
	related	ecto.	utio	역	emp	est o	ĕ	1099-NEC)	1099-NEC)	related organizations
	organizations	Individual trustee or director	nal ti		Key employee	omp				
	below	stee	Institutional trustee		Ф	ens				
	dotted line)		ď			Highest compensated employee				
(1) LISA_CARUSO										
CEO				х				78,750	0	0
(2) CARLOS COLLAZO										
C00				х				32,817	0	0
(3) PAUL JANUSZEWSKI	1.00									
BOARD MEMBER		Х						0	0	0
(4) CHRIS ULBRICH	1.00									
BOARD MEMBER		х						0	0	0
(5) JAIME MCADAM	1.00									
BOARD MEMBER		х						0	0	0
(6) JEFF BRADANINI	1.00									
BOARD MEMBER		х						0	0	0
(7) ERIK_HOLDER	1.00									
BOARD MEMBER		х						0	0	0
(8) AL SCHENCK	1.00									
BOARD MEMBER		х						0	0	0
(9) RONNELL HIGGINS	1.00									
BOARD MEMBER		х						0	0	0
(10)STAN_DOMBROSKI	1.00									
BOARD MEMBER		х						0	0	0
(11)KEVIN_LYONS	1.00									
BOARD MEMBER		х						0	0	0_
(12)LATOYA R GAUSE	1.00									
BOARD MEMBER		х						0	0	0_
(13)FALLON THOMAS	1.00									
BOARD MEMBER		х						0	0	0_
(14)JAMES CARR	1.00									
BOARD MEMBER		х						0	0	0

EEA Form 990 (2022)

(A) Name and title	(B)  Average hours per week (list any hours for related organizations below dotted line)	box	, unle: cer an	Pos eck m ss per d a di	rson i rector	han one s both ar r/trustee)		(D)  Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E)  Reportable compensation from related organizations (W-2/1099-NISC/1099-NEC)	cor f orga	(F) nated amount of other mpensation from the nization and d organizations
(15)DAWN_MEEKER	1.00	)									
BOARD MEMBER		Х						0	0		0
(16)TAMMIE ULBRICH BOARD MEMBER	1.00	x						0	0		0
(17)MARILYN BURLENSKI	1.00							0	0		
BOARD MEMBER		x						0	0		0
(18)DARYL JONES	1.00										
1ST VICE PRESIDENT		х		х				0	0		0
(19)JON LONGOBARDI	1.00										
2ND VICE PRESIDENT		x		Х				0	0		0
(20)CHRIS MARONE	1.00										
TREASURER	1 00	X		Х				0	0		0
(21)GREG_MICKELSONSECRETARY	1.00	x		x				0	0		0
(22)ERIK SCARANUZZO	1.00			•				0	0		
PRESIDENT		x		х				0	0		0
(23)											
(24) (25)											
1b Subtotal											
c Total from continuation sheets to Part VII, Sec	tion A .										
d Total (add lines 1b and 1c)								111,567	0		0
Total number of individuals (including but not lim											
reportable compensation from the organization											C
											Yes No
3 Did the organization list any former officer, direct		-				_					
employee on line 1a? If "Yes," complete Schedu										3	X
4 For any individual listed on line 1a, is the sum of a organization and related organizations greater the											
individual					•					4	x
5 Did any person listed on line 1a receive or accrue										-	A
for services rendered to the organization? If "Ye			-			-				5	х
Section B. Independent Contractors											
1 Complete this table for your five highest compensation.	ated independ	dent co	ntra	ctors	s tha	t receiv	ved	more than \$100,00	00 of		
compensation from the organization. Report com	pensation for	the cal	enda	ar ye	ear e	ending	with	or within the organ	nization's tax year.		
(A)								(B)		(C)	
Name and business addre	SS							Description of service	es	Compens	ation
-											
2 Total number of independent contractors (including received more than \$100,000 of compensation from the contractors).	-			se lis	ted	above)	wh	0			

