Form **990**

Return of Organization Exempt From Income Tax

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

2015

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Α	For th	ne 2015 calend	lar year, or t	tax year begin	ning	(07-01	, 2015, and er	nding		06-	-30 , 20 16
В	Check is	f applicable:	C Name of org	ganization BOYS	& GIRLS CLUI	OF HERNAN	NDO CO	UNT				Employer identification no.
	Address	s change	Doing busin	ness as								59-3550575
	Name c	hange	Number and	d street (or P.O. bo	x if mail is not delivered to	street address)			Room/s	uite	E	E Telephone number
П	Initial re	eturn	5404	APPLEGATE	DRIVE							(352)666-0068
П	Final re	turn/terminated		1,360,337								
Π		ed return		G HILL, F	, country, and ZIP or foreig L. 34606	, ,					١,	G Gross receipts\$
П		tion pending		address of principa		KELLY						
	прриос	por.ag		AS C ABOVI					H(a)	Is this a gre subordinate	oup retu	urn for Yes X No
_	Tay-aya	empt status:	501(c)(3)	501(c) () (insert no.)	4947(a)(1) or	527		H(b)			es included? Yes No
		e: ► N/A	, 301(0)(3)) 4 (insert no.)	_ +3+1(a)(1) 01	32 <i>1</i>		H(c)	If "No	," attach	h a list. (see instructions)
			Corporation	Trust Ass	ociation Other ►		I Ve	ear of formation: 1				I domicile: FL
	art I	Summai			GOIGHOIT GENERAL		2 10	our or formation.		III Clate	or regar	r dofficile.
	1		-	nization's miss	ion or most significa	nt activities: 1	DTSADV	ANTAGED YO	ו אידוור	PROGRAI	vis.	
	'	Driving account	no the organ	razadorro rraco	ion or moot orginioa	11. 4011711100.	D I D I I D V	INVIIIODD IV		. ROOKI	10	
ce		-										
Activities & Governance												
ver	2	Check this h	oox ▶ ☐ if th	he organization	n discontinued its op	erations or disno	nsed of m	nore than 25% (of its net	t assets		
တိ	3			Ū	rning body (Part VI,						3	6
∞ ∞	4		_	_	s of the governing b						4	6
ties	_ l _			_	s of the governing b calendar year 2015						5	78
ξį	5				-	• • • • • • • • • • • • • • • • • • •					6	
Ą	6			ers (estimate if	Part VIII, column (C						7a	7
	78				•	, .					7b	0
Φ	'	o Net unrelate	u business u	axable income	from Form 990-T, li	116 34					710	0
		Cantuibti a.a		(Dant) (III - Iin a	46)					Prior Year	4.65	Current Year
	8		_		1h)						,467	
ğ	9	J		•	e 2g)			<u> </u>		990	,145	
Revenue	10		,	,	A), lines 3, 4, and 7d						368	255
œ	1.7				nes 5, 6d, 8c, 9c, 10d			_				0
_	12				must equal Part VIII					1,177	,980	1,360,337
	13				X, column (A), lines	•						0
	14				K, column (A), line 4							0
S	15				benefits (Part IX, c					880	,591	1,038,206
Expenses	16		_		column (A), line 11e							0
×	· _ '		• .		lumn (D), line 25)							
Ш	1.7	•		. , ,	nes 11a-11d, 11f-24e	,					,585	
	18			•	equal Part IX, colun	, ,		_		1,180		
		Revenue les	s expenses.	Subtract line	18 from line 12					(2	,196	(11,717)
sor	uce:							 	Beginning	g of Current		End of Year
sset	20		•	•							,069	
Net Assets or	21			,				 			,065	
$\overline{}$				ices. Subtract	line 21 from line 20					330	,004	313,176
	art II		ire Block		· in all reliant and a second and reliant	achedulas and state		to the best of my lim		and haliat iti	_	
					n, including accompanying er) is based on all informa				iowiedge a	ina bellet, it i	S	
Sig	n		UA KELLY								D-1-	
		Signatu	re of officer								Date	
He	re				IVE DIRECTOR							
		Type or	print name and t	title	I		1.					
_			eparer's name		Preparer's signature		Da	ate		Check	if F	PTIN
Pa			d E Jano	osko CPA						self-employe	ed	P00953428
	epare		>		sko & Associa	ates LLC			Firm's E	IN ►		
Us	e On	ly Firm's address	is ►	11215 Sp	ring Hill Dr				Phone r	no.		
				Spring H	ill FL 34609					3!	52-6	10-4321
May	v the IF	RS discuss this	retum with the	he preparer sh	own above? (see in	structions)						Ⅺ Yes ☐ No

