

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.

A For the 2019 calendar year, or tax year beginning , and ending

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
Boys & Girls Club of Gloucester Co
 Doing business as
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
123 High Street, E
 City or town, state or province, country, and ZIP or foreign postal code
Glassboro NJ 08028

D Employer identification number
54-2075655

E Telephone number
856-881-6084

F Name and address of principal officer:
Theresa Root

G Gross receipts \$ **1,112,509**

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () ◀(insert no.) 4947(a)(1) or 527

J Website: ▶ **gcbgc.org**

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: **2005** **M** State of legal domicile:

H(c) Group exemption number ▶

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
TO INSPIRE AND ENABLE ALL YOUNG PEOPLE, ESPECIALLY THOSE FROM DISADVANTAGED CIRCUMSTANCES, TO REALIZE THEIR FULL POTENTIAL AS PRODUCTIVE, RESPONSIBLE AND CARING CITIZENS.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a) **3 22**

4 Number of independent voting members of the governing body (Part VI, line 1b) **4 22**

5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) **5 58**

6 Total number of volunteers (estimate if necessary) **6 210**

7a Total unrelated business revenue from Part VIII, column (C), line 12 **7a 0**

b Net unrelated business taxable income from Form 990-T, line 39 **7b 0**

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	294,628	388,701
9 Program service revenue (Part VIII, line 2g)	423,953	437,963
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	462	2,764
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	239,356	225,039
12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	958,399	1,054,467
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	607,017	649,226
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 54,494		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	346,420	348,946
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	953,437	998,172
19 Revenue less expenses. Subtract line 18 from line 12	4,962	56,295
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	1,415,763	1,487,908
21 Total liabilities (Part X, line 26)	36,437	52,287
22 Net assets or fund balances. Subtract line 21 from line 20	1,379,326	1,435,621

Part II Signature Block

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

Sign Here
 Signature of officer: **Theresa Root** Date: _____
 Type or print name and title: **Finance Director**

Paid Preparer Use Only
 Print/Type preparer's name: **Nick L. Petroni, CPA** Preparer's signature: **Nick L. Petroni, CPA** Date: **05/11/20** Check if self-employed PTIN: **P00123220**
 Firm's name ▶ **PETRONI & ASSOCIATES LLC** Firm's EIN ▶ **27-1222410**
 Firm's address ▶ **102 HIGH ST. W., STE 100, P.O. BOX 279 GLASSBORO, NJ 08028** Phone no. **856-881-1600**

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

TO INSPIRE AND ENABLE ALL YOUNG PEOPLE, ESPECIALLY THOSE FROM DISADVANTAGED CIRCUMSTANCES, TO REALIZE THEIR FULL POTENTIAL AS PRODUCTIVE, RESPONSIBLE AND CARING CITIZENS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **825,363** including grants of \$) (Revenue \$ **437,963**)

TO INSPIRE AND ENABLE ALL YOUNG PEOPLE ESPECIALLY THOSE FROM DISADVANTAGED CIRCUMSTANCES, TO REALIZE THEIR FULL POTENTIAL AS PRODUCTIVE, RESPONSIBLE AND CARING CITIZENS.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

N/A

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

N/A

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **825,363**

Part IV 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)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
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? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to 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? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key 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? <i>If "Yes," complete Schedule L, Part III</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.		X

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	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		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X

Part 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 58		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>		
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)?		X
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?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
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?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	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? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X

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

Section 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.		
1b	Enter the number of voting members included on 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?		X
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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
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?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
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 O		X

Section 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?		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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	X	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed NJ
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. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> 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

**BOY & GIRLS CLUB
GLASSBORO**

123 HIGH STREET E

NJ 08028

856-881-6084

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Timothy Anderson	0.00									
Director	0.00	X					0	0	0	
(2) Jay Cipriani	0.00									
Director	0.00	X					0	0	0	
(3) James Daloisio	0.00									
Past Board President	0.00	X					0	0	0	
(4) Dan Dalton	0.00									
Past Board President	0.00	X					0	0	0	
(5) Gary Davis	0.00									
Past President	0.00	X					0	0	0	
(6) David Gottlieb	0.00									
Board Treasurer	0.00	X		X			0	0	0	
(7) Karen Hill	0.00									
Director	0.00	X					0	0	0	
(8) John Wallace III	0.00									
Director	0.00	X					0	0	0	
(9) David Marshall	0.00									
Director	0.00	X					0	0	0	
(10) Katie McGee	0.00									
Board Chair	0.00	X		X			0	0	0	
(11) John Milne	0.00									
Director	0.00	X					0	0	0	

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) Nicholas Mitcho	0.00									
Past President	0.00	X					0	0	0	
(13) Jeff Morris	0.00									
Director	0.00	X					0	0	0	
(14) Pattie Owens	0.00									
Board Secretary	0.00	X		X			0	0	0	
(15) Elizabeth Paglione	0.00									
Director	0.00	X					0	0	0	
(16) John Michael Paz	0.00									
Director	0.00	X					0	0	0	
(17) Michael Penk	0.00									
Director	0.00	X					0	0	0	
(18) Jeff Raudenbush	0.00									
Director	0.00	X					0	0	0	
(19) Christopher Tully	0.00									
Past Board Chair	0.00	X		X			0	0	0	
1b Subtotal										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶ 1**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **▶ 0**

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	64,923			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	323,778			
	g Noncash contributions included in lines 1a-1f	1g \$				
	h Total. Add lines 1a-1f		388,701			
Program Service Revenue	Business Code					
	2a After School Program		282,295	282,295		
	b Camp Revenue		120,202	120,202		
	c Food Program		96,836	96,836		
	d Membership Dues		2,989	2,989		
	e Community Benefit		-64,359	-64,359		
	f All other program service revenue					
	g Total. Add lines 2a-2f		437,963			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		764		764	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross rents	(i) Real				
		(ii) Personal				
		6a				
	b Less: rental expenses	6b				
	c Rental inc. or (loss)	6c				
	d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other		2,000		
		7a				
	b Less: cost or other basis and sales exps.	7b				
	c Gain or (loss)	7c		2,000		
	d Net gain or (loss)		2,000	2,000		
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18						
	8a		274,709			
	b Less: direct expenses	8b	58,042			
c Net income or (loss) from fundraising events		216,667				
9a Gross income from gaming activities. See Part IV, line 19						
	9a					
	b Less: direct expenses	9b				
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances						
	10a					
	b Less: cost of goods sold	10b				
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue	Business Code					
	11a In-kind Contributions		5,258	5,258		
	b Miscellaneous Income		3,114	3,114		
	c					
	d All other revenue					
	e Total. Add lines 11a-11d		8,372			
12 Total revenue. See instructions		1,054,467	448,335	0	764	