Form 990 (2022) BOYS & GIR
Part VIII Statement of Revenue

1 uit		Check if Schedule O cor	ntains a respons	e or n	ote to any line in this	Part VIII			
			·			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	1a	Federated campaigns		1a					
	b			1b					
ants ints	С	Fundraising events		1c					
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organizations		1d					
iifts ar Al	е	Government grants (contrib	butions)	1e	932,935				
S, E	f	All other contributions, gifts	s, grants,						
i ii Si		and similar amounts not in	cluded above	1f	406,387				
rib Xthe	g	Noncash contributions incl	uded in						
nd C		lines 1a-1f		1g	\$				
0 m	h	Total. Add lines 1a-1f .				1,339,322			
					Business Code				
4)	2a	SUMMER CAMP			624410	188,445	188,445		
Program Service Revenue	b	LEARNING HUB			624410	291,789	291,789		
Ser	С	PROGRAM FEES			624410	179,961	179,961		
am eve	d								
S &	е								
Ę	f	All other program service re	evenue						
	g	Total. Add lines 2a-2f				660,195			
	3	Investment income (includin	ng dividends, inte	rest, a	and				
		other similar amounts)			-	29,975			29,975
	4	Income from investment of t							
	5	Royalties							
			(i) Real		(ii) Personal				
		F	_	584					
		· · ·	6b						
		Rental income or (loss)	6c 59,	584					
	d	Net rental income or (loss)				59,584	59,584		
	7a	(i) Securities		(ii) Other					
		sales of assets	_						
	١.	other than inventory	7a						
	b	Less: cost or other basis							
en ne		' +	7b		-				
	1	Gain or (loss)	7c						
Ϋ́		Net gain or (loss)							
Other Re	ва	Gross income from fundrais	•						
0		events (not including \$							
		of contributions reported on			150 160				
	h	1c). See Part IV, line 18 . Less: direct expenses		8a 8b					
		Net income or (loss) from fu			,	114 220			114 220
		Gross income from gaming		" 广		114,330			114,330
	Ja	activities, See Part IV, line 1		9a					
	h	Less: direct expenses		9b					
		Net income or (loss) from g							
		, , ,	•						
	10a	Gross sales of inventory, le returns and allowances		10a					
	h	Less: cost of goods sold .		10b					
		Net income or (loss) from sa							
		THE INCOME OF (1000) HOLLING	a.oo or inventory	• •	Business Code				
"	11a				Duoinoso Oode				
ou. Je	b								
llar Ænt	C	-							
Miscellanous Revenue		All other revenue							
Ξ		<b>Total.</b> Add lines 11a-11d							
		Total revenue See instruc				2 203 406	719 779	0	144 305

Part IX

### Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising (A) Total expenses (B) Do not include amounts reported on lines 6b. 7b. Program service Management and 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 2 individuals. See Part IV. line 22 . . . . 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .... Compensation of current officers, directors, 111,567 33,470 44,627 33,470 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) ..... 7 Other salaries and wages . . . . . . . . . . . . . . 987,147 405,456 91,492 1,484,095 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 67,680 43,315 18,950 5,415 10 136,721 87,501 38,282 10,938 11 Fees for services (nonemployees): b Legal..... d Professional fundraising services. See Part IV, line 17 . f Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 12 1,735 1,735 13 15,757 7,067 6,902 1,788 14 15 16 137,415 104,435 16,490 16,490 17 44,918 44,918 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 13,729 1,373 12,356 20 8,757 4,379 4,378 21 22 Depreciation, depletion, and amortization . . . . . . 94,616 80,424 14,192 23 Insurance ........ 66,079 52,863 9,912 3,304 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) PROFESSIONAL FEES 60,474 44,751 15,723 b SUPPLIES 163,839 163,839 c MISCELLANEOUS 2,533 16,885 14,352 d BAD DEBT 97,918 97,918 e All other expenses 71,335 64,548 6,456 331 Total functional expenses. Add lines 1 through 24e. . 25 2,593,520 1,798,532 614,302 180,686 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 (2022)

Part X **Balance Sheet** 

		Check if Schedule O contains a response or note to any line in this Part 2	X		
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	. 445,281	1	235,021
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	472,747	3	203,146
	4	Accounts receivable, net	. 26,390	4	38,037
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ass	9	Prepaid expenses and deferred charges	. 15,988	9	13,158
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 3,213,4	12		
	b	Less: accumulated depreciation 10b 1,912,9	25 1,381,993	10c	1,300,487
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11	. 292,431	12	310,573
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	. 39,943	15	72,055
	16	Total assets. Add lines 1 through 15 (must equal line 33)	. 2,674,773	16	2,172,477
	17	Accounts payable and accrued expenses	. 202,348	17	61,192
	18	Grants payable		18	
	19	Deferred revenue	. 20,757	19	33,334
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	•	21	
Ś	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
iabi		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties	. 140,084	23	128,155
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	•	25	9,823
	26	Total liabilities. Add lines 17 through 25	. 363,189	26	232,504
		Organizations that follow FASB ASC 958, check here			
Ś		and complete lines 27, 28, 32, and 33.			
nce	27	Net assets without donor restrictions	. 2,261,584	27	1,889,973
ala	28	Net assets with donor restrictions	. 50,000	28	50,000
B		Organizations that do not follow FASB ASC 958, check here			
Ξ		and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds		31	
ĘĘ,	32	Total net assets or fund balances	, , , , , , , , , , , , , , , , , , , ,	32	1,939,973
	33	Total liabilities and net assets/fund balances	. 2,674,773	33	2,172,477

Form **990** (2022) EEA

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>		<u> </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	,203,	406
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	,593,	520
3	Revenue less expenses. Subtract line 2 from line 1	3		(390,	114)
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2	,311,	584
5	Net unrealized gains (losses) on investments	5		18,	503
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	1	,939,	973
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>		<u> </u>	$\Box$
				Yes	No
1	Accounting method used to prepare the Form 990:  Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	, ,		. 2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	▼ Separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		. 2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		. 3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>			
EEA			For	n <b>990</b> (	(2022)

#### **SCHEDULE A** (Form 990)

## **Public Charity Status and Public Support**

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

OMB No. 1545-0047

Attach to Form 990 or Form 990-EZ.