Page 2

Part IV

59-3550575

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," Χ 1 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Χ 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Χ 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 Χ 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, 5 Χ 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 6 Χ 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 7 Χ 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 Χ Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a 9 custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 9 Χ 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 Χ 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," Χ 11a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more Χ 11b 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 Χ 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets Χ 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes." complete Schedule D. Part X 11f Χ 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Χ 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If Χ "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 **14a** Did the organization maintain an office, employees, or agents outside of the United States? 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b Χ 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 15 Χ 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 Χ 16 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) 17 Χ 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Χ 18 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? Χ 19

Part IV

59-3550575

Checklist of Required Schedules (continued)

Yes No Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a 20a **b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Χ 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Χ 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated Χ 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b 24a Χ Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Χ 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 25b Χ 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or 26 Χ 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled Χ entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Χ 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 28b Χ An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) С Χ was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes." complete Schedule M Χ 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 Χ 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 Χ 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," Χ 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X 33 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, Χ 34 Did the organization have a controlled entity within the meaning of section 512(b)(13)? $\dots \dots \dots \dots \dots \dots \dots$ 35a 35a If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 X 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable Χ 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Χ 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 38

Form 990 (2015)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Χ	
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 78			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
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? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		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).			37
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a Eh		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
с 6а	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c		
oa	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	0a		Λ
D	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	OD		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
u	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			
е	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.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	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			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
20	against amounts due or received from them.)	120		
l2a h	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 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		
u	Note. See the instructions for additional information the organization must report on Schedule O.	·Ja		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
~	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

. . 🛚

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response or note to any line in this Part VI

Sec	tion A. Governing Body and Management			
	<u> </u>		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 6			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Χ
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		Χ
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Χ
6	Did the organization have members or stockholders?	6		Χ
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		Χ
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		Χ
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Χ
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Χ
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
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?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
<u></u>	organization's exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed Section \$404 required on a graphication to make its Forms 4000 (or 4004 if any libertyle) 900 and 900 T (Section F04(a)(2)) and 900 T (Section F04(a)(2)(2)) and 900 T (Section F04(a)(2)(2)(2)(2)(2)(2)(2)(2)(2)(2)(2)(2)(2)			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 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.			
40	Own website			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
20	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:			
	JOSHUA KELLY (352)666-0068, 5404 APPLEGATE DRIVE, SPRING HILL, FL 34606			

-orm	990	(201	15

59		75

Page 7

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

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

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

- **1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

		(C)								
(A)	(B)	(-1			sition			(D)	(E)	(F)
Name and Title	Average	١ ،				han one s both ar	n	Reportable	Reportable	Estimated
	hours per week (list any	offic	er an	d a di	rector	/trustee))	compensation from	compensation from related	amount of other
	hours for	0 =	=	0		οд	П	the	organizations	compensation
	related organizations	ndivid r dire	nstitu	Officer	ey er	ighe: mplo	Forme	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
·	below dotted line)	ual tr	tional		Key employe	st cor yee	1			and related
	iiile)	Individual trustee or director	Institutional trustee		ee/	Highest compensated employee				organizations
			ee			sated				
(1)	40.00									
(1) JOSHUA KELLY CHIEF EXECUTIVE OFFICER	40.00	X		X				53,746	0	0
(2) 3377 773377	10.00	77						33,740		0
TRESURER		X		X				o	0	0
(3) ANN MCHUGH	5.00							-		
VICE PRESIDENT		X		Х				o	0	0
(4) NOREEN ST JEAN	10.00									
PRESIDENT		X		X				O	0	0
(5) PHIL LAKIN	3.00									
DIRECTOR		X						0	0	0
(6) JAMES TERRY	5.00	X		X						
SECRETARY (7) DIANA DODOVICU	F 00	Λ		Λ				0	0	0
(7) DIANA POPOVICH DIRECTOR	5.00_	X						o	0	0
(8)		71								
Σζ										
(9)										
(10)										
<u>(11)</u>										
(12)										
<u> </u>										
(13)										
(14)										

