

BOYS3668  
Boys & Girls Clubs of the  
**2022 Client**

**COPY**

## Forms 990 / 990-EZ Return Summary

For calendar year 2022, or tax year beginning 07/01/22 , and ending 06/30/23

BOYS & GIRLS CLUBS OF THE  
GREATER SANTIAM

52-1043668

**Net Asset / Fund Balance at Beginning of Year** 2,844,280

**Revenue**

Contributions	<u>1,609,060</u>	
Program service revenue	<u>1,113,169</u>	
Investment income	<u>6,058</u>	
Capital gain / loss	<u>0</u>	
Fundraising / Gaming:		
Gross revenue	<u>378,723</u>	
Direct expenses	<u>59,088</u>	
Net income	<u>319,635</u>	
Other income	<u>38,282</u>	
<b>Total revenue</b>		<u>3,086,204</u>

**Expenses**

Program services	<u>2,509,253</u>	
Management and general	<u>264,532</u>	
Fundraising	<u>8,991</u>	
<b>Total expenses</b>		<u>2,782,776</u>
<b>Excess / (deficit)</b>		<u>303,428</u>

Changes 176,899

**Net Asset / Fund Balance at End of Year** 3,324,607

**Reconciliation of Revenue**

Total revenue per financial statements	<u>3,145,292</u>	
Less:		
Unrealized gains	_____	
Donated services	_____	
Recoveries	_____	
Other	<u>59,088</u>	
Plus:		
Investment expenses	_____	
Other	_____	
<b>Total revenue per return</b>	<u>3,086,204</u>	

**Reconciliation of Expenses**

Total expenses per financial statements	<u>2,841,864</u>	
Less:		
Donated services	_____	
Prior year adjustments	_____	
Losses	_____	
Other	<u>59,088</u>	
Plus:		
Investment expenses	_____	
Other	_____	
<b>Total expenses per return</b>	<u>2,782,776</u>	

**Balance Sheet**

	Beginning	Ending	Differences
Assets	<u>3,222,019</u>	<u>3,619,895</u>	
Liabilities	<u>377,739</u>	<u>295,288</u>	
Net assets	<u>2,844,280</u>	<u>3,324,607</u>	<u>480,327</u>

**Miscellaneous Information**

Amended return \_\_\_\_\_  
 Return / extended due date 05/15/24  
 Failure to file penalty \_\_\_\_\_

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## Filing Instructions

### Boys & Girls Clubs of the Greater Santiam

#### Exempt Organization Tax Return

#### Taxable Year Ended June 30, 2023

**Date Due:** May 15, 2024

**Remittance:** None is required. Your Form 990 for the tax year ended 6/30/23 shows no balance due.

**Signature:** You are using a Personal Identification Number (PIN) for signing your return electronically. Form 8879-TE, IRS *e-file* Signature Authorization for an Exempt Organization should be signed and dated by an authorized officer of the organization and returned to:

Accuity, LLC  
PO Box 1072  
Albany, OR 97321-0415

***Important:*** Your return will not be filed with the IRS until the signed Form 8879-TE has been received by this office.

**Other:** Your return is being filed electronically with the IRS and is not required to be mailed. If you Mail a paper copy of your return to the IRS it will delay the processing of your return.

IRS e-file Signature Authorization for a Tax Exempt Entity

For calendar year 2022, or fiscal year beginning 7/01, 2022, and ending 6/30, 2023.

2022

Department of the Treasury Internal Revenue Service

Do not send to the IRS. Keep for your records. Go to www.irs.gov/Form8879TE for the latest information.

Name of filer BOYS & GIRLS CLUBS OF THE GREATER SANTIAM EIN or SSN 52-1043668

Name and title of officer or person subject to tax ALLYSON KREDER BUSINESS DIRECTOR

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

Table with 3 columns: Line number (1a-10a), Description (Form 990 check here, Total revenue, Total tax, etc.), and Amount (3,086,204 for 1b).

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity), (EIN) and that I have examined a copy of the 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize ACCUITY, LLC to enter my PIN 43668 as my signature. Enter five numbers, but do not enter all zeros.

on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax Date 02/23/24

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

93445607980 Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature Date 02/23/24

ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

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**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

**2022**  
**Open to Public Inspection**

Do not enter social security numbers on this form as it may be made public.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**A For the 2022 calendar year, or tax year beginning** 07/01/22 , **and ending** 06/30/23

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization: <b>BOYS &amp; GIRLS CLUBS OF THE GREATER SANTIAM</b> Doing business as: Number and street (or P.O. box if mail is not delivered to street address) Room/suite: <b>305 S 5TH ST.</b> City or town, state or province, country, and ZIP or foreign postal code: <b>LEBANON OR 97355</b>	<b>D</b> Employer identification number: <b>52-1043668</b> <b>E</b> Telephone number: <b>541-258-7105</b> <b>G</b> Gross receipts\$ <b>3,159,012</b>
<b>F</b> Name and address of principal officer: <b>ALLYSON KREDER</b> <b>305 S 5TH</b> <b>LEBANON OR 97355</b>		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>H(c)</b> Group exemption number
<b>J</b> Website: <b>BGCGREATERSANTIAM.ORG</b>		<b>L</b> Year of formation: <b>1976</b>
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		<b>M</b> State of legal domicile: <b>OR</b>

**Part I Summary**

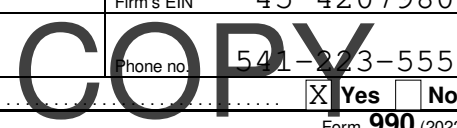
<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>ATHLETIC AND RECREATIONAL PROGRAMS FOR YOUTH</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	14
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	14
	<b>5</b> Total number of individuals employed in calendar year 2022 (Part V, line 2a)	<b>5</b>	124
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	300
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	0	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)	1,272,801	1,609,060
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,045,930	1,113,169
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	21,835	6,058
	<b>12</b> Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,559,030	3,086,204
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		0
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,516,337	1,813,574
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		0
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25)	8,991	
	<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	903,043	969,202
<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2,419,380	2,782,776	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	139,650	303,428	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	<b>21</b> Total liabilities (Part X, line 26)	3,222,019	3,619,895
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	377,739	295,288
		2,844,280	3,324,607

**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.

<b>Sign Here</b>	Signature of officer	Date			
	<b>ALLYSON KREDER</b> Type or print name and title	<b>BUSINESS DIRECTOR</b>			
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	<b>GLEN O. KEARNS, CPA</b>		03/26/24		P00129289
	Firm's name	Firm's EIN			
	<b>ACCUITY, LLC</b>	<b>45-4207980</b>			
	<b>PO BOX 1072</b>				
	<b>ALBANY, OR 97321-0415</b>				
	Firm's address	Phone no.			
		<b>541-223-5555</b>			

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



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:
ATHLETIC AND RECREATIONAL PROGRAMS FOR YOUTH

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 [X] 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 [X] No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program 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 \$ 2,509,253 including grants of \$ ) (Revenue \$ 1,113,169 )
THE CLUB SERVES ABOUT 2,000 MEMBERS AGES SIX THROUGH 18 IN ATHLETIC, CULTURAL ARTS, LEADERSHIP, SOCIAL RECREATION, AND SCHOOL HOMEWORK PROGRAMS.