**Open to Public** 

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection Employer identification number

_	-	GIRLS CLUBS OF GREATER					06-064693						
Par	t l	Reason for Public Char	rity Status. (Al	l organizations mus	st comple	ete this p	oart.) See instruction	ons.					
The c	rgar	ization is not a private foundation be	ecause it is: (For lin	ies 1 through 12, check o	only one bo	x.)							
1	Ц	A church, convention of churches,	or association of cl	hurches described in <b>se</b>	ction 170(	(b)(1)(A)(i)							
2	Ш	A school described in <b>section 170</b>	( <b>b)(1)(A)(ii).</b> (Attac	h Schedule E (Form 990	0).)								
3		A hospital or a cooperative hospita	l service organizati	ion described in <b>section</b>	170(b)(1)	(A)(iii).							
4		A medical research organization or	perated in conjunct	ion with a hospital desci	ribed in <b>se</b>	ction 170	(b)(1)(A)(iii). Enter the						
		hospital's name, city, and state:											
5		An organization operated for the be	nefit of a college o	r university owned or ope	erated by a	a governm	ental unit described in						
		section 170(b)(1)(A)(iv). (Complet	e Part II.)										
6		A federal, state, or local government	nt or governmental	unit described in section	on 170(b)(	1)(A)(v).							
7													
	described in section 170(b)(1)(A)(vi). (Complete Part II.)												
8													
9	An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college												
	or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or												
		university:											
10	An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross												
	receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See <b>section 509(a)(2).</b> (Complete Part III.)												
11	П	An organization organized and ope					1).						
12	=	An organization organized and oper						es of					
		•	-	•					ck				
	one or more publicly supported organizations described in <b>section 509(a)(1)</b> or <b>section 509(a)(2)</b> . See <b>section 509(a)(3)</b> . Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g												
а	the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. <b>Type I.</b> A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving												
-	the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the												
		supporting organization. You n											
b		Type II. A supporting organization	-			pported or	ganization(s), by havin	a					
		control or management of the s	•					-					
		organization(s). You must con		·				-					
С		Type III functionally integrate	•		connection	with, and	functionally integrated	with.					
•		its supported organization(s) (s		•				,					
d		Type III non-functionally inte	•	•				ion(s)					
		that is not functionally integrate	•				0	` '					
		requirement (see instructions).	•	• •		•							
е		Check this box if the organization	•	•	•		I. Type II. Type III						
•		functionally integrated, or Type				• • •	., .,po, .,po						
f	F	nter the number of supported organi	•										
g	_	rovide the following information about		ganization(s).									
		ame of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Amount of monetary	(vi	) Amount of				
		•	,,	(described on lines 1-10 above (see instructions))	listed in you docum	ir governing ent?	support (see instructions)		r support (see nstructions)				
					Yes	No							
					1.50								
(A)													
(B)													
(C)													
(C)													
(D)													
(E)													
(E)													
Total							I						

Part II

06-0646935 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.)

Secti	on A. Public Support				_	_	
Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	615,398	665,817	1,302,111	1,560,321	1,339,322	5,482,969
2	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	<b>Total.</b> Add lines 1 through 3	615,398	665,817	1,302,111	1,560,321	1,339,322	5,482,969
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						5,482,969
	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	615,398	665,817	1,302,111	1,560,321	1,339,322	5,482,969
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from						
	similar sources			16,200	26,335	29,975	72,510
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)				8,339		8,339
11	Total support. Add lines 7 through 10						5,563,818
12	Gross receipts from related activities, etc.	(see instructio	ns)			12	
13	First 5 years. If the Form 990 is for the or	ganization's fir	st, second, thi	ird, fourth, or fi	fth tax year as	a section 501(d	c)(3)
	organization, check this box and stop her						<u> </u>
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2022 (line 6					14	98.55 %
15	Public support percentage from 2021 Sch					15	98.99 %
16a	33 1/3% support test - 2022. If the organ						
	box and <b>stop here.</b> The organization qual						
b	33 1/3% support test - 2021. If the organ						
	this box and <b>stop here.</b> The organization			•			_
17a	10%-facts-and-circumstances test - 202						
	10% or more, and if the organization mee						
	Part VI how the organization meets the fa-			-	-		
	organization						
b	10%-facts-and-circumstances test - 202	-					
	15 is 10% or more, and if the organization					-	•
	in Part VI how the organization meets the	facts-and-circu	umstances tes	t. The organiza	ation qualifies a	as a publicly su	pported
	organization						
18	Private foundation. If the organization di	d not check a b	oox on line 13,	, 16a, 16b, 17a	a, or 17b, check	this box and s	see
	instructions						

Schedule A (Form 990) 2022 EEA

### 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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities fumished 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	<b>Total.</b> Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, .						
	payments received on securities loans, rents,						
	royalties, and income from similar sources .						_
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on 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.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the or	ganization's fi	rst. second. thi	rd. fourth. or fi	fth tax vear as	a section 501(	2)(3)
	organization, check this box and stop her	•				,	· · · ·
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2022 (line 8			3, column (f))		15	%
16	Public support percentage from 2021 Scho		•			16	%
	on D. Computation of Investment Inc					1	
17	Investment income percentage for 2022 (I			v line 13. colu	mn (f))	17	%
18	Investment income percentage from 2021			-		18	
19a	33 1/3% support tests - 2022. If the orga						
	17 is not more than 33 1/3%, check this be						
b	33 1/3% support tests - 2021. If the organizati	<del>-</del>	-	=	-		
~	line 18 is not more than 33 1/3%, check this bo						
20	<b>Private foundation.</b> If the organization did	-	_			-	
	are realisation in the organization an	o. 100k a	~ CA CH IIIO 17,	. 54, 51 100, 6	JOK WIND DOX C	555 11151146	