Form **990** (2015)

Part '	VII Section A. Officers, Directors, Trustees,	stees, 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)	box, ι	unless r and a	perso	ion re tha on is b	one ooth an rustee) Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	com f orç ar	(F) stimated mount of other npensatio from the ganization d related anization	on n d
<u>(15)</u>													
<u>(16)</u>													
<u>(17)</u>													
<u>(18)</u>													
<u>(19)</u>													
(20)													
<u>(21)</u>													
(22)													
(23)													
(24)													
(25)													
	Sub-total							•					
	Total (add lines 1b and 1c)								53,746 than \$100,000 of				0
	reportable compensation from the organization									0		Yes	No
3	Did the organization list any former officer, director,			-		-							v
4	employee on line 1a? If "Yes," complete Schedule J For any individual listed on line 1a, is the sum of rep								tion from the		3		Х
	organization and related organizations greater than			con"	nplet	e So	chedu	le J f	or such				37
5	individual			· · · ny ur	· · · nrela	ted	· · · orgar	· ·	on or individual		4		X
	for services rendered to the organization? If "Yes,"			-			-				5		Χ
Section 1	on B. Independent Contractors Complete this table for your five highest compensate	d independe	nt conti	racto	re th	at re	acoive	d ma	ore than \$100,000	of			
	compensation from the organization. Report comper year.												
	(A) Name and business address								(B) Description of	services		(C) pensation	n
2	Total number of independent contractors (including received more than \$100,000 of compensation from			ose I ►	istec	abo	ove) v	vho					

Part VIII

State	ment	of R	ever	ILI6

		Check if Schedule O contains a respon	se or no	ote to any line in thi	s Part VIII			<u> </u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<u>ω</u> ω	1a	Federated campaigns	1a					
Grants mounts	b	Membership dues	1b					
g E	C	Fundraising events	1c	9,789				
fts, ir A	d	Related organizations	1d	27702				
<u>:</u> ⊡'E	e	Government grants (contributions)	1e	81,380				
Sir	f	All other contributions, gifts, grants,		01,500				
utic her	ļ .	and similar amounts not included above	1f	32,716				
Contributions, Gifts, and Other Similar A	g	Noncash contributions included in lines 1:		32,710				
and	h	Total. Add lines 1a-1f			123,885			
		Totali Add iii oo Ta Ti		Business Code	1237003			
e	2a	REGISTRATION FEES		624410	1,236,197	1,236,197		
Program Service Revenue	b			021120	2,200,20,	1,230,237		
e e	С							
ervi	d							
S E	е							
ogra	f	All other program service revenue						
Ē		Total. Add lines 2a-2f			1,236,197			
		Investment income (including dividends, in			, ,			
	•	and other similar amounts)			255	255		
	4	Income from investment of tax-exempt bor						
	5	Royalties						
		(i) Re		(ii) Personal				
	6a	Gross rents						
	b	Less: rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss)						
		Gross amount from sales of (i) Securi		(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses						
	С	Gain or (loss)						
	d	Net gain or (loss)						
e E	8a	Gross income from fundraising						
Še		events (not including \$9,7	89					
æ		of contributions reported on line 1c).						
Other Revenue		See Part IV, line 18						
Ŏ		Less: direct expenses						
		Net income or (loss) from fundraising ever	nts .	▶				
	9a	Gross income from gaming activities.						
		See Part IV, line 19						
		Less: direct expenses						
	С	Net income or (loss) from gaming activities	3					
	10a	Gross sales of inventory, less						
	١.	returns and allowances						
	l	Less: cost of goods sold						
	С	Net income or (loss) from sales of invento	ry					
	110	Miscellaneous Revenue		Business Code				
	b							
	C							
		All other revenue						
		Total. Add lines 11a-11d						
		Total revenue. See instructions			1,360,337	1,236,452	0	0
					, ,	, , , , , , , , , , , ,		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) (A) Total expenses (B) Do not include amounts reported on lines 6b. 7b. Program service Management and Fundraising 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 2 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Compensation of current officers, directors, 53,746 53,746 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 895,541 773,607 121,934 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 12,044 7,778 4,266 9 10 76,875 63,204 13,671 11 Fees for services (non-employees): b Legal...... 2,980 2,980 4,000 4,000 d Professional fundraising services. See Part IV, line 17 . f Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 12 700 825 125 13 14 11,343 7,716 3,627 15 2,094 16 2,094 17 46 46 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 2,548 1,176 1,372 20 21 22 Depreciation, depletion, and amortization 23,669 23,669 23 50,114 34,789 15,325 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a AUTO 7,947 3,151 4,796 BACKGROUND CHECKS 3,091 2,941 150 C BANK SERVICE CHARGES 260 3,381 3,641 d DUES AND SUBSCRIPTIONS 9,846 9,846 All other expenses 25,376 е 211,704 180,290 6,038 Total functional expenses. Add lines 1 through 24e 25 1,372,054 1,110,197 255,819 6,038 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 \blacktriangleright 🗓 if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X		<u></u> .	<u></u>
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	148,008	1	100,329
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	69,627	4	98,653
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
		organizations (see instructions). Complete Part II of Schedule L		6	
S	7	Notes and loans receivable, net	20,527	7	18,883
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	691	9	4,235
	10a	Land, buildings, and equipment cost or			
		other basis. Complete Part VI of Schedule D 10a 231,084			
	b	Less: accumulated depreciation 10b 101,099	139,216	10c	129,985
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	378,069	16	352,085
	17	Accounts payable and accrued expenses	30,746	17	27,017
	18	Grants payable	17,319	18	11,892
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and			
ig		disqualified persons. Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	48,065	26	38,909
		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🗓 and			
es		complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	330,004	27	313,176
Bai	28	Temporarily restricted net assets		28	
2	29	Permanently restricted net assets		29	
Ē		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and			
s or		complete lines 30 through 34.			
set	30	Capital stock or trust principal, or current funds		30	
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	330,004	33	313,176
	34	Total liabilities and net assets/fund balances	378,069	34	352,085