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	182,138	146,111	23,641	12,386
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	382,619	306,935	49,664	26,020
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	20,458	16,420	3,172	866
9	Other employee benefits	10,049	7,374	2,067	608
10	Payroll taxes	53,962	43,245	7,305	3,412
11	Fees for services (nonemployees):				
a	Management	3,239	3,239		
b	Legal				
c	Accounting	5,819		5,819	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	2,406	2,039	252	115
12	Advertising and promotion	3,065	2,965	100	
13	Office expenses	2,241	186	1,937	118
14	Information technology	12,187	3,600	5,656	2,931
15	Royalties				
16	Occupancy	40,810	40,810		
17	Travel	31,285	31,285		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,128	1,858	220	50
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	45,616	45,616		
23	Insurance	25,971	20,134	5,837	
24	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.)				
a	Food Program	54,424	54,424		
b	Repairs & Maintenance	52,836	49,020	3,816	
c	Program Supplies	24,534	24,534		
d	Telecommunications	10,980	6,331	3,723	926
e	All other expenses	31,405	19,237	5,106	7,062
25	Total functional expenses. Add lines 1 through 24e	998,172	825,363	118,315	54,494
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	29,088	1	26,917
	2 Savings and temporary cash investments	168,963	2	258,152
	3 Pledges and grants receivable, net	24,154	3	6,608
	4 Accounts receivable, net	35,172	4	39,862
	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	156	7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	275	9	2,267
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	1,423,914		
	b Less: accumulated depreciation	269,812		
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	1,415,763	16	1,487,908	
Liabilities	17 Accounts payable and accrued expenses	5,506	17	13,249
	18 Grants payable		18	
	19 Deferred revenue		19	2,000
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to 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		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	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	30,931	25	37,038
	26 Total liabilities. Add lines 17 through 25	36,437	26	52,287
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	459,546	27	474,210
	28 Net assets with donor restrictions	919,780	28	961,411
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	1,379,326	32	1,435,621	
33 Total liabilities and net assets/fund balances	1,415,763	33	1,487,908	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,054,467
2	Total expenses (must equal Part IX, column (A), line 25)	2	998,172
3	Revenue less expenses. Subtract line 2 from line 1	3	56,295
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,379,326
5	Net unrealized gains (losses) on investments	5	
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	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	1,435,621

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	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? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	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		

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(20) Robert Zazzali	0.00									
Director	0.00	X					0	0	0	
1b Subtotal										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2019

Open to Public Inspection

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

▶ **Attach to Form 990 or Form 990-EZ.**

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

Department of the Treasury
Internal Revenue Service

Name of the organization

Boys & Girls Club of Gloucester Co

Employer identification number

54-2075655

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 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 **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations:
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
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						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
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.)						
11 Total support. Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	%

16a 33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶

b 33 1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶

17a 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶

b 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶

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

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	358,094	355,508	373,650	294,628	388,701	1,770,581
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	703,075	739,655	729,724	710,912	721,044	3,604,410
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	1,061,169	1,095,163	1,103,374	1,005,540	1,109,745	5,374,991
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						5,374,991

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6	1,061,169	1,095,163	1,103,374	1,005,540	1,109,745	5,374,991
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	121	157	213	462	764	1,717
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	121	157	213	462	764	1,717
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	1,061,290	1,095,320	1,103,587	1,006,002	1,110,509	5,376,708
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	99.97%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	99.98%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶

b 33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>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.</i>		

Section 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)? <i>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).</i>		

Section 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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>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.</i>		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		

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 cash balances	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 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

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

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

2019

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization Boys & Girls Club of Gloucester Co	Employer identification number 54-2075655
---	---

Organization type (check one):

Filers of:	Section:	
Form 990 or 990-EZ	<input checked="" type="checkbox"/> 501(c)(3) (enter number) organization	
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	<input type="checkbox"/> 527 political organization	
Form 990-PF	<input type="checkbox"/> 501(c)(3) exempt private foundation	
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation	
	<input type="checkbox"/> 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

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), 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 totaling \$5,000 or more during the year ▶ \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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, 990-EZ, or 990-PF).

Name of organization

Boys & Girls Club of Gloucester Co

Employer identification number

54-2075655

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Atlantic City Electric 5100 Harding Way Mays Landing NJ 08330	\$ 14,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	James Daloisio 705 Mantua Avenue Paulsboro NJ 08066	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	The George Family Foundation 545 Cooper Street Woodbury NJ 08096	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	Dalton Family Trust 8910 Purdue Road Suite 555 Indianapolis IN 46268	\$ 18,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	Demountable Concepts 200 Acorn Road Glassboro NJ 08028	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	Dermody Properties Foundation One Main Street Suite 202 Chatham NJ 07928	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Boys & Girls Club of Gloucester Co	Employer identification number 54-2075655
---	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Exxon Mobile Fuels & Lubricants 1001 Billingsport Road Paulsboro NJ 08066	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	John M. Paz 1680 GulfShore Blvd South Naples FL 34102	\$ 50,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	South Jersey Industires, Inc. One South Jersey Plaza Folsom NJ 08037	\$ 15,575	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	West Deptford Energy Holdings, LLC 3 Paradise Road West Deptford NJ 08066	\$ 20,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	Wheelabrator Technologies 100 Aboretum Drive Suite 310 Portsmouth NH 03801	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	Zidek Family Foundation PO Box 667 Woodbury NJ 08096	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization: Boys & Girls Club of Gloucester Co
Employer identification number: 54-2075655

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question number, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Form for Part II Conservation Easements, including questions 1-9 and a table for line 2d.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets, including questions 1a-2.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange program
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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 intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ %
 - b** Permanent endowment ▶ %
 - c** Term endowment ▶ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|---------------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
- b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?
- 3b**
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		429,000		429,000
b Buildings		897,757	220,253	677,504
c Leasehold improvements				
d Equipment		55,396	49,559	5,837
e Other		41,761		41,761
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶				1,154,102

Part VII Investments – Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments – Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) Due to State	21,023
(3) Accrued Wages & Taxes	16,015
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	37,038

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	Total revenue, gains, and other support per audited financial statements		1	1,112,509
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	58,042	
e	Add lines 2a through 2d		2e	58,042
3	Subtract line 2e from line 1		3	1,054,467
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	1,054,467

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	Total expenses and losses per audited financial statements		1	1,056,214
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	58,042	
e	Add lines 2a through 2d		2e	58,042
3	Subtract line 2e from line 1		3	998,172
4	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	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	998,172

Part XIII Supplemental Information.

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

Part XI, Line 2d - Revenue Amounts Included in Financials - Other

Golf Tournament	\$ 23,771
5k Walk/Run Event	\$ 1,001
Fall Event	\$ 26,916
YOY Event	\$ 6,354

Part XII, Line 2d - Expense Amounts Included in Financials - Other

Golf Tournament	\$ 23,771
5K Walk/Run	\$ 1,001
Fall Event	\$ 26,916
YOY Event	\$ 6,354

**SCHEDULE G
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

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

2019

Open to Public Inspection

Name of the organization

Boys & Girls Club of Gloucester Co

Employer identification number

54-2075655

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a** Mail solicitations
- b** Internet and email solicitations
- c** Phone solicitations
- d** In-person solicitations
- e** Solicitation of non-government grants
- f** Solicitation of government grants
- g** Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total					▶		

3 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.