#### Part IV **Supporting Organizations**

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

Section A. All Supporting Organizations	Section	A. All	Supporting	<b>Organizations</b>
---	---------	--------	------------	----------------------

ecti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	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			
	lines 3b and 3c 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 <b>Part VI</b> when and how the			
	organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с		
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 lines 4b and 4c below.	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 <b>Part VI</b> how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
Ů	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> 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 lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , 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	- Ou		
~	designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
•	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in <b>Part VI.</b></i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
•	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity			
	with regard to a substantial contributor? <i>If</i> "Yes," <i>complete Part I of Schedule L (Form 990)</i> .	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line			
•	7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
Ju	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 <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which	Ja		
b	the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
^	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit	an		
С	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	00		
۱۸۰		9с		
I0a	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	100		
h	supporting organizations)? If "Yes," answer 10b below.  Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to	10a		
	DIG THE VIGEOUS BUILDINGS BUY EAGES DUSINESS HORONGS IN THE LAX YEAR CHOSE SCHEIDIE G. FORM 477H TO			

determine whether the organization had excess business holdings.)

Supporting Organizations (continued)

Part IV

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in <b>Part VI.</b>	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> 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 officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
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?	1		
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).	2		
3	By reason of the relationship described in line 2, above, 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.	3		
Secti	on 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	inst	ructio	ons).
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instruc	ctions)		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
_	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, 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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would	61		
_	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in <b>Part VI</b> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	01		
	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

(see instructions).

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.    Section A - Adjusted Net Income	Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gan	izations					
Section A - Adjusted Net Income  1 Net short-term capital gain 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 Other gross income (see instructions) 4 Add lines 1 through 3. 5 Depreciation and depletion 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 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) 7 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)  Section 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): a Average monthly value of securities b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by 0.035. 7 Recoveries of prior-year distributions	1	☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in <b>Part VI</b> ). <b>See</b>							
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  Section 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): a Average monthly value of securities 1a b Average monthly value of securities 1b C Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 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 0.015 of line 3 (for greater amount, see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 Multiply line 5 by 0.035. 6 7 Recoveries of prior-year distributions 7		instructions. All other Type III non-functionally integrated supporting organi	izati	ons must complete Secti	ions A through E.				
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c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI):  2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 4 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Net value of prior-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by 0.035. 7 Recoveries of prior-year distributions		· · · · · · · · · · · · · · · · · · ·	-						
d Total (add lines 1a, 1b, and 1c)  e Discount claimed for blockage or other factors (explain in detail in Part VI):  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 0.015 of line 3 (for greater amount, see instructions). 4 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by 0.035. 6 Multiply line 5 by 0.035. 7 Recoveries of prior-year distributions			_						
e Discount claimed for blockage or other factors (explain in detail in Part VI):  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 0.015 of line 3 (for greater amount, see instructions). 4 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by 0.035. 6 Multiply line 5 by 0.035. 7 Recoveries of prior-year distributions									
(explain in detail in Part VI):  2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 4 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by 0.035. 7 Recoveries of prior-year distributions 7									
2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 4 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by 0.035. 6 Recoveries of prior-year distributions 7	·	<del>-</del>							
3 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 4 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by 0.035. 6 Recoveries of prior-year distributions 7	2		2						
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).  5 Net value of non-exempt-use assets (subtract line 4 from line 3)  6 Multiply line 5 by 0.035.  7 Recoveries of prior-year distributions  7		·							
see instructions). 4  5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5  6 Multiply line 5 by 0.035. 6  7 Recoveries of prior-year distributions 7									
5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 Multiply line 5 by 0.035. 6 7 Recoveries of prior-year distributions 7	-	· · · · · · · · · · · · · · · · · · ·	1						
6 Multiply line 5 by 0.035. 6 Recoveries of prior-year distributions 7	- 5	,							
7 Recoveries of prior-year distributions 7		·	_						
		· · · · · · · · · · · · · · · · · · ·							
6 William Asset Amount (add line 1 to line 0)			+						
		Millimum Asset Amount (add line 7 to line 0)	0						
Section C - Distributable Amount Current Year	Secti	on C - Distributable Amount			Current Year				
1 Adjusted net income for prior year (from Section A, line 8, column A) 1	1	Adjusted net income for prior year (from Section A. line 8. column A)	1						
2 Enter 0.85 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.			+						
5 Income tax imposed in prior year 5			+ -						
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			Ť						
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	7			ntegrated Type III suppor	rting organization				

EEA Schedule A (Form 990) 2022

Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (contin	ued)	
Sect	Current Year		
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported		
	organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required) - provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.	6	
7	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive		
	(provide details in Part VI). See instructions.	8	
9	Distributable amount for 2022 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

10	Line 8 amount divided by line 9 amount		10	
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2022			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2022			
а	From 2017			
b	From 2018			
С	From 2019			
d	From 2020			
е	From 2021			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2022 distributable amount			
i	Carryover from 2017 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2022 from			
	Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2022 distributable amount			
С	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2022, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2022. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2023. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2018			
b	Excess from 2019			
С	Excess from 2020			
d	Excess from 2021			
ее	Excess from 2022			

Schedule A (Form 990) 2022 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

# Schedule B (Form 990)

#### **Schedule of Contributors**

OMB No. 1545-0047

**Employer identification number** 

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990 or Form 990-PF.