Pa	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	1,3	360,3	337
2	Total expenses (must equal Part IX, column (A), line 25)	1,3	372,0	054
3	Revenue less expenses. Subtract line 2 from line 1		11,7	717)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		330,0	004
5	Net unrealized gains (losses) on investments			
6	Donated services and use of facilities			
7	Investment expenses			
8	Prior period adjustments		(5,1	L11)
9	Other changes in net assets or fund balances (explain in Schedule O)			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))		313,1	L76
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			. 🗆
			Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
	reviewed on a separate basis, consolidated basis, or both:			
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			
	separate basis, consolidated basis, or both:			
	∑ Separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		7.5	
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
_	Schedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			3.7
	the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	01:		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	000 (2045)
EEA		⊢orm	990 (2	∠U15)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

Employer identification number

BOYS & GIRLS CLUB OF HERNANDO COUNT 59-3550575 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 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross 9 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.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of 11 one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. 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. 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. 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. Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-9 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E) **Total**

59-3550575 P

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

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

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6 Sec	Public support. Subtract line 5 from line 4 tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	(4) = 0	(3) 23:2	(0) 20:0	(4) 2011	(0) 20.0	(.)
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10 .						
12	Gross receipts from related activities, etc. (s	see instructions)				12	
13	First five years. If the Form 990 is for the or organization, check this box and stop here						▶ 🗌
Sec	tion C. Computation of Public Su						
14	Public support percentage for 2015 (line 6, c	column (f) divided l	oy line 11, column	(f))		14	%
15	Public support percentage from 2014 Sched	ule A, Part II, line	14			15	%
16a	33 1/3% support test - 2015. If the organize	ation did not check	the box on line 1	3, and line 14 is 33	1/3% or more, che	ck this	_
	box and stop here. The organization qualified	es as a publicly su	pported organizat	ion			▶ 📙
b	33 1/3% support test - 2014. If the organize				is 33 1/3% or more	9,	
	check this box and stop here. The organiza		. ,	ŭ	• • • • • • • • •		▶ ⊔
17a	10%-facts-and-circumstances test - 2015	•					
	10% or more, and if the organization meets						
	Part VI how the organization meets the "fact		_				. —
	organization						▶ ⊔
b	10%-facts-and-circumstances test - 2014	J		·		ne	
	15 is 10% or more, and if the organization m					oh.	
	Explain in Part VI how the organization mee supported organization			=		-	▶ □
18	Private foundation. If the organization did r						
.0	instructions						▶ □
					· · · · · · · · ·	· · · · · · · ·	<u> </u>

Scriedule A (FOITI 990 01 990-EZ) 2015

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

(Complete only if you checked the box on line 9 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.)