.....

.....

.....

.....

.....

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
		<u>Fall Event</u>	<u>Golf Tournament</u>	<u>1</u>	(add col. (a) through col. (c))
		(event type)	(event type)	(total number)	(c)
Revenue	1 Gross receipts	188,414	53,915	30,100	272,429
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	188,414	53,915	30,100	272,429
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	26,916	23,771	6,354	57,041
	10 Direct expense summary. Add lines 4 through 9 in column (d)				57,041
11 Net income summary. Subtract line 10 from line 3, column (d)				215,388	

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.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities:

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain:

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2019**Open to Public
Inspection**

Name of the organization

Boys & Girls Club of Gloucester Co

Employer identification number

54-2075655**Form 990, Part VI, Line 11b - Organization's Process to Review Form 990**

Members of the governing body are given a copy of the 990 for their review and approval prior to filing.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

Conflict statements are prepared annually by Board Members. If conflicts are noted they are investigated further.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

The governing body approves the Executive Director's salary. The Executive Director approves all other salaries and will notify the governing body.

Form 990, Part VI, Line 15b - Compensation Process for Officers

The governing body approves the Executive Director's salary. The Executive Director approves all other salaries and will notify the governing body.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

No documents available to the public

Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation

Golf Tournament	\$	23,771
5k Walk/Run Event	\$	1,001
Fall Event	\$	26,916
YOY Event	\$	6,354
Golf Tournament	\$	-23,771

Name of the organization

Employer identification number

Boys & Girls Club of Gloucester Co

54-2075655

5K Walk/Run

\$ -1,001

Fall Event

\$ -26,916

YOY Event

\$ -6,354

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2019

Attachment Sequence No. **179**

Name(s) shown on return

Boys & Girls Club of Gloucester Co

Identifying number

54-2075655

Business or activity to which this form relates

Indirect Depreciation

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,020,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,550,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2018 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	45,616

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2019	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2019 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	45,616
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Federal Asset Report

FYE: 12/31/2019

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
Other Depreciation:									
23	4 Drawer Filing Cabinet	2/22/06	625			625	7 MO S/L	625	0
42	2006 Ford Econovan	2/28/07	21,173			21,173	5 MO S/L	21,173	0
	Sold/Scrapped: 11/22/19								
45	Ulrima 35 EZLoad Laminator	10/28/08	600			600	5 MO S/L	600	0
46	Paulsboro Land 916 Penn Line Road	2/01/08	41,500			41,500	0 -- Land	0	0
47	Paulsboro Building 916 Penn Line Road	2/01/08	53,000			53,000	39 MO S/L	14,835	1,359
48	Paulsboro Land - Block 54 Lot 1	7/01/08	26,200			26,200	0 -- Land	0	0
49	Paulsboro Building - Block 54 Lot 1	7/01/08	29,500			29,500	39 MO S/L	7,942	757
50	Woodwind	7/21/09	2,699			2,699	5 MO S/L	2,699	0
51	Basement Renovations	8/22/11	13,659			13,659	10 MO S/L	10,016	1,366
52	Air Conditioning Unit	8/22/11	4,852			4,852	7 MO S/L	4,852	0
53	Basement Renovations	4/17/12	46,639			46,639	10 MO S/L	31,093	4,664
54	Basement Renovations	9/21/12	6,900			6,900	10 MO S/L	4,313	690
55	Glassboro Bldg Blk 143 Lot 6	9/06/12	361,300			361,300	0 -- Land	0	0
56	Glassboro Building Blk 143 Lot 6	9/06/12	376,200			376,200	39 MO S/L	61,092	9,646
57	2 Basketball Hoops	6/02/13	2,241			2,241	7 MO S/L	1,788	320
58	HP Computer	10/09/13	453			453	5 MO S/L	453	0
59	HP Computer	10/09/13	453			453	5 MO S/L	453	0
60	HP Computer	10/09/13	453			453	5 MO S/L	453	0
61	Water Cooler	8/07/13	1,400			1,400	10 MO S/L	758	140
63	Paulsboro Basement Renovations	9/30/14	237,282			237,282	39 MO S/L	26,111	6,084
64	Fire Door	4/01/14	6,003			6,003	39 MO S/L	725	154
65	HP Printer	9/17/14	219			219	5 MO S/L	186	33
66	Computer Equipment	9/17/14	11,980			11,980	5 MO S/L	10,183	1,797
67	HP Printer	5/28/14	480			480	5 MO S/L	440	40
68	(16) Computers	6/01/15	13,248			13,248	5 MO S/L	9,494	2,650
70	Sidewalk - Paulsboro	12/15/15	4,300			4,300	10 MO S/L	1,326	430
71	Carpeting - Paulsboro	2/27/15	1,590			1,590	5 MO S/L	1,219	318
72	Pool Table	1/16/15	1,844			1,844	7 MO S/L	1,032	263
73	Foosball Table	1/16/15	850			850	7 MO S/L	476	121
74	Apple iMac Computer	5/11/15	2,981			2,981	5 MO S/L	2,186	596
75	Ping Pong Table	3/16/15	1,159			1,159	7 MO S/L	621	165
76	2008 Ford E350 Passenger Van	9/23/16	5,879			5,879	5 MO S/L	2,645	1,176
77	2007 Chrysler Town & Country Minivan	12/29/16	2,790			2,790	5 MO S/L	1,116	558
78	Windows-Glassboro Center	6/29/16	11,269			11,269	10 MO S/L	2,817	1,127
79	HVAC - Paulsboro	8/01/16	20,990			20,990	10 MO S/L	5,073	2,099
80	Water Cooler	10/03/16	1,445			1,445	10 MO S/L	325	145
81	HVAC - Glassboro Center	12/28/16	25,000			25,000	10 MO S/L	5,000	2,500
82	Paulsboro Bathroom Renovations	3/20/17	45,024			45,024	10 MO S/L	7,879	4,503
83	Paulsboro Kitchen Renovations	3/15/17	6,273			6,273	10 MO S/L	1,150	627
84	Paulsboro Roof/Siding	2/06/17	12,873			12,873	10 MO S/L	2,467	1,288
85	Paulsboro Renovations	11/12/19	41,761			41,761	10 -- Memo	0	0
	Total Other Depreciation		<u>1,445,087</u>			<u>1,445,087</u>		<u>245,616</u>	<u>45,616</u>
	Total ACRS and Other Depreciation		<u>1,445,087</u>			<u>1,445,087</u>		<u>245,616</u>	<u>45,616</u>
	Grand Totals		1,445,087			1,445,087		245,616	45,616
	Less: Dispositions and Transfers		21,173			21,173		21,173	0
	Less: Start-up/Org Expense		0			0		0	0
	Net Grand Totals		<u>1,423,914</u>			<u>1,423,914</u>		<u>224,443</u>	<u>45,616</u>