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 2,509,253



**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)? If "Yes," complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 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? If "Yes," complete Schedule C, Part I		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		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? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V		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? If "Yes," complete Schedule D, Part VI	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? If "Yes," complete Schedule D, Part VII		X
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		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)? If "Yes," complete Schedule D, Part X	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		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? If "Yes," complete Schedule F, Parts I and IV		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? If "Yes," complete Schedule F, Parts II and IV		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		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? If "Yes," complete Schedule G, Part 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? If "Yes," complete Schedule G, Part II	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		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? If "Yes," complete Schedule I, Parts I and II		X

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Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 22-38 covering various organizational requirements.

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

Input box for Part V check

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 1a-1c regarding Form 1096 and backup withholding.





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 124
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X
b If "Yes," has it filed a Form 990-T for this year? 3b
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a 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? 5a X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b
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? 7a
b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c
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? 7e
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8
9 Sponsoring organizations maintaining donor advised funds.
a Did the sponsoring organization make any taxable distributions under section 4966? 9a
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b
10 Section 501(c)(7) organizations. Enter:
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? 13a
Note: See the instructions for additional information the organization must report on Schedule O.
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b
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? If "No," provide an explanation on Schedule O 14b
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 X
If "Yes," see instructions and file Form 4720, Schedule N.
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X
If "Yes," complete Form 4720, Schedule O.
17 Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17
If "Yes," complete Form 6069.

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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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 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?; 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?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 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?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 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.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b 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?; 11b Describe on 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; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 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?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 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?; 16b 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 OR
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.
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

ALLYSON KREDER
LEBANON

305 S 5TH

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OR 97355 541-258-7105

**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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the 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 (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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) KARIE CORDLE ..... DIRECTOR	1.00 ..... 0.00	X						0	0	0
(2) JARED CORNELL ..... PRESIDENT	1.00 ..... 0.00	X		X				0	0	0
(3) SCOTT MELCHER ..... DIRECTOR	1.00 ..... 0.00	X						0	0	0
(4) RON MOORE ..... DIRECTOR	1.00 ..... 0.00	X						0	0	0
(5) TOM OLIVER ..... DIRECTOR	1.00 ..... 0.00	X						0	0	0
(6) DOUG PHILLIPS ..... DIRECTOR	1.00 ..... 0.00	X						0	0	0
(7) DOUG RICE ..... DIRECTOR	1.00 ..... 0.00	X						0	0	0
(8) WAYNE RIESKAMP ..... DIRECTOR	1.00 ..... 0.00	X						0	0	0
(9) AMY VANDETTA ..... VICE PRESIDENT	1.00 ..... 0.00	X		X				0	0	0
(10) SHANE VORDERSTASSE ..... SECRETARY/TREASURER	1.00 ..... 0.00	X		X				0	0	0
(11) GRANT WEBSTER ..... DIRECTOR	1.00 ..... 0.00	X						0	0	0

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

(A) Name and title	(B) Average hours 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) ALLYSON KREDER	40.00									
BUSINESS DIRECTOR	0.00			X			0	0	0	
(13) RAY TOWRY	40.00									
EXECUTIVE DIRECTOR	0.00			X			0	0	0	
<b>1b Subtotal</b> .....										
<b>c Total from continuation sheets to Part VII, Section A</b> .....										
<b>d Total (add lines 1b and 1c)</b> .....										

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 0

	Yes	No
3 Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> .....	3	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> .....	4	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> .....	5	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

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**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	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns	<b>1a</b>				
	<b>b</b> Membership dues	<b>1b</b>				
	<b>c</b> Fundraising events	<b>1c</b>				
	<b>d</b> Related organizations	<b>1d</b>				
	<b>e</b> Government grants (contributions)	<b>1e</b>	926,427			
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	682,633			
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b> \$				
	<b>h Total.</b> Add lines 1a-1f		1,609,060			
	<b>Program Service Revenue</b>	<b>2a</b> PROGRAM SERVICE FEES	Business Code	1,099,117	1,099,117	
<b>b</b> RENT AND CATERING INCOME			14,052	14,052		
<b>c</b>						
<b>d</b>						
<b>e</b>						
<b>f</b> All other program service revenue						
<b>g Total.</b> Add lines 2a-2f			1,113,169			
<b>Other Revenue</b>		<b>3</b> Investment income (including dividends, interest, and other similar amounts)		6,058		6,058
	<b>4</b> Income from investment of tax-exempt bond proceeds					
	<b>5</b> Royalties					
	<b>6a</b> Gross rents	(i) Real				
		(ii) Personal				
		<b>6a</b>				
	<b>b</b> Less: rental expenses	<b>6b</b>				
	<b>c</b> Rental inc. or (loss)	<b>6c</b>				
	<b>d</b> Net rental income or (loss)					
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other		13,720		
		<b>7a</b>				
		<b>b</b> Less: cost or other basis and sales exps.	<b>7b</b>		13,720	
	<b>c</b> Gain or (loss)	<b>7c</b>				
	<b>d</b> Net gain or (loss)					
<b>8a</b> Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>	378,723				
	<b>b</b> Less: direct expenses	<b>8b</b>	59,088			
	<b>c</b> Net income or (loss) from fundraising events		319,635			
<b>9a</b> Gross income from gaming activities. See Part IV, line 19	<b>9a</b>					
	<b>b</b> Less: direct expenses	<b>9b</b>				
	<b>c</b> Net income or (loss) from gaming activities					
<b>10a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>					
	<b>b</b> Less: cost of goods sold	<b>10b</b>				
	<b>c</b> Net income or (loss) from sales of inventory					
<b>Miscellaneous Revenue</b>	<b>11a</b> MISCELLANEOUS INCOME	Business Code	38,282	38,282		
	<b>b</b>					
	<b>c</b>					
	<b>d</b> All other revenue					
	<b>e Total.</b> Add lines 11a-11d		38,282			
	<b>12 Total revenue.</b> See instructions		3,086,204	1,151,451	0	6,058

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**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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees				
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	88,192	81,737	6,063	392
<b>7</b> Other salaries and wages	1,431,687	1,331,259	93,010	7,418
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	16,807	15,267	1,540	
<b>9</b> Other employee benefits	145,376	127,070	18,306	
<b>10</b> Payroll taxes	131,512	123,079	7,734	699
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal				
<b>c</b> Accounting	5,000		5,000	
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 7				
<b>f</b> Investment management fees				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
<b>12</b> Advertising and promotion	970	970		
<b>13</b> Office expenses	33,284	28,327	4,530	427
<b>14</b> Information technology				
<b>15</b> Royalties				
<b>16</b> Occupancy	74,366	45,290	29,076	
<b>17</b> Travel	15,716	15,716		
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings				
<b>20</b> Interest				
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	54,102	48,485	5,617	
<b>23</b> Insurance	41,640	41,640		
<b>24</b> 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.)				
<b>a</b> SUPPLIES	209,301	190,740	18,536	25
<b>b</b> FOOD PURCHASES	168,243	168,243		
<b>c</b> DUES AND SUBSCRIPTIONS	96,176	96,176		
<b>d</b> REPAIRS AND MAINTENANCE	88,489	33,264	55,225	
<b>e</b> All other expenses	181,915	161,990	19,895	30
<b>25</b> Total functional expenses. Add lines 1 through 24e	2,782,776	2,509,253	264,532	8,991
<b>26</b> 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)				