Sec	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	690,329	921,505	1,132,356	1,177,613	1,360,082	5,281,885
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose		-				
3	Gross receipts from activities that are not an unrelated trade or business under section 513 .						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	690,329	921,505	1,132,356	1,177,613	1,360,082	5,281,885
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						5,281,885
Sec	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6	690,329	921,505	1,132,356	1,177,613	1,360,082	5,281,885
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	37	220	164	368	255	1,044
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	37	220	164	368	255	1,044
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	690,366	921,725	1,132,520	1,177,981	1,360,337	5,282,929
14	First five years. If the Form 990 is for the orgonganization, check this box and stop here						▶ □
Sed	ction C. Computation of Public Su	pport Percenta	age				
15	Public support percentage for 2015 (line 8, co	olumn (f) divided by	line 13, column (f))		15	99.98 %
	Public support percentage from 2014 Schedu					16	100.00 %
Sec	ction D. Computation of Investmen	nt Income Perc	centage				
17	Investment income percentage for 2015 (line	10c, column (f) divid	ded by line 13, colu	ımn (f))		17	0.00 %
18	Investment income percentage from 2014 Sci	nedule A, Part III, lir	ne 17			18	0.00 %
	33 1/3% support tests - 2015. If the organiz 17 is not more than 33 1/3%, check this box a 33 1/3% support tests - 2014. If the organiz	and stop here. The	organization qualif	ies as a publicly su	upported organizat	ion	▶ 🏻
	line 18 is not more than 33 1/3%, check this bearing from the organization of the orga	oox and stop here.	The organization q	ualifies as a public	ly supported orgar		▶ □

Part IV Supporting

Supporting Organizations

(Complete only if you checked a box in line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
 - **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- **c** Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **8** Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- **c** Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI**.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
Ju		
3b		
3с		
4a		
4b		
4c		
40		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		
100		

Par	t IV Supporting Organizations (continued)						
11	Has the arganization accounted a gift or contribution from any of the following paragraps?		Yes	No			
	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)						
u	below, the governing body of a supported organization?	11a					
b	A family member of a person described in (a) above?	11b					
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c					
Sect	tion B. Type I Supporting Organizations						
			Yes	No			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to						
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or						
	controlled the organization's activities. If the organization had more than one supported organization,						
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported						
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.						
2	Did the organization operate for the benefit of any supported organization other than the supported						
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part						
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,						
	supervised, or controlled the supporting organization.	2					
Sect	tion C. Type II Supporting Organizations						
			Yes	No			
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors						
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control						
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1					
Sect	tion D. All Type III Supporting Organizations						
	non 2.7 m Typo m cupper mig C. gumanione		Yes	No			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the						
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax						
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the						
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1					
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported						
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how						
	the organization maintained a close and continuous working relationship with the supported organization(s).	2					
3	By reason of the relationship described in (2), did the organization's supported organizations have a						
	significant voice in the organization's investment policies and in directing the use of the organization's						
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's						
	supported organizations played in this regard.	3					
	tion E. Type III Functionally-Integrated Supporting Organizations		iona)				
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instance). The organization satisfied the Activities Test. Complete line 2 below.	sii uci	.10115)	١.			
b							
С		see in:	structi	ions)			
2	Activities Test. Answer (a) and (b) below.		Yes	No			
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of						
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify						
	those supported organizations and explain how these activities directly furthered their exempt purposes,						
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a					
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	_ u					
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the						
	reasons for the organization's position that its supported organization(s) would have engaged in these						
	activities but for the organization's involvement.	2b					
	Parent of Supported Organizations. Answer (a) and (b) below.						
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or						
I-	trustees of each of the supported organizations? Provide details in Part VI .	3a					
Ø	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b					
	5. 10 supported organizations. It is to accomb in the transfer of played by the organization in this regard.						