NJ Asset Report

FYE: 12/31/2019

Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	NJ Prior	NJ Current	Federal Current	Difference Fed - NJ
Other Depreciation:								
23	4 Drawer Filing Cabinet	2/22/06	625	625	625	0	0	0
42	2006 Ford Econovan	2/28/07	21,173	21,173	21,173	0	0	0
	Sold/Scrapped: 11/22/19							
45	Ulrima 35 EZLoad Laminator	10/28/08	600	600	600	0	0	0
46	Paulsboro Land 916 Penn Line Road	2/01/08	0	0	0	0	0	0
47	Paulsboro Building 916 Penn Line Road	2/01/08	0	0	0	0	1,359	1,359
48	Paulsboro Land - Block 54 Lot 1	7/01/08	26,200	26,200	0	0	0	0
49	Paulsboro Building - Block 54 Lot 1	7/01/08	29,500	29,500	7,942	757	757	0
50	Woodwind	7/21/09	2,699	2,699	2,699	0	0	0
51	Basement Renovations	8/22/11	13,659	13,659	10,016	1,366	1,366	0
52	Air Conditioning Unit	8/22/11	4,852	4,852	4,852	0	0	0
53	Basement Renovations	4/17/12	46,639	46,639	31,093	4,664	4,664	0
54	Basement Renovations	9/21/12	6,900	6,900	4,313	690	690	0
55	Glassboro Bldg Blk 143 Lot 6	9/06/12	361,300	361,300	0	0	0	0
56	Glassboro Building Blk 143 Lot 6	9/06/12	376,200	376,200	61,092	9,646	9,646	0
57	2 Basketball Hoops	6/02/13	2,241	2,241	1,788	320	320	0
58	HP Computer	10/09/13	453	453	453	0	0	0
59	HP Computer	10/09/13	453	453	453	0	0	0
60	HP Computer	10/09/13	453	453	453	0	0	0
61	Water Cooler	8/07/13	1,400	1,400	758	140	140	0
63	Paulsboro Basement Renovations	9/30/14	237,282	237,282	26,111	6,084	6,084	0
64	Fire Door	4/01/14	6,003	6,003	725	154	154	0
65	HP Printer	9/17/14	219	219	219	0	33	33
66	Computer Equipment	9/17/14	11,980	11,980	11,980	0	1,797	1,797
67	HP Printer	5/28/14	480	480	480	0	40	40
68	(16) Computers	6/01/15	13,248	13,248	9,494	2,650	2,650	0
70	Sidewalk - Paulsboro	12/15/15	4,300	4,300	1,326	430	430	0
71	Carpeting - Paulsboro	2/27/15	1,590	1,590	1,219	318	318	0
72	Pool Table	1/16/15	1,844	1,844	1,032	263	263	0
73	Foosball Table	1/16/15	850	850	476	121	121	0
74	Apple iMac Computer	5/11/15	2,981	2,981	2,186	596	596	0
75	Ping Pong Table	3/16/15	1,159	1,159	621	165	165	0
76	2008 Ford E350 Passenger Van	9/23/16	5,879	5,879	2,645	1,176	1,176	0
77	2007 Chrysler Town & Country Minivan	12/29/16	2,790	2,790	1,116	558	558	0
78	Windows-Glassboro Center	6/29/16	11,269	11,269	2,817	1,127	1,127	0
79	HVAC - Paulsboro	8/01/16	20,990	20,990	5,073	2,099	2,099	0
80	Water Cooler	10/03/16	1,445	1,445	325	145	145	0
81	HVAC - Glassboro Center	12/28/16	25,000	25,000	5,000	2,500	2,500	0
82	Paulsboro Bathroom Renovations	3/20/17	45,024	45,024	7,879	4,503	4,503	0
83	Paulsboro Kitchen Renovations	3/15/17	6,273	6,273	1,150	627	627	0
84	Paulsboro Roof/Siding	2/06/17	12,873	12,873	2,467	1,288	1,288	0
85	Paulsboro Renovations	11/12/19	0	0	0	0	0	0
	Total Other Depreciation		<u>1,308,826</u>	<u>1,308,826</u>	<u>232,651</u>	<u>42,387</u>	<u>45,616</u>	<u>3,229</u>
	Total ACRS and Other Depreciation		<u>1,308,826</u>	<u>1,308,826</u>	<u>232,651</u>	<u>42,387</u>	<u>45,616</u>	<u>3,229</u>
	Grand Totals		1,308,826	1,308,826	232,651	42,387	45,616	3,229
	Less: Dispositions		21,173	21,173	21,173	0	0	0
	Less: Start-up/Org Expense		0	0	0	0	0	0
	Net Grand Totals		<u>1,287,653</u>	<u>1,287,653</u>	<u>211,478</u>	<u>42,387</u>	<u>45,616</u>	<u>3,229</u>