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**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
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing	177,190	<b>1</b>	249,580
	<b>2</b> Savings and temporary cash investments		<b>2</b>	
	<b>3</b> Pledges and grants receivable, net	171,460	<b>3</b>	13,039
	<b>4</b> Accounts receivable, net		<b>4</b>	15,070
	<b>5</b> 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		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		<b>6</b>	
	<b>7</b> Notes and loans receivable, net		<b>7</b>	
	<b>8</b> Inventories for sale or use		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges		<b>9</b>	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 2,080,846		
	<b>b</b> Less: accumulated depreciation	<b>10b</b> 1,229,935	812,326	<b>10c</b> 850,911
	<b>11</b> Investments—publicly traded securities	2,053,145	<b>11</b>	2,489,340
	<b>12</b> Investments—other securities. See Part IV, line 11		<b>12</b>	
	<b>13</b> Investments—program-related. See Part IV, line 11		<b>13</b>	
	<b>14</b> Intangible assets	2,185	<b>14</b>	1,955
	<b>15</b> Other assets. See Part IV, line 11	5,713	<b>15</b>	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33)	3,222,019	<b>16</b>	3,619,895	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses	227,739	<b>17</b>	145,288
	<b>18</b> Grants payable		<b>18</b>	
	<b>19</b> Deferred revenue		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D		<b>21</b>	
	<b>22</b> 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		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties	150,000	<b>23</b>	150,000
	<b>24</b> Unsecured notes and loans payable to unrelated third parties		<b>24</b>	
	<b>25</b> 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		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25	377,739	<b>26</b>	295,288
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions	1,182,216	<b>27</b>	1,342,638
	<b>28</b> Net assets with donor restrictions	1,662,064	<b>28</b>	1,981,969
	<b>Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds		<b>31</b>	
<b>32</b> Total net assets or fund balances	2,844,280	<b>32</b>	3,324,607	
<b>33</b> Total liabilities and net assets/fund balances	3,222,019	<b>33</b>	3,619,895	

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**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	3,086,204
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	2,782,776
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	303,428
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	2,844,280
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	176,899
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	3,324,607

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	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 on Schedule O.		
<b>2a</b>	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
<b>2b</b>	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	
<b>2c</b>	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	
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		X
<b>3b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

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

**Public Charity Status and Public Support**

OMB No. 1545-0047

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

**2022**

Department of the Treasury  
Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Open to Public  
Inspection

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization <b>BOYS &amp; GIRLS CLUBS OF THE GREATER SANTIAM</b>	Employer identification number <b>52-1043668</b>
--	---

**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).)
- 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 on 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)						
<b>Total</b>						

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990) 2022

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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

Table with 7 columns: (a) 2018, (b) 2019, (c) 2020, (d) 2021, (e) 2022, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2018, (b) 2019, (c) 2020, (d) 2021, (e) 2022, (f) Total. Rows include: 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; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10.

12 Gross receipts from related activities, etc. (see instructions) 12
13 First 5 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 2022 (line 6, column (f) divided by line 11, column (f)) 14 %
15 Public support percentage from 2021 Schedule A, Part II, line 14 15 %
16a 33 1/3% support test—2022. 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—2021. 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—2022. 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—2021. 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

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	756,811	1,331,228	3,454,643	1,272,801	1,609,060	8,424,543
<b>2</b> 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	1,368,154	1,535,086	824,660	1,344,436	1,491,892	6,564,228
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge	774,752	694,144				1,468,896
<b>6 Total.</b> Add lines 1 through 5	2,899,717	3,560,458	4,279,303	2,617,237	3,100,952	16,457,667
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						16,457,667

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>9</b> Amounts from line 6	2,899,717	3,560,458	4,279,303	2,617,237	3,100,952	16,457,667
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	9,262	1,176	12,138	21,835	6,058	50,469
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b	9,262	1,176	12,138	21,835	6,058	50,469
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	136			31,897	38,282	70,315
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)	2,909,115	3,561,634	4,291,441	2,670,969	3,145,292	16,578,451

**14 First 5 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**

<b>15</b> Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	<b>15</b>	99.27%
<b>16</b> Public support percentage from 2021 Schedule A, Part III, line 15	<b>16</b>	99.41%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2021 Schedule A, Part III, line 17	<b>18</b>	%

**19a 33 1/3% support tests—2022.** 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—2021.** 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 on line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

		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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c	<b>Substitutions only.</b> 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).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</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 on 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 on 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 line 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>		

Schedule A (Form 990) 2022  
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**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 on lines 11b and 11c below, the governing body of a supported organization?	11a	
b	A family member of a person described on line 11a above?	11b	
c	A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>	11c	

**Section B. Type I Supporting Organizations**

		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>	1	
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <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>	2	

**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>	1	

**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?	1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>	2	
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	3	

**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 <b>(see instructions)</b> .		
a	<input type="checkbox"/> The organization satisfied the Activities Test. <i>Complete line 2 below.</i>		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>		
c	<input type="checkbox"/> The organization supported a governmental entity. <i>Describe in Part VI how you supported a governmental entity (see instructions).</i>		
2	Activities Test. <b>Answer lines 2a and 2b below.</b>		
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>	2a	
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <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>	2b	
3	Parent of Supported Organizations. <b>Answer lines 3a and 3b below.</b>		
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>If "Yes" or "No," provide details in Part VI.</i>	3a	
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>	3b	

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**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.

<b>Section A – Adjusted Net Income</b>		(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	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	
<b>Section B – Minimum Asset Amount</b>		(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	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	
<b>Section C – Distributable Amount</b>			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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**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	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required—provide details in <b>Part VI</b> )	5
6	Other distributions (describe in <b>Part VI</b> ). See instructions.	6
7	<b>Total annual distributions.</b> Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

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

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

PART III, LINE 12 - OTHER INCOME DETAIL

\$ 70,315

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Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

Name of the organization: BOYS & GIRLS CLUBS OF THE GREATER SANTIAM. Employer identification number: 52-1043668

Organization type (check one):

- Filers of: Section: Form 990 or 990-EZ [X] 501(c)( 3 ) (enter number) organization [ ] 4947(a)(1) nonexempt charitable trust not treated as a private foundation [ ] 527 political organization Form 990-PF [ ] 501(c)(3) exempt private foundation [ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation [ ] 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- [X] 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 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. [ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. [ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions 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), 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).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2022)

COPY

Name of organization

BOYS &amp; GIRLS CLUBS OF THE

Employer identification number

52-1043668

**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	THE HEATHERING FOUNDATION 2121 SW BROADWAY PORTLAND OR 97201	\$ 510,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	THAD AND JOANNE NELSON 39178 MOUNT HOPE DRIVE LEBANON OR 97355	\$ 40,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	CAMMIE BENDER 30248 WAPITI LN LEBANON OR 97355	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	GARY & KITTY JONES 38646 PALMYRE DRIVE LEBANON OR 97355	\$ 10,237	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	CASCADE TIMBER - SWEET HOME TIMBER 3210 US-20 SWEET HOME OR 97386	\$ 6,751	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	HEATHER MCDANIEL 33692 SANTIAM HWY LEBANON OR 97355	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