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

2022

BOYS & GIRLS CLUBS OF GREATER NEW HAVEN, INC 06-0646935 Organization type (check one): Filers of: Section: Form 990 or 990-EZ X 501(c)(3 ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** x For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization
BOYS & GIRLS CLUBS OF GREATER NEW HAVEN, INC

Employer identification number

06-0646935

Part I	<b>Contributors</b> (see instructions). Use duplicate copie	es of Part I if additional space is n	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1_	CITY OF NEW HAVEN  165 CHURCH STREET  NEW HAVEN CT 06510	\$\$	Person X Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	NEW HAVEN BOARD OF EDUCATION  54 MEADOW ST  NEW HAVEN CT 06519	\$	Person X Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 3_	BOYS & GIRLS CLUB OF AMERICA  1275 PEACHTREE ST NE  ATLANTA GA 30309	\$100,000	Person X Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	US DEPT OF TREASURY  1500 PENNSYLVANIA AVE NW  WASHINGTON DC 20220	\$187,494 	Person X Payroll Oncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	CT DEPT OF EDUCATION  450 COLUMBUS BLVD  HARTFORD CT 06103	\$185,918	Person X Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person

#### **SCHEDULE D** (Form 990)

## **Supplemental Financial Statements**

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

**Open to Public** 

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection

OMB No. 1545-0047

BOYS	& GIRLS CLUBS OF GREATER NEW HAVEN, INC	06-0646935
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Acce	ounts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in 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?	
Par		
	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).	-
-		istorically important land area
		ertified historic structure
	Preservation of open space	oranica motorio cu actaro
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 Year
а	Total number of conservation easements	
b	Total acreage restricted by conservation easements	
C	Number of conservation easements on a certified historic structure included in (a)	
d	Number of conservation easements included in (c) acquired after July 25, 2006, and not on a	. 20
u	historic structure listed in the National Register	. 2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization of the conservation easements modified, transferred, released, extinguished, or terminated by the organization of the conservation easements modified, transferred, released, extinguished, or terminated by the organization of the conservation easements modified, transferred, released, extinguished, or terminated by the organization of the conservation easements modified, transferred, released, extinguished, or terminated by the organization of the conservation easements modified, transferred, released, extinguished, or terminated by the organization of the conservation easements modified, transferred, released, extinguished, or terminated by the organization of the conservation easements modified, transferred, released, extinguished, or terminated by the organization of the conservation easements and the conservation of the conservation easements and the conservation easements are conservation of the conservation of the conservation easements are conservation of the conservation of the conservation easements are conservation easements.	
3		garlization during the
4	tax year  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	
J	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conserva	
U	Starr and volunteer flours devoted to morntoning, inspecting, francing of violations, and enforcing conserva	dion easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation	easements during the year
'	Amount of expenses incurred in monitoring, inspecting, handling of violations, and emotoring conservation	easements during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(	(4)(B)(i)
o	and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense sta	
J	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements t	
	organization's accounting for conservation easements.	trial describes the
Par		ther Similar Assets
· u.	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and	halance sheet works
·u	of art, historical treasures, or other similar assets held for public exhibition, education, or research in further	
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	station of public
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and bala	ance sheet works of
D	art, historical treasures, or other similar assets held for public exhibition, education, or research in furthera	
	provide the following amounts relating to these items:	nico di public scritico,
	(i) Revenue included on Form 990, Part VIII, line 1	¢
	(ii) Assets included in Form 990, Part X	· · · · · · · · · · · · · · · · · · ·
2	If the organization received or held works of art, historical treasures, or other similar assets for financial ga	
4	following amounts required to be reported under FASB ASC 958 relating to these items:	ani, provide tile
•	Revenue included on Form 990, Part VIII, line 1	\$
a b	Assets included in Form 990, Part X	· ———
	Additional to the control of the con	Ψ