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Organiza	itions	
1 Check here if the organization satisfied the Integral Part Test as a qualif	fying trust or	Nov. 20, 1970. See i	instructions. All
other Type III non-functionally integrated supporting organizations must	complete S	ections A through E.	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year
•		()	(optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amounts)	unt,		
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-function		ted Type III supportin	g organization (see

instructions). EEA

&	GIRLS	CLUB	OF	HERNANDO	COUNT	59-355	50575
nal	ally Integrated 509(a)(3) Supporting Organizations (continued)						

Pa	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Sec	Section D - Distributions						
1	Amounts paid to supported organizations to accomplish exem	npt purposes					
2	Amounts paid to perform activity that directly furthers exempt	purposes of supported					
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purposes	s of supported organizati	ons				
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI). See instructions.						
7	Total annual distributions. Add lines 1 through 6.						
8	Distributions to attentive supported organizations to which the						
	(provide details in Part VI). See instructions.						
9	Distributable amount for 2015 from Section C, line 6						
10	Line 8 amount divided by Line 9 amount						
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015			
1	Distributable amount for 2015 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2015						
	(reasonable cause required-see instructions)						
3	Excess distributions carryover, if any, to 2015:						

•	Excess distributions carryover, if arry, to 2015.		
	a		
	b		
	C		
	d From 2013		
	e From 2014		
	f Total of lines 3a through e		
	g Applied to underdistributions of prior years		
	h Applied to 2015 distributable amount		

i	Carryover from 2010 not applied (see in	nstructions)		
j	Remainder. Subtract lines 3g, 3h, and 3	3i from 3f.		
4	Distributions for 2015 from Section			
	D, line 7:	3		

a Applied to underdistributions of prior years **b** Applied to 2015 distributable amount c Remainder. Subtract lines 4a and 4b from 4.

Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount

greater than zero, see instructions). 6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).

Excess distributions carryover to 2016. Add lines 3j and 4c.

8 Breakdown of line 7:

а b

c Excess from 2013

d Excess from 2014 e Excess from 2015

Schedule A (Form 990 or 990-EZ) 2015

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

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

2015

OMB No. 1545-0047

Inspection

Open to Public

	or the organization	Employer identification number
	YS & GIRLS CLUB OF HERNANDO COUNT	59-3550575
Pa	Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accoun	ts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year) .	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose	
_	conferring impermissible private benefit?	Yes No
Pa	rt II Conservation Easements.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (e.g., recreation or education)	important land area
	Protection of natural habitat Preservation of a certified his	storic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a cons	servation
	easement on the last day of the tax year.	Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
С	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a	
	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization	zation during the
	tax year	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation	easements during the year
	-	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation ease	ements during the year
	▶ \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B	s)(i)
	and section 170(h)(4)(B)(ii)? $ \ldots $	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statem	ent, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that of	describes the
	organization's accounting for conservation easements.	
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Oth	er Similar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and	d balance sheet
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in further	therance of
	public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items	S.
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and ba	lance sheet
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in further	therance of
	public service, provide the following amounts relating to these items:	
	(i) Revenue included on Form 990, Part VIII, line 1	> \$
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, p	provide the
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1	· · · · · ▶ \$
b	Assets included in Form 990, Part X	> \$