**COPY**  
Schedule B (Form 990) (2022)

Name of organization

BOYS &amp; GIRLS CLUBS OF THE

Employer identification number

52-1043668

**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	GOODWILL INDUSTRIES OF THE COLUMBIA 1943 SE SIXTH AVENUE PORTLAND OR 97214	\$ 8,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	KNIFE RIVER 32260 OLD HIGHWAY 34 TANENT OR 97389	\$ 6,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	MR. & MRS. TONY LARSON 3720 NW JASMINE STREET CAMAS WA 98607	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	MR. & MRS. DALE LATIMER 33886 TENNESSEE ROAD LEBANON OR 97355	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	RICK FRANKLIN CORP 101 INDUSTRIAL WAY LEBANON OR 97355	\$ 22,290	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	SANTIAM EXCURSION TRAIN 750 S 3RD STREET LEBANON OR 97355	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

**COPY**  
Schedule B (Form 990) (2022)

Name of organization

BOYS & GIRLS CLUBS OF THE

Employer identification number

52-1043668

**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
13	WESTERN UNIVERSITY OF HEALTH SCIENCE 309 E 2ND PLACE POMONA CA 91766	\$ 15,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

COPY

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

2022

Open to Public Inspection

Name of the organization

BOYS & GIRLS CLUBS OF THE GREATER SANTIAM

Employer identification number

52-1043668

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, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, and questions about donor advisement.

Part II Conservation Easements.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of conservation easements, total number of easements, and monitoring expenses.

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include reporting requirements for art and historical treasures.

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**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:

- c** Beginning balance .....
- d** Additions during the year .....
- e** Distributions during the year .....
- f** Ending balance .....

	Amount
<b>1c</b>	
<b>1d</b>	
<b>1e</b>	
<b>1f</b>	

**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
<b>1a</b> Beginning of year balance .....					
<b>b</b> Contributions .....					
<b>c</b> Net investment earnings, gains, and losses .....					
<b>d</b> Grants or scholarships .....					
<b>e</b> Other expenditures for facilities and programs .....					
<b>f</b> Administrative expenses .....					
<b>g</b> 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:

- (i)** Unrelated organizations .....
- (ii)** Related organizations .....

	Yes	No
<b>3a(i)</b>		
<b>3a(ii)</b>		
<b>3b</b>		

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

**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
<b>1a</b> Land .....		362,162		362,162
<b>b</b> Buildings .....		1,428,490	1,054,513	373,977
<b>c</b> Leasehold improvements .....				
<b>d</b> Equipment .....		290,194	175,422	114,772
<b>e</b> Other .....				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) .....				850,911

**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)		
<b>Total.</b> (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)		
<b>Total.</b> (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)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

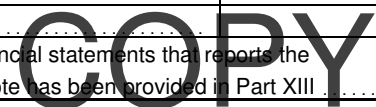
**Part X Other Liabilities.**

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

(a) Description of liability	(b) Book value
<b>1.</b> (1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	

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

**2.** Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under 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.

<b>1</b>	Total revenue, gains, and other support per audited financial statements		<b>1</b>	3,145,292
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>		
<b>b</b>	Donated services and use of facilities	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	59,088	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	59,088
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	3,086,204
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)		<b>5</b>	3,086,204

**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.

<b>1</b>	Total expenses and losses per audited financial statements		<b>1</b>	2,841,864
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities	<b>2a</b>		
<b>b</b>	Prior year adjustments	<b>2b</b>		
<b>c</b>	Other losses	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	59,088	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	59,088
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	2,782,776
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)		<b>5</b>	2,782,776

**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 X – FIN 48 FOOTNOTE**

BOYS & GIRLS CLUBS OF THE GREATER SANTIAM IS A VOLUNTARY HEALTH AND WELFARE ORGANIZATION AND IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THIS TAX-EXEMPT STATUS CAN BE REVOKED BY THE INTERNAL REVENUE SERVICE AS A RESULT OF DIRECT VIOLATIONS OF LAWS AND REGULATIONS GOVERNING 501(C)(3) ORGANIZATIONS. THE CLUB HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION UNDER 509(A)(2) OF THE INTERNAL REVENUE CODE AND QUALIFIES FOR THE 50% CHARITABLE CONTRIBUTION DEDUCTION FOR INDIVIDUAL DONORS. THE CLUB'S OPERATING POLICY REQUIRES STRICT ADHERENCE TO THESE LAWS AND REGULATIONS IN ORDER TO MAINTAIN ITS TAX-EXEMPT STATUS. MANAGEMENT'S POLICY IS TO ENGAGE IN ACTIVITIES RELATED TO THEIR EXEMPT PURPOSE. MANAGEMENT EVALUATES TAX POSITIONS ANNUALLY BASED

**COPY**  
Schedule D (Form 990) 2022



Part XIII Supplemental Information (continued)

ON THE GUIDANCE IN FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS CODIFICATION (ASC) 740. FASB ASC 740 PRESCRIBES A COMPREHENSIVE MODEL FOR RECOGNIZING, MEASURING, PRESENTING, AND DISCLOSING, IN THE FINANCIAL STATEMENTS, TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN ON A TAX RETURN, INCLUDING POSITIONS THAT THE CLUB IS EXEMPT FROM INCOME TAXES OR NOT SUBJECT TO INCOME TAXES ON UNRELATED BUSINESS INCOME. THE CLUB PRESENTLY DISCLOSES OR RECOGNIZES INCOME TAX POSITIONS BASED ON MANAGEMENT'S ESTIMATE OF WHETHER IT IS REASONABLY POSSIBLE OR PROBABLE, RESPECTIVELY, THAT A LIABILITY HAS BEEN INCURRED FOR UNRECOGNIZED INCOME TAX BENEFITS. GENERALLY, THE CLUB IS SUBJECT TO EXAMINATION BY U.S. FEDERAL AND STATE INCOME TAX AUTHORITIES FOR THREE YEARS FROM THE FILING OF A TAX RETURN.

THE CLUB MAY BE SUBJECT TO PENALTIES AND INTEREST BY U.S. FEDERAL AND STATE INCOME TAX AUTHORITIES FOR DELINQUENT TAX RETURNS FOR THE YEARS.

PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER  
FUNDRAISING EXPENSES \$ 59,088

PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER  
FUNDRAISING EXPENSES \$ 59,088

COPY Schedule D (Form 990) 2022

**SCHEDULE G  
(Form 990)**

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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2022**

Open to Public Inspection

Name of the organization

BOYS & GIRLS CLUBS OF THE  
GREATER SANTIAM

Employer identification number

52-1043668

**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							
<b>Total</b>							

**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.

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**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>AUCTION/OTHER</u> (event type)	_____ (event type)	<u>NONE</u> (total number)	(add col. (a) through col. (c))
Revenue	1	Gross receipts	378,723		378,723
	2	Less: Contributions			
	3	Gross income (line 1 minus line 2)	378,723		378,723
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	59,088		59,088
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Subtract line 10 from line 3, column (d)				319,635

**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: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**COPY**

11 Does the organization conduct gaming activities with nonmembers?  Yes  No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No

13 Indicate the percentage of gaming activity conducted in:

a	The organization's facility	13a	%
b	An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name .....