Par	t III Organizations Maintaining C	ollections of A	Art, Historical 7	reasures	, or Otl	ner Similar As	sets (co	ontinued
3	Using the organization's acquisition, accession	, and other records	, check any of the fo	ollowing that r	nake sig	nificant use of its		
	collection items (check all that apply):							
а	☐ Public exhibition		d 🗌 Loan o	r exchange p	rogram			
b	Scholarly research		e Other					
С	Preservation for future generations			-				<del></del>
4	Provide a description of the organization's colle	ections and explain	how they further the	e organizatio	n's exem	pt purpose in Part		
	XIII.	·	•	Ü	,			
5	During the year, did the organization solicit or r	eceive donations o	f art. historical treas	ures. or other	r similar			
	assets to be sold to raise funds rather than to		•	-			Yes	. □ No
Par	Part IV Escrow and Custodial Arrangements.							
	Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form							
	990, Part X, line 21.							
1a	Is the organization an agent, trustee, custodian	or other intermedia	ary for contributions	or other asse	ets not			
··u	included on Form 990, Part X?		-				☐ Yes	. □ No
b	If "Yes," explain the arrangement in Part XIII a							
D	ii res, explain the arrangement ii r art Ain a	na complete the foil	lowing table.			Amo	unt	
	Poginning holonoo				10		unt	
C	Beginning balance				-			
d	Additions during the year							
e	Distributions during the year							
t	Ending balance							
2a	Did the organization include an amount on Form							_
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has been	provided on I	Part XIII			
Par			F 000 B	( IV / - P	40			
	Complete if the organization ar		on Form 990, P					
		(a) Current year	(b) Prior year	(c) Two years	s back	(d) Three years back	(e) Four	years back
1a	Beginning of year balance	50,000						
b	Contributions		50,000				-	
С	Net investment earnings, gains, and							
	losses	(554)						
d	Grants or scholarships							
е	Other expenditures for facilities and							
	programs							
f	Administrative expenses							
g	End of year balance	49,446	50,000					
2	Provide the estimated percentage of the currer	nt year end balance	(line 1g, column (a)	) held as:				
а	Board designated or quasi-endowment	%						
b	Permanent endowment 100.00 %							
С	Term endowment %							
	The percentages on lines 2a, 2b, and 2c should	d equal 100%.						
3a	Are there endowment funds not in the possess	sion of the organiza	ation that are held ar	nd administere	ed for the			
	organization by:	· ·						Yes No
	(i) Unrelated organizations						3a(i)	х
	(ii) Related organizations						3a(ii)	х
b	If "Yes" on line 3a(ii), are the related organizat						3b	
4	Describe in Part XIII the intended uses of the o	•						
Par								
	Complete if the organization ar		on Form 990. P	art IV. line	11a. S	See Form 990. F	Part X. I	ine 10.
	Description of property	(a) Cost or other		r other basis		Accumulated	(d) Book	
	υσσοπριίοπ οι ριομστιγ	(investmen	' '	other)		preciation	(u) D001	. vaiu <del>0</del>
1a	Land	,		253,983				52 002
_						1 705 504		53,983
b	· ·		2,	775,884	•	1,795,504		80,380
C C	Leasehold improvements			170 000		117 070		<u> </u>
d	Equipment			179,298		117,072		62,226

1,300,487

Part VII	Investments - Other Securities.			-		-
	Complete if the organization answered "Y	es" on For	m 990, Part I	V, line 1	1b. See Forn	n 990, Part X, line 12.
	(a) Description of security or category (including name of security)		(b) Book valu	e	` ,	lethod of valuation: nd-of-year market value
(1) Financial	derivatives					
	eld equity interests					
(3) Other						
- ' '	MENTS WITHOUT DONOR RESTRICTI		260,			
	CTED INVESTMENTS		50,	000		
(C)						
(D) (E)						
(F)						
(G)						
(H)						
	nn (b) must equal Form 990, Part X, col. (B) line 12.)		310,	573		
Part VIII	Investments - Program Related.					
	Complete if the organization answered "Y	es" on For	m 990, Part l	V, line 1	1c. See Forn	n 990, Part X, line 13.
	(a) Description of investment		(b) Book valu	e	(c) M	ethod of valuation:
					Cost or er	nd-of-year market value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7) (8)						
(9)						
	nn (b) must equal Form 990, Part X, col. (B) line 13.).					
Part IX	Other Assets.					
	Complete if the organization answered "Y	es" on For	m 990, Part l	V, line 1	1d. See Forn	n 990, Part X, line 15.
	(a) Descrip	otion				(b) Book value
(1)DPERAT	ING LEASES - ROU ASSET					9,47
(2)CIP						62,58
(3)						
(4)						
(5)						
(6)						
(7)						
(8) (9)						
	nn (b) must equal Form 990, Part X, col. (B) line 15.)					72,05
Part X	Other Liabilities.		<u> </u>			72,03
1 411 71	Complete if the organization answered "Y line 25.	es" on For	m 990, Part l	V, line 1	1e or 11f. Se	e Form 990, Part X,
1.	(a) Description of liability	(b) Book v	alue			
	income taxes	(., ====				
	ABILITIES		9,823			
(3)						
(4)						
(5)						

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)ROU LIABILITIES	9,823
(3)	
(4)	
_(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B)	9,823

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII. . . . . .

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 2,286,402 Amounts included on line 1 but not on Form 990. Part VIII. line 12: 2 2a 18,503 2b b 2c 2d 64,832 2e 83,335 3 2,203,067 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 339 4b 4c 339 5 2,203,406 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 2,658,013 Amounts included on line 1 but not on Form 990, Part IX, line 25: 2 2b 2c 2d 64,832 64,832 е 2e 2,593,181 Amounts included on Form 990. Part IX. line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b . . . . . . . 4b 4c 339 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)...... 2,593,520 Supplemental Information. Part XIII 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. 01. Other revenues not included on Form 990 (Part XI, line 2d) FUNDRAISING EXPENSES ARE NETTED TO REVENUE ON PAGE 9 IN THE AMOUNT OF \$64,832.