AMT Asset Report

FYE: 12/31/2019

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
Prior MACRS:									
47	Paulsboro Building 916 Penn Line Road	2/01/08	53,000			53,000	39 MMS/L	14,779	1,359
			<u>53,000</u>			<u>53,000</u>		<u>14,779</u>	<u>1,359</u>
Other Depreciation:									
23	4 Drawer Filing Cabinet	2/22/06	625			625	7 MO S/L	625	0
42	2006 Ford Econovan	2/28/07	0			0	0 HY	0	0
	Sold/Scrapped: 11/22/19								
45	Ulrima 35 EZLoad Laminator	10/28/08	600			600	5 MO S/L	600	0
46	Paulsboro Land 916 Penn Line Road	2/01/08	0			0	0 HY	0	0
48	Paulsboro Land - Block 54 Lot 1	7/01/08	0			0	0 HY	0	0
49	Paulsboro Building - Block 54 Lot 1	7/01/08	29,500			29,500	39 MO S/L	7,942	757
50	Woodwind	7/21/09	0			0	0 HY	0	0
51	Basement Renovations	8/22/11	0			0	0 HY	0	0
52	Air Conditioning Unit	8/22/11	0			0	0 HY	0	0
53	Basement Renovations	4/17/12	0			0	0 HY	0	0
54	Basement Renovations	9/21/12	0			0	0 HY	0	0
55	Glassboro Bldg Blk 143 Lot 6	9/06/12	0			0	0 HY	0	0
56	Glassboro Building Blk 143 Lot 6	9/06/12	0			0	0 HY	0	0
57	2 Basketball Hoops	6/02/13	0			0	0 HY	0	0
58	HP Computer	10/09/13	0			0	0 HY	0	0
59	HP Computer	10/09/13	0			0	0 HY	0	0
60	HP Computer	10/09/13	0			0	0 HY	0	0
61	Water Cooler	8/07/13	0			0	0 HY	0	0
63	Paulsboro Basement Renovations	9/30/14	237,282			237,282	39 MO S/L	26,111	6,084
64	Fire Door	4/01/14	6,003			6,003	39 MO S/L	725	154
65	HP Printer	9/17/14	219			219	5 MO S/L	186	33
66	Computer Equipment	9/17/14	11,980			11,980	5 MO S/L	10,183	1,797
67	HP Printer	5/28/14	480			480	5 MO S/L	440	40
68	(16) Computers	6/01/15	13,248			13,248	5 MO S/L	9,494	2,650
70	Sidewalk - Paulsboro	12/15/15	4,300			4,300	10 MO S/L	1,326	430
71	Carpeting - Paulsboro	2/27/15	1,590			1,590	5 MO S/L	1,219	318
72	Pool Table	1/16/15	1,844			1,844	7 MO S/L	1,032	263
73	Foosball Table	1/16/15	850			850	7 MO S/L	476	121
74	Apple iMac Computer	5/11/15	2,981			2,981	5 MO S/L	2,186	596
75	Ping Pong Table	3/16/15	1,159			1,159	7 MO S/L	621	165
76	2008 Ford E350 Passenger Van	9/23/16	0			0	0 HY	0	0
77	2007 Chrysler Town & Country Minivan	12/29/16	0			0	0 HY	0	0
78	Windows-Glassboro Center	6/29/16	0			0	0 HY	0	0
79	HVAC - Paulsboro	8/01/16	0			0	0 HY	0	0
80	Water Cooler	10/03/16	0			0	0 HY	0	0
81	HVAC - Glassboro Center	12/28/16	0			0	0 HY	0	0
82	Paulsboro Bathroom Renovations	3/20/17	0			0	0 HY	0	0
83	Paulsboro Kitchen Renovations	3/15/17	0			0	0 HY	0	0
84	Paulsboro Roof/Siding	2/06/17	0			0	0 HY	0	0
85	Paulsboro Renovations	11/12/19	0			0	0 HY	0	0
	Total Other Depreciation		<u>312,661</u>			<u>312,661</u>		<u>63,166</u>	<u>13,408</u>
	Total ACRS and Other Depreciation		<u>312,661</u>			<u>312,661</u>		<u>63,166</u>	<u>13,408</u>
	Grand Totals		365,661			365,661		77,945	14,767
	Less: Dispositions and Transfers		0			0		0	0
	Net Grand Totals		<u>365,661</u>			<u>365,661</u>		<u>77,945</u>	<u>14,767</u>

Depreciation Adjustment Report

FYE: 12/31/2019

All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
There are no assets that meet the criteria of this report						

Asset	Description	Date In Service	Cost	Tax	AMT
Other Depreciation:					
23	4 Drawer Filing Cabinet	2/22/06	625	0	0
45	Ulrima 35 EZLoad Laminator	10/28/08	600	0	0
46	Paulsboro Land 916 Penn Line Road	2/01/08	41,500	0	0
47	Paulsboro Building 916 Penn Line Road	2/01/08	53,000	1,359	1,359
48	Paulsboro Land - Block 54 Lot 1	7/01/08	26,200	0	0
49	Paulsboro Building - Block 54 Lot 1	7/01/08	29,500	756	756
50	Woodwind	7/21/09	2,699	0	0
51	Basement Renovations	8/22/11	13,659	1,366	0
52	Air Conditioning Unit	8/22/11	4,852	0	0
53	Basement Renovations	4/17/12	46,639	4,663	0
54	Basement Renovations	9/21/12	6,900	690	0
55	Glassboro Bldg Blk 143 Lot 6	9/06/12	361,300	0	0
56	Glassboro Building Blk 143 Lot 6	9/06/12	376,200	9,647	0
57	2 Basketball Hoops	6/02/13	2,241	133	0
58	HP Computer	10/09/13	453	0	0
59	HP Computer	10/09/13	453	0	0
60	HP Computer	10/09/13	453	0	0
61	Water Cooler	8/07/13	1,400	140	0
63	Paulsboro Basement Renovations	9/30/14	237,282	6,085	6,085
64	Fire Door	4/01/14	6,003	154	154
65	HP Printer	9/17/14	219	0	0
66	Computer Equipment	9/17/14	11,980	0	0
67	HP Printer	5/28/14	480	0	0
68	(16) Computers	6/01/15	13,248	1,104	1,104
70	Sidewalk - Paulsboro	12/15/15	4,300	430	430
71	Carpeting - Paulsboro	2/27/15	1,590	53	53
72	Pool Table	1/16/15	1,844	264	264
73	Foosball Table	1/16/15	850	121	121
74	Apple iMac Computer	5/11/15	2,981	199	199
75	Ping Pong Table	3/16/15	1,159	166	166
76	2008 Ford E350 Passenger Van	9/23/16	5,879	1,176	0
77	2007 Chrysler Town & Country Minivan	12/29/16	2,790	558	0
78	Windows-Glassboro Center	6/29/16	11,269	1,127	0
79	HVAC - Paulsboro	8/01/16	20,990	2,099	0
80	Water Cooler	10/03/16	1,445	144	0
81	HVAC - Glassboro Center	12/28/16	25,000	2,500	0
82	Paulsboro Bathroom Renovations	3/20/17	45,024	4,502	0
83	Paulsboro Kitchen Renovations	3/15/17	6,273	628	0
84	Paulsboro Roof/Siding	2/06/17	12,873	1,287	0
85	Paulsboro Renovations	11/12/19	41,761	0	0
Total Other Depreciation			<u>1,423,914</u>	<u>41,351</u>	<u>10,691</u>
Total ACRS and Other Depreciation			<u>1,423,914</u>	<u>41,351</u>	<u>10,691</u>
Grand Totals			<u>1,423,914</u>	<u>41,351</u>	<u>10,691</u>