Address .....

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No

b If "Yes," enter the amount of gaming revenue received by the organization \$ ..... and the amount of gaming revenue retained by the third party \$ .....

c If "Yes," enter name and address of the third party:

Name .....

Address .....

16 Gaming manager information:

Name .....

Gaming manager compensation \$ .....

Description of services provided .....

Director/officer  Employee  Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ .....

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

COPY

**SCHEDULE O  
(Form 990)**

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 Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2022**

**Open to Public  
Inspection**

Name of the organization	BOYS & GIRLS CLUBS OF THE GREATER SANTIAM	Employer identification number 52-1043668
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FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990  
THE EXECUTIVE DIRECTOR AND BOARD MEMBERS REVIEW THE DOCUMENTS BEFORE  
SUBMISSION TO THE APPLICABLE REPORTING AUTHORITIES.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY  
ANNUALLY, EACH BOARD MEMBER SIGNS A STATEMENT REGARDING ANY CONFLICTS OF  
INTEREST.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION  
DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

FUNDRAISING EXPENSES	\$ 59,088
FUNDRAISING EXPENSES	\$ -59,088

**COPY**

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury Internal Revenue Service

Attach to your tax return.

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

Name(s) shown on return BOYS & GIRLS CLUBS OF THE GREATER SANTIAM Identifying number 52-1043668

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.

Table with 13 rows for Part I, including fields for maximum amount, total cost, threshold cost, reduction in limitation, and dollar limitation.

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.)

Table with 3 rows for Part II, including special depreciation allowance, property subject to election, and other depreciation.

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

Section A

Table with 2 rows for Section A, including MACRS deductions for assets placed in service before 2022 and a checkbox for general asset accounts.

Section B—Assets Placed in Service During 2022 Tax Year Using the General Depreciation System

Table with 7 columns (a-g) and 9 rows (19a-i) for Section B, detailing property classification, month/year, basis, recovery period, convention, method, and depreciation deduction.

Section C—Assets Placed in Service During 2022 Tax Year Using the Alternative Depreciation System

Table with 7 columns (a-g) and 4 rows (20a-d) for Section C, detailing class life, month/year, basis, recovery period, convention, method, and depreciation deduction.

Part IV Summary (See instructions.)

Table with 3 rows for Part IV, including listed property amount, total depreciation, and section 263A costs.

For Paperwork Reduction Act Notice, see separate instructions.



**Part V Listed Property** (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)**

<b>24a</b> Do you have evidence to support the business/investment use claimed?				<b>Yes</b>	<b>No</b>	<b>24b</b> If "Yes," is the evidence written?			<b>Yes</b>	<b>No</b>
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)		(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost	
<b>25</b> Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions							<b>25</b>			
<b>26</b> Property used more than 50% in a qualified business use:										
		%								
		%								
<b>27</b> Property used 50% or less in a qualified business use:										
		%					S/L-			
		%					S/L-			
<b>28</b> Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							<b>28</b>			
<b>29</b> Add amounts in column (i), line 26. Enter here and on line 7, page 1									<b>29</b>	

**Section B—Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year ( <b>don't</b> include commuting miles)	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

**Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **aren't** more than 5% owners or related persons. See instructions.

<b>37</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	<b>Yes</b>	<b>No</b>
<b>38</b> Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
<b>39</b> Do you treat all use of vehicles by employees as personal use?		
<b>40</b> Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
<b>41</b> Do you meet the requirements concerning qualified automobile demonstration use? See instructions		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
<b>42</b> Amortization of costs that begins during your 2022 tax year (see instructions):					
<b>43</b> Amortization of costs that began before your 2022 tax year					<b>43</b>
<b>44 Total.</b> Add amounts in column (f). See the instructions for where to report					<b>44</b>