Schedule D (Form 990) 2022

#### **SCHEDULE G** (Form 990)

#### Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Name of the organization

Department of the Treasury

Open to Public

Internal Revenue Service Inspection Employer identification number BOYS & GIRLS CLUBS OF GREATER NEW HAVEN, INC 06-0646935 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. 1 Mail solicitations Solicitation of non-government grants а Internet and email solicitations Solicitation of government grants b Phone solicitations Special fundraising events С d In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, 2a Yes No or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be b compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (iv) Gross receipts (i) Name and address of individual (or retained by) custody or control of (or retained by) (ii) Activity from activity or entity (fundraiser) fundraiser listed in contributions? organization col. (i) Yes No 1 2 3 4 5 6 7 8 9 10 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Schedule G (Form 990) 2022 BOYS & GIRLS CLUBS OF GREATER NEW HAVEN, INC 06-0646935 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. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events (add col. (a) through GOLF TOUR BIRDIES FOR 2 col. (c)) (total number) (event type) (event type) Revenue Gross receipts . . . . . . . 1 55,329 86,250 37,583 179,162 Less: Contributions . . . . . 2 3 Gross income (line 1 minus 86,250 55,329 37,583 179,162 4 Cash prizes 5 Noncash prizes 6 Rent/facility costs . . . . . . Direct Expenses Food and beverages . . . . . 8 Entertainment 9 Other direct expenses 26,632 38,200 64,832 10 Direct expense summary. Add lines 4 through 9 in column (d) 64,832 11 Net income summary. Subtract line 10 from line 3, column (d) 114,330 Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) 1 Gross revenue . . . . . 2 Cash prizes Direct Expenses Moneach prizes

٥١	3	Noncasti prizes					
Direct Exp	4	Rent/facility costs					
	5	Other direct expenses					
	6	Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No		
	7	Direct expense summary. Add line	es 2 through 5 in column (c	d)			
	8	Net gaming income summary. Sul	otract line 7 from line 1, col	lumn (d)			
9	Er	nter the state(s) in which the organiza	ation conducts gaming act	ivities:			
а		the organization licensed to conduct				Yes .	No
b	) If	"No," explain:					
	_						
10a		ere any of the organization's gaming	licenses revoked, suspen	ded, or terminated during t	the tax year?	Yes .	No

EEA Schedule G (Form 990) 2022

## SCHEDULE O (Form 990)

#### 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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

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

Name of the organization **Employer identification number** BOYS & GIRLS CLUBS OF GREATER NEW HAVEN, INC 06-0646935 01. Form 990 governing body review (Part VI, line 11) THE 990 IS REVIEWED BY THE CHIEF EXECUTIVE OFFICER, FINANCE COMMITTEE OF THE BOARD OF MANAGERS AND PROVIDED TO THE EXECUTIVE COMMITTEE FOR REVIEW. A PERIOD IS PROVIDED FOR QUESTIONS OR COMMENTS PRIOR TO FINALIZATION AND CONFIRMATION TO THE ACCOUNTANT. 02. Conflict of interest policy compliance (Part VI, line 12c) THE BOARD OF MANAGERS REVIEW AND SIGN A CONFLICT OF INTEREST POLICY ANNUALLY. NEW BOARD MEMBERS ARE ASKED TO REVIEW AND SIGN PRIOR TO BEING VOTED IN AS MEMBERS. THIS PROCESS IS GOVERNED BY THE GOVERNANCE COMMITTEE. 03. CEO, executive director, top management comp (Part VI, line 15a) COMPENSATION IS DETERMINED WITH REFERENCE TO THE BOYS AND GIRLS CLUB OF AMERICA'S COMPENSATION GUIDE. 04. Other officer or key employee compensation (Part VI, line 15b THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, POLICIES, AND STATEMENTS AVAILABLE UPON REQUEST. 05. Governing documents, etc, available to public (Part VI, line 19) PER THE BYLAWS, THE BOARD OF MANAGERS REVIEW AND SIGN A CONFLICT OF INTEREST POLICY ANNUALLY. NEW BOARD MEMBERS ARE ASKED TO REVIEW AND SIGN PRIOR TO BEING VOTED IN AS MEMBERS. THIS PROCESS IS GOVERNED BY THE GOVERNANCE COMMITTEE. 06. General explanation attachment

FORM 990, PART XII, LINE 2C:

Schedule O (Form 990) 2022 Page 2

Name of the organization **Employer identification number** BOYS & GIRLS CLUBS OF GREATER NEW HAVEN, INC 06-0646935 OVERSIGHT OF THE AUDIT AND SELECTION OF AUDITORS. THERE HAVE BEEN NO CHANGES IN THE PROCESS FROM THE PRIOR YEAR. DURING FISCAL 2022, THE CLUB ACQUIRED THE ENTITY FORMERLY KNOWN AS ULBRICH BOYS & GIRLS CLUB, INC. ACCORDING TO THE AGREEMENT, DATED 6/30/2022, THE PRIMARY REASONS FOR THE TRANSACTION WERE TO ACHIEVE CERTAIN OPERATIONAL AND PROGRAMMATIC EFFICIENCIES AND TO BETTER SERVE THE CONSTITUENCIES OF BOTH ORGANIZATIONS. AS PART OF THE AGREEMENT, THE CLUB MODIFIED ITS NAME IMMEDIATELY AFTERWARDS TO BETTER REFLECT THE COMBINED ORGANIZATION. THE ACTIVITY OF THE ACQUIRED ENTITY HAS BEEN INCLUDED IN THE CLUB'S FINANCIAL STATEMENTS BEGINNING ON JULY 1, 2022. GOING FORWARD, THE TAX IDENTIFICATION NUMBER REFLECTS THE NEW NAME OF THE ORGANIZATION, BOYS AND GIRLS CLUBS OF GREATER NEW HAVEN, INC.