Pa	t III Organizations Maintaining Colle	ctions of Art, Histo	rical Treasures,	or Other Similar As	sets (continued)
3	Using the organization's acquisition, accession, and o	ther records, check any o	f the following that are a	a significant use of its	
	collection items (check all that apply):				
а	Public exhibition	d Loan or excha	inge programs		
b	Scholarly research				
С	Preservation for future generations				
4	Provide a description of the organization's collections	and explain how they fur	ther the organization's e	exempt purpose in Part	
	XIII.	,			
5	During the year, did the organization solicit or receive	donations of art historica	I treasures or other sin	nilar	
•	assets to be sold to raise funds rather than to be mail				Yes No
Pa	t IV Escrow and Custodial Arrangement		ariizationio dolloctioni.		🗀 100 🗀 110
	Complete if the organization answe		990 Part IV line 9	or reported an amo	ount on Form
	990, Part X, line 21.	100 100 0111 01111 0	000, 1 41117, 11110 0	, or reported arrame	on ronn
1a	Is the organization an agent, trustee, custodian or other	er intermediary for contribu	utions or other assets n	not	
		•			Yes No
b	If "Yes," explain the arrangement in Part XIII and com				100 _ 100
D	ii res, explain the arrangement in rate xiii and com	piete the following table.		Δ	mount
С	Beginning balance				inount
d	Additions during the year				
	Distributions during the year				
e f	Ending balance				
	Did the organization include an amount on Form 990,				🗌 Yes 🔲 No
2a				•	
Do:	If "Yes," explain the arrangement in Part XIII. Check be tV Endowment Funds.	iere ii the explanation has	been provided on Part	. Alli	
Га	Complete if the organization answe	rad "Vac" on Form (000 Part IV line 1	0	
	·				
1-		Current year (b) Pri	or year (c) Two year	s back (d) Three years bac	k (e) Four years back
1a	Beginning of year balance				
b	Contributions				
С	Net investment earnings, gains, and				
	losses				
d	Grants or scholarships				
е	Other expenditures for facilities and				
	programs				
f	Administrative expenses				
g	End of year balance				
2	Provide the estimated percentage of the current year of	· -	mn (a)) held as:		
а	Board designated or quasi-endowment	%			
b	Permanent endowment ▶ %				
С	Temporarily restricted endowment	%			
	The percentages in lines 2a, 2b, and 2c should equal	100%.			
3a	Are there endowment funds not in the possession of	the organization that are h	neld and administered for	or the	
	organization by:				Yes No
	(i) unrelated organizations				3a(i)
	(ii) related organizations				3a(ii)
b	If "Yes" on 3a(ii), are the related organizations listed a	as required on Schedule F	₹?		3b
4	Describe in Part XIII the intended uses of the organiz	ation's endowment funds	•		
Pa	t VI Land, Buildings, and Equipment.				
	Complete if the organization answe	red "Yes" on Form 9	990, Part IV, line 1	1a. See Form 990, F	Part X, line 10.
	Description of property	(a) Cost or other basis	(b) Cost or other basis	(c) Accumulated	(d) Book value
		(investment)	(other)	depreciation	
1a	Land				
b	Buildings	79,793		31,584	48,209
С	Leasehold improvements	17,165		6,201	10,964
d	Equipment	134,126		63,314	70,812
е	Other				
Tota	. Add lines 1a through 1e. (Column (d) must equal For	m 990, Part X, column (B), line 10c.)		129,985

Part VII	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							
	eld equity interests						
(3) Other							
(A)							
(B)							
(C)							
(D)	-						
(E) (F)							
(G)							
(U)							
	must equal Form 990, Part X, col. (B) line 12.)						
Part VIII	Investments - Program Related.						
I dit viii	Complete if the organization answere	d "Yes" on Form 990 Pa	rt 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				
(1)			•				
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
Total. (Column (b)	must equal Form 990, Part X, col. (B) line 13.)						
Part IX	Other Assets.						
	Complete if the organization answere	d "Yes" on Form 990, Pa	rt IV, line 11d. See Form 990	, Part X, line 15.			
-	(a) [Description		(b) Book value			
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)		_,					
	in (b) must equal Form 990, Part X, col. (B) line 1	5.)					
Part X	Other Liabilities.	-l \\ 000 D-	mt IV / Em a 44 a a m 444 Ca a Fam	000 Davit V			
	Complete if the organization answere line 25.	d "Yes" on Form 990, Pa	rt IV, line 11e or 11f. See For	m 990, Part X,			
1.	(a) Description of liability	(b) Book value					
-	income taxes	(b) Book value					
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
	must equal Form 990, Part X, col. (B) line 25.)						
	uncertain tax positions. In Part XIII, provide the te	xt of the footnote to the organiza	ation's financial statements that report	s the			

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Sched	ule D (Form 990) 2015 BOYS & GIRLS CLUB OF HERNANDO COUNT	59-3550575	Page 4
Pai	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	. 1	1,711,121
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments 2a		
b	Donated services and use of facilities	4	
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	. 2e	250 704
3	Subtract line 2e from line 1		350,784
		. 3	1,360,337
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
_C	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		1,360,337
Pai	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	. 1	1,722,833
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	4	
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	. 2e	350,784
3	Subtract line 2e from line 1	. 3	1,372,049
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	. 4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	. 5	1,372,049
	rt XIII Supplemental Information.		_,_,_,_
Provi	ide 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	
	art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	•	
, -			
01.	Other expenses included on Form 990 (Part XII, line 4b))	
<u></u>	- 001101 011p011505 111014404 011 1014 750 (1410 1111, 11110 115)	<u> </u>	
тнк	DIFFERENCE IS DUE TO BOOK VERUS TAX DEPRECIATION		
	DITIEMENT TO DOOR VEROS TIM DEFRECITION		