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# Federal Asset Report

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Sec Bonus	Basis for Depr	PerConv	Meth	Prior	Current
<b>Other Depreciation:</b>											
4	Pool Table	4/28/90	800				800	5	MO S/L	800	0
5	Game Table	6/27/90	109				109	5	MO S/L	109	0
7	Misc Equipment	12/28/90	270				270	5	MO S/L	270	0
8	Volleyball Standards	6/24/91	5,686				5,686	5	MO S/L	5,686	0
9	Scoreboards	7/05/91	6,405				6,405	5	MO S/L	6,405	0
10	Sign & Lettering	11/14/91	453				453	5	MO S/L	453	0
11	Curtain (Gym)	12/01/91	6,154				6,154	5	MO S/L	6,154	0
12	Bleachers	12/19/91	3,266				3,266	5	MO S/L	3,266	0
13	Cart	1/15/92	128				128	5	MO S/L	128	0
14	Dictionary Stand	6/30/92	150				150	5	MO S/L	150	0
15	40" Round Pedestal Table	6/30/92	200				200	5	MO S/L	200	0
16	Shelving	6/30/92	800				800	5	MO S/L	800	0
17	Stacking Chairs (20)	6/30/92	475				475	5	MO S/L	475	0
18	Paper Tower	6/30/92	200				200	5	MO S/L	200	0
19	Drill	9/10/92	229				229	5	MO S/L	229	0
20	John Deere Gator	5/01/98	5,275				5,275	7	MO S/L	5,275	0
21	2 Frigidaire Ranges	9/01/06	3,668				3,668	10	MO S/L	3,668	0
22	Desk	2/09/07	1,582				1,582	10	MO S/L	1,582	0
23	20 Round Tables	4/02/07	2,570				2,570	10	MO S/L	2,470	0
24	20 Round Tables	8/09/07	2,427				2,427	10	MO S/L	2,327	0
25	Hammer Utility Trailer	9/01/08	1,500				1,500	7	MO S/L	1,500	0
26	Ping Pong Table	2/04/09	1,250				1,250	10	MO S/L	1,250	0
27	Mobile BBQ Unit	6/10/09	5,261				5,261	10	MO S/L	5,261	0
28	Video Equipment-Teen Center	12/16/10	2,050				2,050	7	MO S/L	2,050	0
29	Tech Chairs	6/21/13	4,017				4,017	7	MO S/L	4,017	0
30	MPR Chairs	6/21/13	5,130				5,130	7	MO S/L	5,130	0
31	Tables	9/04/13	3,986				3,986	7	MO S/L	3,986	0
32	Dishwasher	9/10/14	5,617				5,617	5	MO S/L	5,617	0
33	Turf Home Plate & Pitching Mound	4/19/16	5,000				5,000	5	MO S/L	5,000	0
34	Tables	1/31/17	8,817				8,817	7	MO S/L	6,823	1,260
35	Electo-Mech Scoreboard	3/02/17	21,000				21,000	7	MO S/L	16,000	3,000
39	Overhead Projector Chart (39" H)	2/12/97	162				162	5	MO S/L	162	0
42	Kid Trax Software	5/30/07	6,646				6,646	7	MO S/L	6,646	0
43	Donor Software	5/12/08	5,640				5,640	5	MO S/L	5,640	0
44	Office Work Station	1/22/09	6,600				6,600	15	MO S/L	5,940	440
45	Game Desk	2/18/09	2,080				2,080	15	MO S/L	1,862	138
46	1989 Building Construction	7/01/89	4,745				4,745	39	MO S/L	4,021	122
47	1990 Building Construction	7/01/90	95,126				95,126	39	MO S/L	78,050	2,439
48	1991 Building Construction	7/01/91	649,509				649,509	39	MO S/L	516,275	16,654
49	1992 Building Construction	7/01/92	318,872				318,872	39	MO S/L	244,942	8,176
50	1993 Building Construction	6/30/93	7,956				7,956	39	MO S/L	5,933	204
51	1993 Building Construction	6/30/93	6,270				6,270	39	MO S/L	4,680	161
52	Heat Pump	2/22/01	2,650				2,650	15	MO S/L	2,650	0
53	Carpet and Vinyl Flooring	8/30/05	20,425				20,425	15	MO S/L	20,425	0
54	2 Heat Pumps	7/15/06	8,562				8,562	15	MO S/L	8,562	0
55	Building-JC Hall	12/04/06	65,000				65,000	40	MO S/L	25,324	1,625
56	Improvements-JC BLDG	8/31/07	8,365				8,365	40	MO S/L	3,116	209
57	Flooring	6/03/07	8,926				8,926	15	MO S/L	5,405	595
58	Locker Room Improvements	10/16/13	27,500				27,500	15	MO S/L	15,889	1,833
59	Heat Pump	5/23/14	2,250				2,250	15	MO S/L	1,213	150
60	Carpet	8/11/16	3,279				3,279	5	MO S/L	3,279	0
61	Land	7/01/90	3,000				3,000	0	-- Land	0	0
62	Land	7/01/92	23,662				23,662	0	-- Land	0	0
63	Land	7/01/92	85,400				85,400	0	-- Land	0	0
64	1.3 acres from city	6/01/02	126,100				126,100	7	-- Land	0	0
65	Land-JC Hall	12/04/06	124,000				124,000	7	-- Land	0	0
66	1991 Land Improvements	7/01/91	460				460	15	MO S/L	460	0
67	1992 Land Improvements	7/01/92	40,362				40,362	15	MO S/L	40,362	0
68	1993 Land Improvements	2/03/93	809				809	15	MO S/L	809	0
69	Landscaping	3/16/93	386				386	15	MO S/L	386	0
70	Backyard Project-landscaping	8/31/03	11,992				11,992	25	MO S/L	9,077	480
71	Batting Cage Lighting	3/29/17	2,000				2,000	7	MO S/L	1,500	286
72	2002 GMC Sierra	4/10/14	5,000				5,000	5	MO S/L	5,000	0
74	Snack bar and restroom	3/01/01	5,000				5,000	39	MO S/L	2,856	128
75	Equipment storage bldg	3/01/01	5,000				5,000	39	MO S/L	2,856	128
76	Storage Building	6/28/12	1,500				1,500	39	MO S/L	387	38
77	RJP Fencing	9/11/13	17,415				17,415	15	MO S/L	10,256	1,161
78	Chairs	7/01/93	268				268	7	MO S/L	268	0
79	Popcorn Machine	7/01/93	225				225	5	MO S/L	225	0
80	Stereo	7/01/94	340				340	5	MO S/L	340	0

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# Federal Asset Report

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
81	Reader Sign	10/20/98	232			232	5 MO S/L	232	0
82	Cash register	6/03/99	190			190	5 MO S/L	190	0
83	Chairs for jamboree	8/03/99	439			439	5 MO S/L	439	0
84	Bases (5 per field)	3/01/01	400			400	5 MO S/L	400	0
85	Bases at high school	3/01/01	160			160	5 MO S/L	160	0
86	Bleachers (10 sets)	3/01/01	745			745	5 MO S/L	745	0
87	Fence	3/01/01	2,103			2,103	5 MO S/L	2,103	0
88	Batting cages	3/01/01	3,633			3,633	5 MO S/L	3,633	0
89	Refridgerator	3/01/01	100			100	5 MO S/L	100	0
90	Cash register	3/01/01	225			225	5 MO S/L	225	0
91	Ice Machine	3/01/01	2,330			2,330	5 MO S/L	2,330	0
92	Pitching machine	3/01/01	100			100	5 MO S/L	100	0
93	Pitching machine	3/01/01	150			150	5 MO S/L	150	0
94	Kidtrax/Moneytrax	6/22/07	3,350			3,350	5 MO S/L	3,350	0
95	Backstop	12/13/12	3,450			3,450	5 MO S/L	3,450	0
96	Refridgerator	6/19/14	1,339			1,339	5 MO S/L	1,339	0
97	Back Yard Project 03/04	10/01/03	7,617			7,617	25 MO S/L	5,716	304
98	Turf at JV Field	9/27/17	6,950			6,950	5 MO S/L	6,603	347
99	Mower	5/15/18	11,013			11,013	5 MO S/L	9,178	1,835
100	Telephone System - Ring Central	12/24/20	5,807			5,807	7 MO S/L	1,244	830
101	New Flooring - Direct Flooring	6/28/21	9,419			9,419	15 MO S/L	628	628
102	HVAC - CIP	6/30/21	13,720			13,720	0 -- Memo	0	0
Sold/Scrapped: 7/01/22									
103	Solar System	11/06/21	21,834			21,834	30 MO S/L	485	728
104	HVAC - Complete	5/25/22	92,811			92,811	20 MO S/L	387	4,640
105	Playstructure	1/03/23	81,192			81,192	10 MO S/L	0	4,060
106	Keyscan Access Control System	11/01/21	5,990			5,990	5 MO S/L	799	1,198
107	Parking lot Lights	5/31/23	8,952			8,952	10 MO S/L	0	75
<b>Total Other Depreciation</b>			<u>2,092,208</u>			<u>2,092,208</u>		<u>1,176,063</u>	<u>53,872</u>
<b>Total ACRS and Other Depreciation</b>			<u>2,092,208</u>			<u>2,092,208</u>		<u>1,176,063</u>	<u>53,872</u>
<b>Amortization:</b>									
73	Loan Fees	1/01/12	<u>4,600</u>			<u>4,600</u>	20 MO Amort	<u>2,415</u>	<u>230</u>
			<u>4,600</u>			<u>4,600</u>		<u>2,415</u>	<u>230</u>
<b>Grand Totals</b>			2,096,808			2,096,808		1,178,478	54,102
<b>Less: Dispositions and Transfers</b>			13,720			13,720		0	0
<b>Less: Start-up/Org Expense</b>			0			0		0	0
<b>Net Grand Totals</b>			<u>2,083,088</u>			<u>2,083,088</u>		<u>1,178,478</u>	<u>54,102</u>

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# Depreciation Adjustment Report

## All Business Activities

AMT  
Adjustments/  
Preferences

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

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# Future Depreciation Report    FYE: 6/30/24