EEA Schedule O (Form 990) 2022

## Form **4562**

## **Depreciation and Amortization**

### (Including Information on Listed Property)

OMB No. 1545-0172 **2022** 

Attach to your tax return.

Attachment Sequence No. 179

Name(s) shown on return

BOYS & GIRLS CLUBS OF GREATER NE

Part I Election To Expense Certain Property Under Section 179

Attach to your tax return.

Attach to your tax return.

Attach to your tax return.

Business or activity to which this form relates

FORM 990 - 1

06-0646935

	(S & GIRLS CLUB)				990 - 1 4 <b>7</b> 0			00 0	1646935	
Par		-	rtain Property Und							
	-		property, complete Pa	•	•			1	T	
1	Maximum amount (see instructions)									
2	Total cost of section 179 property placed in service (see instructions)									
3	Threshold cost of section 179 property before reduction in limitation (see instructions)									
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0									
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0 If married filing									
	separately, see instr	ructions						5		
_6	(a) Des	cription of property	1	(b) Cost (busine	ess use only)		(c) Elected cost		_	
									_	
									_	
7	Listed property. Enter	er the amount f	from line 29							
8			roperty. Add amounts					8		
9	Tentative deduction. Enter the <b>smaller</b> of line 5 or line 8							9		
10								10		
11	·							11		
12	Section 179 expense	e deduction. A	dd lines 9 and 10, but	don't enter m	ore than line 1	l1 .		12		
13										
Note	Note: Don't use Part II or Part III below for listed property. Instead, use Part V.									
Part	II Special Depi	reciation Alle	owance and Other	Depreciation	on (Don't inc	lude li	sted property. S	ee inst	ructions.)	
14	Special depreciation	allowance for	qualified property (oth	ner than listed	d property) plac	ced in	service			
	during the tax year.	See instruction	ns		. <b></b> .			14		
15	Property subject to s	section 168(f)(	1) election		. <b></b> .			15		
16	Other depreciation (	including ACR	S)		. <b></b> .			16	93,553	
			on't include listed pro							
			S	ection A						
47	MACRS doductions	f	and in a maine in the court		1 ( 0000			17		
17	MACKS deductions	for assets plac	ced in service in tax ye	ears beginnin	g before 2022			17		
		•	sets placed in service	-	-			17		
	If you are electing to	group any ass		during the ta	x year into one	or mo	ore general	17		
	If you are electing to asset accounts, che	group any ass ck here	sets placed in service	during the ta	x year into one	or mo	ore general		∍m	
18	If you are electing to asset accounts, che Section B	group any ass ck here - Assets Place	sets placed in service	during the ta	x year into one	or mo	ore general	n Syste	em Depreciation deduction	
18	If you are electing to asset accounts, che Section B	group any ass ck here - Assets Place (b) Month and year placed in	sets placed in serviceed in Service During (c) Basis for depreciation (business/investment use	during the tax  2022 Tax Ye  (d) Recovery	x year into one	or mo	ore general	n Syste		
(a)	If you are electing to asset accounts, che Section B  Classification of property  3-year property  5-year property	group any ass ck here - Assets Place (b) Month and year placed in	sets placed in service  ed in Service During  (c) Basis for depreciation (business/investment use only-see instructions)	during the tax  2022 Tax Ye  (d) Recovery	x year into one	or mo	ore general	n Syste		
(a) 19a b	If you are electing to asset accounts, che Section B  Classification of property  3-year property  5-year property  7-year property	group any ass ck here - Assets Place (b) Month and year placed in	sets placed in serviceed in Service During (c) Basis for depreciation (business/investment use	during the tax  2022 Tax Ye  (d) Recovery	x year into one	or mo	ore general	n Syste		
(a) 19a b c	If you are electing to asset accounts, che Section B Classification of property 3-year property 5-year property 7-year property 10-year property	group any ass ck here - Assets Place (b) Month and year placed in	sets placed in service  ed in Service During  (c) Basis for depreciation (business/investment use only-see instructions)	during the ta	x year into one car Using the (e) Convention	or mo	ore general ral Depreciation (f) Method	n Syste	Depreciation deduction	
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(a) 19a b c d e f	If you are electing to asset accounts, che Section B  Classification of property  3-year property  5-year property  7-year property  10-year property  15-year property  20-year property  25-year property  Residential rental property	group any ass ck here - Assets Place (b) Month and year placed in	sets placed in service  ed in Service During  (c) Basis for depreciation (business/investment use only-see instructions)	during the tal.  2022 Tax Ye  (d) Recovery period  7  25 yrs.  27.5 yrs.  27.5 yrs.	x year into one car Using the (e) Convention  MQ  MM  MM	or mo	ore general ral Depreciation (f) Method  SL  S/L S/L S/L	n Syste	Depreciation deduction	
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