Asset	Description	Date In Service	Cost	NJ
Other Depreciation:				
23	4 Drawer Filing Cabinet	2/22/06	625	0
45	Ulrima 35 EZLoad Laminator	10/28/08	600	0
46	Paulsboro Land 916 Penn Line Road	2/01/08	0	0
47	Paulsboro Building 916 Penn Line Road	2/01/08	0	0
48	Paulsboro Land - Block 54 Lot 1	7/01/08	26,200	0
49	Paulsboro Building - Block 54 Lot 1	7/01/08	29,500	756
50	Woodwind	7/21/09	2,699	0
51	Basement Renovations	8/22/11	13,659	1,366
52	Air Conditioning Unit	8/22/11	4,852	0
53	Basement Renovations	4/17/12	46,639	4,663
54	Basement Renovations	9/21/12	6,900	690
55	Glassboro Bldg Blk 143 Lot 6	9/06/12	361,300	0
56	Glassboro Building Blk 143 Lot 6	9/06/12	376,200	9,647
57	2 Basketball Hoops	6/02/13	2,241	133
58	HP Computer	10/09/13	453	0
59	HP Computer	10/09/13	453	0
60	HP Computer	10/09/13	453	0
61	Water Cooler	8/07/13	1,400	140
63	Paulsboro Basement Renovations	9/30/14	237,282	6,085
64	Fire Door	4/01/14	6,003	154
65	HP Printer	9/17/14	219	0
66	Computer Equipment	9/17/14	11,980	0
67	HP Printer	5/28/14	480	0
68	(16) Computers	6/01/15	13,248	1,104
70	Sidewalk - Paulsboro	12/15/15	4,300	430
71	Carpeting - Paulsboro	2/27/15	1,590	53
72	Pool Table	1/16/15	1,844	264
73	Foosball Table	1/16/15	850	121
74	Apple iMac Computer	5/11/15	2,981	199
75	Ping Pong Table	3/16/15	1,159	166
76	2008 Ford E350 Passenger Van	9/23/16	5,879	1,176
77	2007 Chrysler Town & Country Minivan	12/29/16	2,790	558
78	Windows-Glassboro Center	6/29/16	11,269	1,127
79	HVAC - Paulsboro	8/01/16	20,990	2,099
80	Water Cooler	10/03/16	1,445	144
81	HVAC - Glassboro Center	12/28/16	25,000	2,500
82	Paulsboro Bathroom Renovations	3/20/17	45,024	4,502
83	Paulsboro Kitchen Renovations	3/15/17	6,273	628
84	Paulsboro Roof/Siding	2/06/17	12,873	1,287
85	Paulsboro Renovations	11/12/19	0	0
Total Other Depreciation			<u>1,287,653</u>	<u>39,992</u>
Total ACRS and Other Depreciation			<u>1,287,653</u>	<u>39,992</u>
Grand Totals			<u>1,287,653</u>	<u>39,992</u>

Form 990	Event Income and Deduction Worksheet	2019
Description Golf Tournament		

Name Boys & Girls Club of Gloucester Co	Taxpayer Identification Number 54-2075655
---	---

Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

Income & Expense Summary:

1. Gross receipts or sales	1.	<u>53,915</u>	
2. Advertising income	2.		
3. Circulation income	3.		
4. Other income	4.		
5. Returns and allowances	5.		
6. Contributions received	6.		
7. Total revenue. Add lines 1 through 6	7.	<u>53,915</u>	
8. Cost of Goods Sold	8.	<u>23,771</u>	
9. Employment Expense	9.		
10. Fees for services	10.		
11. Indirect Expense	11.		
12. Depreciation Expense	12.		
13. Exempt Activity Expense	13.		
14. Fundraising Expense	14.		
15. Total expenses. Add lines 8 through 14	15.	<u>23,771</u>	
16. Net Income/Loss. Line 7 minus Line 15	16.	<u>30,144</u>	

Expense Details - Indirect Expense:

Advertising and promotion	_____
Office	_____
Printing/publication/postage	_____
Info technology/Maintenance	_____
Royalties & License Fees	_____
Occupancy/Real Estate Taxes	_____
Travel & Repairs	_____
Travel/entertainment (officials)	_____
Conferences/meetings	_____
Interest	_____
Insurance	_____
Total Indirect Expense	_____

Expense Details - Depreciation Expense:

On investment property	_____
On non-investment property	_____
Amortization	_____
Depletion	_____
Total Depreciation Expense	_____

Expense Details - Exempt Activity Expense:

Repairs and Maintenance	_____
Bad debts	_____
Taxes/licenses	_____
Charitable contributions	_____
Dividend recd deductions	_____
Readership costs	_____
Other expenses	_____
Total Exempt Activity Expense	_____

Expense Details - Fundraising Expense:

Cash prizes	_____
Non-cash prizes	_____
Rent and facility costs	_____
Food & beverages (Part II only)	_____
Entertainment (Part II only)	_____
Other direct expenses	_____
Total Fundraising Expense	_____

Expense Details - Cost of Goods Sold:

Beginning inventory	_____
Purchases	<u>23,771</u>
Labor	_____
Section 263A costs	_____
Other costs	_____
Ending inventory	_____
Total Cost of Goods Sold	<u>23,771</u>

Expense Details - Employment Expense:

Compensation of officers	_____
Other salaries and wages	_____
Pension plan contributions	_____
Other employee benefits	_____
Payroll taxes	_____
Total Employment Expense	_____

Expense Details - Fees for Services:

Management	_____
Legal	_____
Accounting	_____
Lobbying	_____
Professional fundraising	_____
Investment management	_____
Other	_____
Total Fees for Services	_____

Information is indicated for use on Form 990-T schedule:

- Schedule E
- Schedule F
- Schedule G
- Schedule I
- Schedule J

Allocation of Expense to Program Service Accomplishments:

First	_____
Second	_____
Third	_____
All other	_____

Form 990	Event Income and Deduction Worksheet	2019
Description Fall Event		

Name Boys & Girls Club of Gloucester Co	Taxpayer Identification Number 54-2075655
---	---

Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

Income & Expense Summary:

1. Gross receipts or sales	1.	<u>188,414</u>	
2. Advertising income	2.		
3. Circulation income	3.		
4. Other income	4.		
5. Returns and allowances	5.		
6. Contributions received	6.		
7. Total revenue. Add lines 1 through 6	7.	<u>188,414</u>	
8. Cost of Goods Sold	8.	<u>26,916</u>	
9. Employment Expense	9.		
10. Fees for services	10.		
11. Indirect Expense	11.		
12. Depreciation Expense	12.		
13. Exempt Activity Expense	13.		
14. Fundraising Expense	14.		
15. Total expenses. Add lines 8 through 14	15.	<u>26,916</u>	
16. Net Income/Loss. Line 7 minus Line 15	16.	<u>161,498</u>	

Expense Details - Indirect Expense:

Advertising and promotion	
Office	
Printing/publication/postage	
Info technology/Maintenance	
Royalties & License Fees	
Occupancy/Real Estate Taxes	
Travel & Repairs	
Travel/entertainment (officials)	
Conferences/meetings	
Interest	
Insurance	
Total Indirect Expense	

Expense Details - Depreciation Expense:

On investment property	
On non-investment property	
Amortization	
Depletion	
Total Depreciation Expense	

Expense Details - Cost of Goods Sold:

Beginning inventory	
Purchases	<u>26,916</u>
Labor	
Section 263A costs	
Other costs	
Ending inventory	
Total Cost of Goods Sold	<u>26,916</u>

Expense Details - Exempt Activity Expense:

Repairs and Maintenance	
Bad debts	
Taxes/licenses	
Charitable contributions	
Dividend recd deductions	
Readership costs	
Other expenses	
Total Exempt Activity Expense	

Expense Details - Employment Expense:

Compensation of officers	
Other salaries and wages	
Pension plan contributions	
Other employee benefits	
Payroll taxes	
Total Employment Expense	