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
<b>Other Depreciation:</b>					
4	Pool Table	4/28/90	800	0	0
5	Game Table	6/27/90	109	0	0
7	Misc Equipment	12/28/90	270	0	0
8	Volleyball Standards	6/24/91	5,686	0	0
9	Scoreboards	7/05/91	6,405	0	0
10	Sign & Lettering	11/14/91	453	0	0
11	Curtain (Gym)	12/01/91	6,154	0	0
12	Bleachers	12/19/91	3,266	0	0
13	Cart	1/15/92	128	0	0
14	Dictionary Stand	6/30/92	150	0	0
15	40" Round Pedestal Table	6/30/92	200	0	0
16	Shelving	6/30/92	800	0	0
17	Stacking Chairs (20)	6/30/92	475	0	0
18	Paper Tower	6/30/92	200	0	0
19	Drill	9/10/92	229	0	0
20	John Deere Gator	5/01/98	5,275	0	0
21	2 Frigidaire Ranges	9/01/06	3,668	0	0
22	Desk	2/09/07	1,582	0	0
23	20 Round Tables	4/02/07	2,570	0	0
24	20 Round Tables	8/09/07	2,427	0	0
25	Hammer Utility Trailer	9/01/08	1,500	0	0
26	Ping Pong Table	2/04/09	1,250	0	0
27	Mobile BBQ Unit	6/10/09	5,261	0	0
28	Video Equipment-Teen Center	12/16/10	2,050	0	0
29	Tech Chairs	6/21/13	4,017	0	0
30	MPR Chairs	6/21/13	5,130	0	0
31	Tables	9/04/13	3,986	0	0
32	Dishwasher	9/10/14	5,617	0	0
33	Turf Home Plate & Pitching Mound	4/19/16	5,000	0	0
34	Tables	1/31/17	8,817	734	0
35	Electo-Mech Scoreboard	3/02/17	21,000	2,000	0
39	Overhead Projector Chart (39" H)	2/12/97	162	0	0
42	Kid Trax Software	5/30/07	6,646	0	0
43	Donor Software	5/12/08	5,640	0	0
44	Office Work Station	1/22/09	6,600	220	0
45	Game Desk	2/18/09	2,080	80	0
46	1989 Building Construction	7/01/89	4,745	121	0
47	1990 Building Construction	7/01/90	95,126	2,439	0
48	1991 Building Construction	7/01/91	649,509	16,654	0
49	1992 Building Construction	7/01/92	318,872	8,176	0
50	1993 Building Construction	6/30/93	7,956	204	0
51	1993 Building Construction	6/30/93	6,270	161	0
52	Heat Pump	2/22/01	2,650	0	0
53	Carpet and Vinyl Flooring	8/30/05	20,425	0	0
54	2 Heat Pumps	7/15/06	8,562	0	0
55	Building-JC Hall	12/04/06	65,000	1,625	0
56	Improvements-JC BLDG	8/31/07	8,365	209	0
57	Flooring	6/03/07	8,926	595	0
58	Locker Room Improvements	10/16/13	27,500	1,833	0
59	Heat Pump	5/23/14	2,250	150	0
60	Carpet	8/11/16	3,279	0	0
61	Land	7/01/90	3,000	0	0
62	Land	7/01/92	23,662	0	0
63	Land	7/01/92	85,400	0	0
64	1.3 acres from city	6/01/02	126,100	0	0
65	Land-JC Hall	12/04/06	124,000	0	0
66	1991 Land Improvements	7/01/91	460	0	0
67	1992 Land Improvements	7/01/92	40,362	0	0
68	1993 Land Improvements	2/03/93	809	0	0
69	Landscaping	3/16/93	386	0	0
70	Backyard Project-landscaping	8/31/03	11,992	480	0
71	Batting Cage Lighting	3/29/17	2,000	214	0
72	2002 GMC Sierra	4/10/14	5,000	0	0
74	Snack bar and restroom	3/01/01	5,000	128	0
75	Equipment storage bldg	3/01/01	5,000	128	0
76	Storage Building	6/28/12	1,500	39	0
77	RJP Fencing	9/11/13	17,415	1,161	0
78	Chairs	7/01/93	268	0	0

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# Future Depreciation Report    FYE: 6/30/24

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
79	Popcorn Machine	7/01/93	225	0	0
80	Stereo	7/01/94	340	0	0
81	Reader Sign	10/20/98	232	0	0
82	Cash register	6/03/99	190	0	0
83	Chairs for jamboree	8/03/99	439	0	0
84	Bases (5 per field)	3/01/01	400	0	0
85	Bases at high school	3/01/01	160	0	0
86	Bleachers (10 sets)	3/01/01	745	0	0
87	Fence	3/01/01	2,103	0	0
88	Batting cages	3/01/01	3,633	0	0
89	Refridgerator	3/01/01	100	0	0
90	Cash register	3/01/01	225	0	0
91	Ice Machine	3/01/01	2,330	0	0
92	Pitching machine	3/01/01	100	0	0
93	Pitching machine	3/01/01	150	0	0
94	Kidtrax/Moneytrax	6/22/07	3,350	0	0
95	Backstop	12/13/12	3,450	0	0
96	Refridgerator	6/19/14	1,339	0	0
97	Back Yard Project 03/04	10/01/03	7,617	305	0
98	Turf at JV Field	9/27/17	6,950	0	0
99	Mower	5/15/18	11,013	0	0
100	Telephone System - Ring Central	12/24/20	5,807	830	0
101	New Flooring - Direct Flooring	6/28/21	9,419	628	0
103	Solar System	11/06/21	21,834	728	0
104	HVAC - Complete	5/25/22	92,811	4,641	0
105	Playstructure	1/03/23	81,192	8,119	0
106	Keyscan Access Control System	11/01/21	5,990	1,198	0
107	Parking lot Lights	5/31/23	8,952	895	0
<b>Total Other Depreciation</b>			<u>2,078,488</u>	<u>54,695</u>	<u>0</u>
<b>Total ACRS and Other Depreciation</b>			<u>2,078,488</u>	<u>54,695</u>	<u>0</u>
<b>Amortization:</b>					
73	Loan Fees	1/01/12	4,600	230	0
			<u>4,600</u>	<u>230</u>	<u>0</u>
<b>Grand Totals</b>			<u>2,083,088</u>	<u>54,925</u>	<u>0</u>

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Form **990****Two Year Comparison Report****2021 & 2022**