EEA Schedule D (Form 990) 2015

		Federal Supporting Staten	nents	2015 PG01
Name(s) as shown on return BOYS & GIRLS CLUB OF HERNANDO COUNT			59-3550575	
		FORM 4562 - LINE 19E	3	Statement #67
BASIS 1,465 2,995 800 6,063	RP 5 5 5 5	CV MQ MQ MQ MQ	METHOD SL SL SL SL	DEDUCTION 110 75 20 152
		FORM 4562 - LINE 190		PG01 Statement #68
BASIS 2,850 2,963 1,284	RP 7 7 7	CV MQ MQ MQ	METHOD SL SL SL	DEDUCTION 356 370 161
TOTAL				<u>887</u>
		FORM 4562 - LINE 19D)	PG01 Statement #69
BASIS 2,982 640	RP 10 10	CV MQ MQ	METHOD SL SL	DEDUCTION 378
TOTAL				<u>45</u>

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number BOYS & GIRLS CLUB OF HERNANDO COUNT 59-3550575 01. Form 990 governing body review (Part VI, line 11) THE EXECTUTIVE DIRECTOR AND THE BOARD OF DIRECTORS REVIEW THE FORM 990 BEFORE IT IS FILED 02. Conflict of interest policy compliance (Part VI, line 12c) THE BOARD AND THE EXECTUTIVE DIRECTOR REVIEW COMPLIANCE WITH THE POLICY TO INSURE THAT THERE ARE NO CONFLICTS OF INTEREST. 03. CEO, executive director, top management comp (Part VI, line 15a) THE COMPENSATION OF THE EXECTUTIVE DIRECTOR IS SET BY A COMMITTEE OF THE BOARD OF DIRECTORS AND IS COMPARED TO THE NATIONAL AVERAGES FOR SIMILIAR POSITIONS IN THE U.S. 04. Other officer or key employee compensation (Part VI, line 15b THE COMPENSATION OF THE EXECTUTIVE DIRECTOR IS SET BY A COMMITTEE OF THE BOARD OF DIRECTORS AND IS COMPARED TO THE NATIONAL AVERAGES FOR SIMILIAR POSITIONS IN THE U.S. 05. Governing documents, etc, available to public (Part VI, line 19) THE GOVERNING DOCUMENTS ARE AVAILABLE ON REQUEST FROM THE ORGANIZATION. 06. List of other expenses (Part IX, line 24e) SCHEDULES OF OTHER EXPENSES ARE ENCLOSED IN THE TAX RETURN AS ATTACHMENTS TO THE RETURN.

Form 4562

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

OMB No. 1545-0172 2015

Department of the Treasury Internal Revenue Service (99)

▶ Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

Attachment Sequence No. 179

Business or activity to which this form relates Identifying number FORM 990 - 1 59-3550575 BOYS & GIRLS CLUB OF HERNANDO CO **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 1 2 Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 3 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 6 (a) Description of property (b) Cost (business use only) 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 9 10 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 Carryover of disallowed deduction to 2016. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 15 15 22,380 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions.) 17 MACRS deductions for assets placed in service in tax years beginning before 2015 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2015 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (business/investment use (g) Depreciation deduction (a) Classification of property placed in (e) Convention (f) Method period service only-see instructions) 19a 3-year property 357 b 5-year property #67 Statement 887 С 7-year property Statement d 10-year property Statement #69 e 15-year property 20-year property 25-year property 25 yrs. Residential rental S/I 27.5 yrs. MM property 27.5 yrs. MM S/I 39 yrs. MM S/I Nonresidential real property MM Section C - Assets Placed in Service During 2015 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12-year 12 yrs. S/L 40-year 40 yrs. MM S/L Part IV **Summary** (See instructions.) Listed property. Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter 23,669 here and on the appropriate lines of your return. Partnerships and S corporations - see instructions 22 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23