Expense Details - Fundraising Expense:

Cash prizes	
Non-cash prizes	
Rent and facility costs	
Food & beverages (Part II only)	
Entertainment (Part II only)	
Other direct expenses	
Total Fundraising Expense	

Expense Details - Fees for Services:

Management	
Legal	
Accounting	
Lobbying	
Professional fundraising	
Investment management	
Other	
Total Fees for Services	

Information is indicated for use on Form 990-T schedule:

- Schedule E
- Schedule F
- Schedule G
- Schedule I
- Schedule J

Allocation of Expense to Program Service Accomplishments:

First	
Second	
Third	
All other	

Form 990	Event Income and Deduction Worksheet	2019
Description 5K Walk / Run Event		

Name Boys & Girls Club of Gloucester Co	Taxpayer Identification Number 54-2075655
---	---

Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

Income & Expense Summary:

1. Gross receipts or sales	1.	2,280	
2. Advertising income	2.		
3. Circulation income	3.		
4. Other income	4.		
5. Returns and allowances	5.		
6. Contributions received	6.		
7. Total revenue. Add lines 1 through 6	7.	2,280	
8. Cost of Goods Sold	8.	1,001	
9. Employment Expense	9.		
10. Fees for services	10.		
11. Indirect Expense	11.		
12. Depreciation Expense	12.		
13. Exempt Activity Expense	13.		
14. Fundraising Expense	14.		
15. Total expenses. Add lines 8 through 14	15.	1,001	
16. Net Income/Loss. Line 7 minus Line 15	16.	1,279	

Expense Details - Indirect Expense:

Advertising and promotion	_____
Office	_____
Printing/publication/postage	_____
Info technology/Maintenance	_____
Royalties & License Fees	_____
Occupancy/Real Estate Taxes	_____
Travel & Repairs	_____
Travel/entertainment (officials)	_____
Conferences/meetings	_____
Interest	_____
Insurance	_____
Total Indirect Expense	_____

Expense Details - Depreciation Expense:

On investment property	_____
On non-investment property	_____
Amortization	_____
Depletion	_____
Total Depreciation Expense	_____

Expense Details - Cost of Goods Sold:

Beginning inventory	_____
Purchases	1,001
Labor	_____
Section 263A costs	_____
Other costs	_____
Ending inventory	_____
Total Cost of Goods Sold	1,001

Expense Details - Exempt Activity Expense:

Repairs and Maintenance	_____
Bad debts	_____
Taxes/licenses	_____
Charitable contributions	_____
Dividend recd deductions	_____
Readership costs	_____
Other expenses	_____
Total Exempt Activity Expense	_____

Expense Details - Employment Expense:

Compensation of officers	_____
Other salaries and wages	_____
Pension plan contributions	_____
Other employee benefits	_____
Payroll taxes	_____
Total Employment Expense	_____

Expense Details - Fundraising Expense:

Cash prizes	_____
Non-cash prizes	_____
Rent and facility costs	_____
Food & beverages (Part II only)	_____
Entertainment (Part II only)	_____
Other direct expenses	_____
Total Fundraising Expense	_____

Expense Details - Fees for Services:

Management	_____
Legal	_____
Accounting	_____
Lobbying	_____
Professional fundraising	_____
Investment management	_____
Other	_____
Total Fees for Services	_____

Information is indicated for use on Form 990-T schedule:

- Schedule E
- Schedule F
- Schedule G
- Schedule I
- Schedule J

Allocation of Expense to Program Service Accomplishments:

First	_____
Second	_____
Third	_____
All other	_____

Form 990	Event Income and Deduction Worksheet	2019
Description YOY Event		

Name Boys & Girls Club of Gloucester Co	Taxpayer Identification Number 54-2075655
---	---

Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

Income & Expense Summary:

1. Gross receipts or sales	1.	30,100		
2. Advertising income	2.			
3. Circulation income	3.			
4. Other income	4.			
5. Returns and allowances	5.			
6. Contributions received	6.			
7. Total revenue. Add lines 1 through 6	7.	30,100		
8. Cost of Goods Sold	8.	6,354		
9. Employment Expense	9.			
10. Fees for services	10.			
11. Indirect Expense	11.			
12. Depreciation Expense	12.			
13. Exempt Activity Expense	13.			
14. Fundraising Expense	14.			
15. Total expenses. Add lines 8 through 14	15.	6,354		
16. Net Income/Loss. Line 7 minus Line 15	16.	23,746		

Expense Details - Indirect Expense:

Advertising and promotion	_____
Office	_____
Printing/publication/postage	_____
Info technology/Maintenance	_____
Royalties & License Fees	_____
Occupancy/Real Estate Taxes	_____
Travel & Repairs	_____
Travel/entertainment (officials)	_____
Conferences/meetings	_____
Interest	_____
Insurance	_____
Total Indirect Expense	_____

Expense Details - Depreciation Expense:

On investment property	_____
On non-investment property	_____
Amortization	_____
Depletion	_____
Total Depreciation Expense	_____

Expense Details - Cost of Goods Sold:

Beginning inventory	_____
Purchases	6,354
Labor	_____
Section 263A costs	_____
Other costs	_____
Ending inventory	_____
Total Cost of Goods Sold	6,354

Expense Details - Exempt Activity Expense:

Repairs and Maintenance	_____
Bad debts	_____
Taxes/licenses	_____
Charitable contributions	_____
Dividend recd deductions	_____
Readership costs	_____
Other expenses	_____
Total Exempt Activity Expense	_____

Expense Details - Employment Expense:

Compensation of officers	_____
Other salaries and wages	_____
Pension plan contributions	_____
Other employee benefits	_____
Payroll taxes	_____
Total Employment Expense	_____

Expense Details - Fundraising Expense:

Cash prizes	_____
Non-cash prizes	_____
Rent and facility costs	_____
Food & beverages (Part II only)	_____
Entertainment (Part II only)	_____
Other direct expenses	_____
Total Fundraising Expense	_____

Expense Details - Fees for Services:

Management	_____
Legal	_____
Accounting	_____
Lobbying	_____
Professional fundraising	_____
Investment management	_____
Other	_____
Total Fees for Services	_____

Information is indicated for use on Form 990-T schedule:

- Schedule E
- Schedule F
- Schedule G
- Schedule I
- Schedule J

Allocation of Expense to Program Service Accomplishments:

First	_____
Second	_____
Third	_____
All other	_____

**SCHEDULE G
(Form 990 or
990-EZ)**

Fundraising Other Events

2019

For calendar year 2019, or tax year beginning , and ending

Name **Boys & Girls Club of Gloucester Co** Employer Identification Number **54-2075655**

		(a) Other event	(b) Other event	(c) Other event	(d) Total other events
		<u>YOY Event</u>	_____	_____	(add col. (a) through
		(event type)	(event type)	(event type)	col. (c))
Revenue	1 Gross receipts	30,100			30,100
	2 Less: Charitable contributions				
	3 Gross income (line 1 minus line 2)	30,100			30,100
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food/beverages				
	8 Entertainment				
	9 Other expenses	6,354			6,354