For calendar year 2022, or tax year beginning 07/01/22, ending 06/30/23

Name

Taxpayer Identification Number

BOYS & GIRLS CLUBS OF THE  
GREATER SANTIAM

52-1043668

		2021	2022	Differences
<b>Revenue</b>	1. Contributions, gifts, grants	375,778	682,633	306,855
	2. Membership dues and assessments			
	3. Government contributions and grants	897,023	926,427	29,404
	4. Program service revenue	1,045,930	1,113,169	67,239
	5. Investment income	21,835	6,058	-15,777
	6. Proceeds from tax exempt bonds			
	7. Net gain or (loss) from sale of assets other than inventory			
	8. Net income or (loss) from fundraising events	186,567	319,635	133,068
	9. Net income or (loss) from gaming			
	10. Net gain or (loss) on sales of inventory			
	11. Other revenue	31,897	38,282	6,385
	<b>12. Total revenue.</b> Add lines 1 through 11	<b>2,559,030</b>	<b>3,086,204</b>	<b>527,174</b>
<b>Expenses</b>	13. Grants and similar amounts paid			
	14. Benefits paid to or for members			
	15. Compensation of officers, directors, trustees, etc.			
	16. Salaries, other compensation, and employee benefits	1,516,337	1,813,574	297,237
	17. Professional fundraising fees			
	18. Other professional fees	26,000	5,000	-21,000
	19. Occupancy, rent, utilities, and maintenance	64,097	74,366	10,269
	20. Depreciation and Depletion	46,541	54,102	7,561
	21. Other expenses	766,405	835,734	69,329
	<b>22. Total expenses.</b> Add lines 13 through 21	<b>2,419,380</b>	<b>2,782,776</b>	<b>363,396</b>
	<b>23. Excess or (Deficit).</b> Subtract line 22 from line 12	<b>139,650</b>	<b>303,428</b>	<b>163,778</b>
<b>Other Information</b>	24. Total exempt revenue	2,559,030	3,086,204	527,174
	25. Total unrelated revenue			
	26. Total excludable revenue	1,099,662	1,157,509	57,847
	27. Total assets	3,221,323	3,619,895	398,572
	28. Total liabilities	377,739	295,288	-82,451
	29. Retained earnings	2,843,584	3,324,607	481,023
	30. Number of voting members of governing body	11	14	
31. Number of independent voting members of governing body	11	14		
32. Number of employees	124	124		
33. Number of volunteers	400	300		

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Name

BOYS & GIRLS CLUBS OF THE  
GREATER SANTIAM

Taxpayer Identification Number

52-1043668

		2022	2023	Differences
<b>Revenue</b>	1. Contributions, gifts, grants	682,633	682,633	
	2. Membership dues and assessments			
	3. Government contributions and grants	926,427	926,427	
	4. Program service revenue	1,113,169	1,113,169	
	5. Investment income	6,058	6,058	
	6. Proceeds from tax exempt bonds			
	7. Net gain or (loss) from sale of assets other than inventory			
	8. Net income or (loss) from fundraising events	319,635	319,635	
	9. Net income or (loss) from gaming			
	10. Net gain or (loss) on sales of inventory			
	11. Other revenue	38,282	38,282	
	<b>12. Total revenue.</b> Add lines 1 through 11	<b>3,086,204</b>	<b>3,086,204</b>	
<b>Expenses</b>	13. Grants and similar amounts paid			
	14. Benefits paid to or for members			
	15. Compensation of officers, directors, trustees, etc.			
	16. Salaries, other compensation, and employee benefits	1,813,574	1,813,574	
	17. Professional fundraising fees			
	18. Other professional fees	5,000	5,000	
	19. Occupancy, rent, utilities, and maintenance	74,366	74,366	
	20. Depreciation and Depletion	54,102	54,102	
	21. Other expenses	835,734	835,734	
	<b>22. Total expenses.</b> Add lines 13 through 21	<b>2,782,776</b>	<b>2,782,776</b>	
	<b>23. Excess or (Deficit).</b> Subtract line 22 from line 12	<b>303,428</b>	<b>303,428</b>	
<b>Other</b>	24. Total exempt revenue	3,086,204	3,086,204	
	25. Total unrelated revenue			
	26. Total excludable revenue	1,157,509	1,157,509	
	27. Total assets	3,619,895	3,619,895	
	28. Total liabilities	295,288	295,288	
	29. Retained earnings	3,324,607	3,324,607	
	30. Number of voting members of governing body	14	14	
	31. Number of independent voting members of governing body	14	14	
	32. Number of employees	124	124	
	33. Number of volunteers	300	300	

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Form **990****Tax Return History****2022**Name **BOYS & GIRLS CLUBS OF THE  
GREATER SANTIAM**Employer Identification Number  
52-1043668

	2018	2019	2020	2021	2022	2023
Contributions, gifts, grants .....	707,948	1,331,228	3,454,643	1,272,801	1,609,060	1,609,060
Membership dues .....	47,863					
Program service revenue .....	774,752	694,144	598,801	1,045,930	1,113,169	1,113,169
Capital gain or loss .....			27,550			
Investment income .....	9,262	1,176	12,138	21,835	6,058	6,058
Fundraising revenue (income/loss) .....	488,340	330,974	135,290	186,567	319,635	319,635
Gaming revenue (income/loss) .....						
Other revenue .....	136			31,897	38,282	38,282
<b>Total revenue</b> .....	<b>2,028,301</b>	<b>2,357,522</b>	<b>4,228,422</b>	<b>2,559,030</b>	<b>3,086,204</b>	<b>3,086,204</b>
Grants and similar amounts paid .....						
Benefits paid to or for members .....						
Compensation of officers, etc. ....	85,323	87,278	114,140			
Other compensation .....	1,282,772	1,447,808	1,216,086	1,516,337	1,813,574	1,813,574
Professional fees .....	12,518	115	25,000	26,000	5,000	5,000
Occupancy costs .....			70,726	64,097	74,366	74,366
Depreciation and depletion .....	51,766	49,007	45,936	46,541	54,102	54,102
Other expenses .....	722,170	625,776	562,666	766,405	835,734	835,734
<b>Total expenses</b> .....	<b>2,154,549</b>	<b>2,209,984</b>	<b>2,034,554</b>	<b>2,419,380</b>	<b>2,782,776</b>	<b>2,782,776</b>
<b>Excess or (Deficit)</b> .....	<b>-126,248</b>	<b>147,538</b>	<b>2,193,868</b>	<b>139,650</b>	<b>303,428</b>	<b>303,428</b>
Total exempt revenue .....	2,028,301	2,357,522	4,228,422	2,559,030	3,086,204	3,086,204
Total unrelated revenue .....						
Total excludable revenue .....	784,150	695,320	638,489	1,099,662	1,157,509	1,157,509
Total Assets .....	1,021,404	1,542,222	3,289,919	3,221,323	3,619,895	3,619,895
Total Liabilities .....	631,625	1,008,901	312,236	377,739	295,288	295,288
Net Fund Balances .....	389,779	533,321	2,977,683	2,843,584	3,324,607	3,324,607

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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>
	\$ 6,058		14			
TOTAL	<u>\$ 6,058</u>					

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## Federal Statements

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

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management &amp; General</u>	<u>Fund Raising</u>
CONTRACT SERVICES	\$ 56,987	\$ 56,067	\$ 920	\$
BANK FEES	52,774	52,774		
OFFICIALS	33,261	33,261		
SMALL EQUIPMENT	23,567	4,655	18,912	
CONFERENCES	8,137	8,044	63	30
TOURNAMENT FEES	6,873	6,873		
POSTAGE	316	316		
TOTAL	<u>\$ 181,915</u>	<u>\$ 161,990</u>	<u>\$ 19,895</u>	<u>\$ 30</u>

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Accuity, LLC  
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**Boys & Girls Clubs of the  
Greater Santiam  
305 S 5th St.  
Lebanon, OR 97355**  
|||||