Form **990****Two Year Comparison Report****2018 & 2019**

For calendar year 2019, or tax year beginning , ending

Name

Taxpayer Identification Number

Boys & Girls Club of Gloucester Co**54-2075655**

		2018	2019	Differences
Revenue	1. Contributions, gifts, grants	1. 159,093	323,778	164,685
	2. Membership dues and assessments	2.		
	3. Government contributions and grants	3. 135,535	64,923	-70,612
	4. Program service revenue	4. 423,953	437,963	14,010
	5. Investment income	5. 462	764	302
	6. Proceeds from tax exempt bonds	6.		
	7. Net gain or (loss) from sale of assets other than inventory	7.	2,000	2,000
	8. Net income or (loss) from fundraising events	8. 237,497	216,667	-20,830
	9. Net income or (loss) from gaming	9.		
	10. Net gain or (loss) on sales of inventory	10.		
	11. Other revenue	11. 1,859	8,372	6,513
	12. Total revenue. Add lines 1 through 11	12. 958,399	1,054,467	96,068
Expenses	13. Grants and similar amounts paid	13.		
	14. Benefits paid to or for members	14.		
	15. Compensation of officers, directors, trustees, etc.	15.	182,138	182,138
	16. Salaries, other compensation, and employee benefits	16. 607,017	467,088	-139,929
	17. Professional fundraising fees	17.		
	18. Other professional fees	18. 8,158	11,464	3,306
	19. Occupancy, rent, utilities, and maintenance	19. 45,460	40,810	-4,650
	20. Depreciation and Depletion	20. 46,944	45,616	-1,328
	21. Other expenses	21. 245,858	251,056	5,198
	22. Total expenses. Add lines 13 through 21	22. 953,437	998,172	44,735
	23. Excess or (Deficit). Subtract line 22 from line 12	23. 4,962	56,295	51,333
Other Information	24. Total exempt revenue	24. 958,399	1,054,467	96,068
	25. Total unrelated revenue	25.		
	26. Total excludable revenue	26. 426,274	449,099	22,825
	27. Total assets	27. 1,415,763	1,487,908	72,145
	28. Total liabilities	28. 36,437	52,287	15,850
	29. Retained earnings	29. 1,379,326	1,435,621	56,295
	30. Number of voting members of governing body	30. 27	22	
	31. Number of independent voting members of governing body	31. 27	22	
	32. Number of employees	32. 53	58	
	33. Number of volunteers	33. 147	210	

Form **990****Tax Return History****2019**

Name

Boys & Girls Club of Gloucester Co

Employer Identification Number

54-2075655

	2015	2016	2017	2018	2019	2020
Contributions, gifts, grants	358,094	355,508	373,650	294,628	388,701	
Membership dues						
Program service revenue	408,201	474,051	508,011	423,953	437,963	
Capital gain or loss		-1,695			2,000	
Investment income	121	157	213	462	764	
Fundraising revenue (income/loss)	139,512	171,328	158,751	237,497	216,667	
Gaming revenue (income/loss)						
Other revenue	96,411	26,556	1,784	1,859	8,372	
Total revenue	1,002,339	1,025,905	1,042,409	958,399	1,054,467	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.			209,042		182,138	
Other compensation	560,131	611,873	478,048	607,017	467,088	
Professional fees			9,013	8,158	11,464	
Occupancy costs	64,301	62,256	58,666	45,460	40,810	
Depreciation and depletion	32,141	35,535	45,908	46,944	45,616	
Other expenses	314,127	299,902	267,073	245,858	251,056	
Total expenses	970,700	1,009,566	1,067,750	953,437	998,172	
Excess or (Deficit)	31,639	16,339	-25,341	4,962	56,295	
Total exempt revenue	1,002,339	1,025,905	1,042,409	958,399	1,054,467	
Total unrelated revenue						
Total excludable revenue	504,733	499,069	510,008	426,274	449,099	
Total Assets	1,476,921	1,498,401	1,454,657	1,415,763	1,487,908	
Total Liabilities	95,247	98,693	80,293	36,437	52,287	
Net Fund Balances	1,381,674	1,399,708	1,374,364	1,379,326	1,435,621	

Federal Statements

Taxable Interest on Investments

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
Interest	\$ 764					14
Total	<u>\$ 764</u>					

Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
Professional Services Fees	\$ 2,406	\$ 2,039	\$ 252	\$ 115
Total	\$ 2,406	\$ 2,039	\$ 252	\$ 115

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
Dues & Subscriptions	\$ 9,193	\$ 8,229	\$ 149	\$ 815
Bank Fees	4,729	1,965	363	2,401
Payroll Services	3,964	1,121	2,793	50
Equipment	3,562	2,618		944
Permits & Licenses	2,325	2,275	50	
Bad Debt Expense	1,800			1,800
Postage	1,567	82	483	1,002
Scholarship awards	1,500	1,500		
Board Admin	1,312	250	1,012	50
Printing & Copying	1,017	870	147	
Other Fundraising Expense	437	329	108	
Rounding	-1	-2	1	
Total	\$ 31,405	\$ 19,237	\$ 5,106	\$ 7,062

Schedule A, Part III, Line 1(e)

<u>Description</u>	<u>Amount</u>
	\$ 64,923
Donations	13,551
Corporate Giving	13,125
Individual Contributions	11,387
Board Contributions	7,540
Corporate Grants	90,100
Atlantic City Electric Cash Contribution	14,000
James Daloisio Cash Contribution	10,000
The George Family Foundation Cash Contribution	25,000
Dalton Family Trust Cash Contribution	18,500
Demountable Concepts Cash Contribution	5,000
Dermody Properties Foundation Cash Contribution	10,000
Exxon Mobile Fuels & Lubricants Cash Contribution	5,000
John M. Paz Cash Contribution	50,000
South Jersey Industires, Inc. Cash Contribution	15,575
West Deptford Energy Holdings, LLC Cash Contribution	20,000
Wheelabrator Technologies Cash Contribution	5,000
Zidek Family Foundation Cash Contribution	10,000
Total	<u>\$ 388,701</u>

Federal Statements

Schedule A, Part III, Line 2(e)

<u>Description</u>	<u>Amount</u>
Camp Revenue	\$ 120,202
After School Program	282,295
Food Program	96,836
Community Benefit	-64,359
Membership Dues	2,989
Miscellaneous Income	3,114
In-kind Contributions	5,258
Golf Tournament	53,915
Fall Event	188,414
5K Walk / Run Event	2,280
YOY Event	30,100
Total	<u>\$ 721,044</u>

Schedule A, Part III, Line 10a(e)

<u>Description</u>	<u>Amount</u>
Interest	\$ 764
Total	<u>\$ 764</u>